

WSR 06-22-080
EMERGENCY RULES
DEPARTMENT OF
SOCIAL AND HEALTH SERVICES
(Medical Assistance)

[Filed October 31, 2006, 3:14 p.m., effective October 31, 2006]

Effective Date of Rule: Immediately.

Purpose: The department is codifying new special terms and conditions in the new family planning/TAKE CHARGE waiver as set forth by the Centers for Medicare and Medicaid Services (CMS) for the state of Washington.

Citation of Existing Rules Affected by this Order: Amending WAC 388-532-050, 388-532-100, 388-532-110, 388-532-120, 388-532-520, 388-532-530, 388-532-700, 388-532-710, 388-532-720, 388-532-730, 388-532-740, 388-532-750, 388-532-760, 388-532-780, and 388-532-790.

Statutory Authority for Adoption: RCW 74.08.090 and 74.09.800.

Under RCW 34.05.350 the agency for good cause finds that state or federal law or federal rule or a federal deadline for state receipt of federal funds requires immediate adoption of a rule.

Reasons for this Finding: This emergency rule adoption is necessary while the permanent rule-making process is being completed because the current rules are out of compliance with special terms and conditions of the new family planning/TAKE CHARGE waiver set forth by the CMS for the state of Washington. The waiver was signed August 31, 2006, and is retroactive effective July 1, 2006. Immediate adoption of this emergency rule is required to prevent loss of 90% federal matching funds for the family planning/TAKE CHARGE program.

Number of Sections Adopted in Order to Comply with Federal Statute: New 0, Amended 0, Repealed 0; Federal Rules or Standards: New 1, Amended 15, Repealed 0; or Recently Enacted State Statutes: New 0, Amended 0, Repealed 0.

Number of Sections Adopted at Request of a Nongovernmental Entity: New 0, Amended 0, Repealed 0.

Number of Sections Adopted on the Agency's Own Initiative: New 0, Amended 0, Repealed 0.

Number of Sections Adopted in Order to Clarify, Streamline, or Reform Agency Procedures: New 0, Amended 0, Repealed 0.

Number of Sections Adopted Using Negotiated Rule Making: New 0, Amended 0, Repealed 0; Pilot Rule Making: New 0, Amended 0, Repealed 0; or Other Alternative Rule Making: New 1, Amended 15, Repealed 0.

Date Adopted: October 30, 2006.

Andy Fernando, Manager
Rules and Policies Assistance Unit

AMENDATORY SECTION (Amending WSR 05-24-032, filed 11/30/05, effective 12/31/05)

WAC 388-532-050 Reproductive health services—Definitions. The following definitions and those found in WAC 388-500-005, Medical definitions, apply to this chapter.

"Complication"—A condition occurring subsequent to and directly arising from the family planning services received under the rules of this chapter.

"Comprehensive family planning preventive medicine visit" - For the purposes of this program, is a comprehensive, preventive, contraceptive visit which includes:

- An age and gender appropriate history and examination offered to female Medicaid clients at-risk for pregnancy;
- Education and counseling for risk reduction (ECRR) regarding the prevention of unintended pregnancy; and
- For family planning only and TAKE CHARGE clients, routine gonorrhea and chlamydia testing for women thirteen through twenty-five years of age only.

This preventive visit may only be billed once every twelve months, per client by a department-contracted TAKE CHARGE provider and only for female clients needing contraception.

"Contraception"—Preventing pregnancy through the use of contraceptives.

"Contraceptive"—A device, drug, product, method, or surgical intervention used to prevent pregnancy.

"Delayed pelvic protocol" - The practice of allowing a woman to postpone a pelvic exam during a contraceptive visit to facilitate initiation or continuation of a hormonal contraceptive method.

"Department"—The department of social and health services.

"Department-approved family planning provider"—A physician, advanced registered nurse practitioner (ARNP), or clinic that has:

- Agreed to the requirements of WAC 388-532-110;
- Signed a core provider agreement with the department;
- Assigned a unique family planning provider number by the department; and
- ~~((Signed a special agreement that allows the provider))~~ Agreed to bill for family planning laboratory services provided to clients enrolled in a department-managed care plan through an independent laboratory certified through the Clinical Laboratory Improvements Act (CLIA).

"Family planning services"—Medically safe and effective medical care, educational services, and/or contraceptives that enable individuals to plan and space the number of children and avoid unintended pregnancies.

"Medical identification card"—The document the department uses to identify a client's eligibility for a medical program.

"Natural family planning"—Also known as fertility awareness method, means methods such as observing, recording, and interpreting the natural signs and symptoms associated with the menstrual cycle to identify the fertile days of the menstrual cycle and avoid unintended pregnancies.

"Over-the-counter (OTC)"—See WAC 388-530-1050 for definition.

"Sexually transmitted disease infection (STD-I)"—Is a disease or infection acquired as a result of sexual contact.

AMENDATORY SECTION (Amending WSR 05-24-032, filed 11/30/05, effective 12/31/05)

WAC 388-532-100 Reproductive health services—Client eligibility. (1) The department covers limited reproductive health services for clients eligible for the following medical assistance programs:

- (a) Children's health insurance program (CHIP);
 - (b) Categorically needy program (CNP);
 - (c) General assistance unemployable (GAU);
 - (d) Limited casualty program-medically needy program (LCP-MNP); and
 - (e) Alcohol and Drug Abuse Treatment and Support Act (ADATSA).
- (2) Clients enrolled in a department managed care plan may self-refer outside their plan for family planning services (excluding sterilizations for clients twenty-one years of age or older), abortions, and STD-I services to any of the following:
- (a) A department-approved family planning provider;
 - (b) A department-contracted local health department/STD-I clinic; ~~((e))~~
 - (c) A department-contracted provider for abortion services; or
 - (d) A department-contracted pharmacy for:
 - (i) Over-the-counter contraceptive drugs and supplies;
 - (ii) Contraceptives and STD-I related prescriptions from a department-approved family planning provider or department-contracted local health department/STD-I clinic.

AMENDATORY SECTION (Amending WSR 05-24-032, filed 11/30/05, effective 12/31/05)

WAC 388-532-110 Reproductive health services—Provider requirements. To be reimbursed by the department for reproductive health services provided to eligible clients, physicians, ARNPs, licensed midwives, and department-approved family planning providers must:

- (1) Meet the requirements in chapter 388-502 WAC, Administration of medical programs—Provider rules;
- (2) Provide only those services that are within the scope of their licenses;
- (3) Educate clients on Food and Drug Administration (FDA)-approved prescription birth control methods and over-the-counter (OTC) birth control drugs and supplies and related medical services;
- (4) Provide medical services related to FDA-approved prescription birth control methods and OTC birth control drugs and supplies upon request;
- (5) Supply or prescribe FDA-approved prescription birth control methods and OTC birth control drugs and supplies upon request; and
- (6) Refer the client to an appropriate provider if unable to meet the requirements of subsections (3), (4), and (5) of this section.

AMENDATORY SECTION (Amending WSR 05-24-032, filed 11/30/05, effective 12/31/05)

WAC 388-532-120 Reproductive health—Covered services. In addition to those services listed in WAC 388-

531-0100 Physician's related services, the department covers the following reproductive health services:

(1) Services for women

(a) ~~((Cervical, vaginal, and breast cancer screening examination once per year as medically necessary))~~ One of the following per client, per year as medically necessary:

(i) One comprehensive family planning preventive medicine visit billable by a TAKE CHARGE provider only. Under a delayed pelvic protocol, the comprehensive family planning preventive medicine visit may be split into two visits, per client, per year; or

(ii) A gynecological examination, billed by a provider other than a TAKE CHARGE provider, which may include a cervical and vaginal cancer screening examination, when it is medically necessary.

(b) The comprehensive family planning preventive medicine visit must be:

(i) Provided by one or more of the following TAKE CHARGE trained providers:

(A) Physician or physician's assistant (PA);

(B) An advanced registered nurse practitioner (ARNP);

or

(C) A registered nurse (RN), licensed practical nurse (LPN), a trained and experienced health educator, medical assistant, or certified nursing assistant when used for assisting and augmenting the above listed clinicians.

(ii) Documented in the client's chart with detailed information that would allow for a well-informed follow-up visit.

~~((b))~~ (c) Food and Drug Administration (FDA) approved prescription contraception methods as identified in chapter 388-530 WAC, Pharmacy services.

~~((e))~~ (d) Over-the-counter (OTC) contraceptives, drugs and supplies (as described in chapter 388-530 WAC, Pharmacy services).

~~((f))~~ (e) Sterilization procedures that meet the requirements of WAC 388-531-1550, if it is:

(i) Requested by the client; and

(ii) Performed in an appropriate setting for the procedure.

~~((g))~~ (f) Screening and treatment for sexually transmitted diseases-infections (STD-I), including laboratory tests and procedures.

~~((h))~~ (g) Education and supplies for FDA-approved contraceptives, natural family planning and abstinence.

~~((i))~~ (h) Mammograms for clients forty years of age and older, once per year;

~~((j))~~ (i) Colposcopy and related medically necessary follow-up services;

~~((k))~~ (j) Maternity-related services as described in chapter 388-533 WAC; and

~~((l))~~ (k) Abortion.

(2) Services for men

(a) Office visits where the primary focus and diagnosis is contraceptive management and/or there is a medical concern;

(b) Over-the-counter (OTC) contraceptives, drugs and supplies (as described in chapter 388-530 WAC, Pharmacy services).

(c) Sterilization procedures that meet the requirements of WAC 388-531-1550(1), if it is:

(i) Requested by the client; and

(ii) Performed in an appropriate setting for the procedure.

(d) Screening and treatment for sexually transmitted diseases-infections (STD-I), including laboratory tests and procedures.

(e) Education and supplies for FDA-approved contraceptives, natural family planning and abstinence.

(f) Prostate cancer screenings for men (~~who are fifty years of age and older~~), once per year, when medically necessary.

AMENDATORY SECTION (Amending WSR 05-24-032, filed 11/30/05, effective 12/31/05)

WAC 388-532-520 Family planning only program—Provider requirements. To be reimbursed by the department for services provided to clients eligible for the family planning only program, physicians, ARNPs, and/or department-approved family planning providers must:

(1) Meet the requirements in chapter 388-502 WAC, Administration of medical programs—Provider rules;

(2) Provide only those services that are within the scope of their licenses;

(3) Educate clients on Food and Drug Administration (FDA)-approved prescription birth control methods and over-the-counter (OTC) birth control drugs and supplies and related medical services;

(4) Provide medical services related to FDA-approved prescription birth control methods and (~~over the counter~~) OTC birth control drugs and supplies upon request;

(5) Supply or prescribe FDA-approved prescription birth control methods and (~~over the counter~~) OTC birth control drugs and supplies upon request; and

(6) Refer the client to an appropriate provider if unable to meet the requirements of subsections (3), (4), and (5) of this section.

AMENDATORY SECTION (Amending WSR 05-24-032, filed 11/30/05, effective 12/31/05)

WAC 388-532-530 Family planning only program—Covered services. The department covers the following services under the family planning only program:

(1) One of the following, per client, per year as medically necessary:

(a) One comprehensive family planning preventive medicine visit billable by a TAKE CHARGE provider only. Under a delayed pelvic protocol, the comprehensive family planning preventive medicine visit may be split into two visits, per client, per year; or

(b) A gynecological examination (~~that~~), billed by a provider other than a TAKE CHARGE provider, which may include a cervical and vaginal cancer screening examination, one per year when it is:

~~((a))~~ (i) Provided according to the current standard of care; and

~~((b))~~ (ii) Conducted at the time of an office visit with a primary focus and diagnosis of family planning.

(2) The comprehensive family planning preventive medicine visit must be:

(a) Provided by one or more of the following TAKE CHARGE trained providers:

(i) Physician or physician's assistant (PA);

(ii) An advanced registered nurse practitioner (ARNP);

or

(iii) A registered nurse (RN), licensed practical nurse (LPN), a trained and experienced health educator, medical assistant, or certified nursing assistant when used for assisting and augmenting the above listed clinicians.

(b) Documented in the client's chart with detailed information that would allow for a well-informed follow-up visit.

(3) An office visit directly related to a family planning problem, when medically necessary.

(4) Food and Drug Administration (FDA) approved prescription contraception methods meeting the requirements of chapter 388-530 WAC, Pharmacy services.

~~((3))~~ (5) Over-the-counter (OTC) contraceptive, drugs and supplies (as described in chapter 388-530 WAC, Pharmacy services).

~~((4))~~ (6) Sterilization procedure that meets the requirements of WAC 388-531-1550, if it is:

(a) Requested by the client; and

(b) Performed in an appropriate setting for the procedure.

~~((5))~~ (7) Screening and treatment for sexually transmitted diseases-infections (STD-I), including laboratory test and procedures only when the screening and treatment is:

(a) For chlamydia and gonorrhea as part of the comprehensive family planning preventive medicine visit for women thirteen to twenty-five years of age; or

(b) Performed in conjunction with an office visit that has a primary focus and diagnosis of family planning; and

~~((b))~~ (c) Medically necessary for the client to safely, effectively, and successfully use, or to continue to use, her chosen contraceptive method.

~~((6))~~ (8) Education and supplies for FDA-approved contraceptives, natural family planning and abstinence.

AMENDATORY SECTION (Amending WSR 05-24-032, filed 11/30/05, effective 12/31/05)

WAC 388-532-700 TAKE CHARGE program—Purpose. TAKE CHARGE is a (~~five-year~~) family planning demonstration and research program approved by the federal government under a Medicaid program waiver. The purpose of the TAKE CHARGE program is to make family planning services available to men and women with incomes at or below two hundred percent of the federal poverty level. (~~TAKE CHARGE is approved by the federal government under a Medicaid program waiver and runs from July 1, 2001, through June 30, 2006 (unless terminated or extended prior to June 30, 2006).~~) See WAC 388-532-710 for a definition of TAKE CHARGE.

AMENDATORY SECTION (Amending WSR 05-24-032, filed 11/30/05, effective 12/31/05)

WAC 388-532-710 TAKE CHARGE program—Definitions. The following definitions and those found in WAC 388-500-0005 medical definitions and WAC 388-532-050

apply to the ~~((medical assistance administration's (MAA's)) department's~~ TAKE CHARGE program.

"Ancillary services"—Those family planning services provided to TAKE CHARGE clients by ~~((MAA's))~~ department-contracted providers who are not TAKE CHARGE providers. These services include, but are not limited to, family planning pharmacy services, family planning laboratory services and sterilization ~~((surgical))~~ services.

"Application assistance"—The process a TAKE CHARGE provider follows in helping a client to complete and submit an application to MAA for the TAKE CHARGE program.

"Education, counseling and risk reduction intervention" or "ECRR"—~~((A stand alone department designated service, specifically intended for clients at higher risk of contraceptive failure, that strengthen a client's decision making skills to make the best choice of contraceptive method and reduce the risk of unintended pregnancy. ECRR services must include:~~

~~(1) Helping the client critically evaluate which contraceptive method is most acceptable and can be used most effectively by her/him.~~

~~(2) Assessing and addressing other client personal considerations, risk factors (including sexually transmitted infections), and behaviors that impact her/his use of contraception.~~

~~(3) Facilitating a discussion of the male role in successful use of chosen contraceptive method, as appropriate.~~

~~(4) Facilitating contingency planning (the back-up method) regarding the chosen contraceptive method, including planning for emergency contraception.~~

~~(5) Scheduling a follow-up appointment as medically necessary for birth control evaluation for the safe, effective and successful use of the client's chosen contraceptive method and to reinforce positive contraceptive and other self protective behaviors.~~

~~(6) If no contraceptive method is chosen, discussing the likelihood of a pregnancy and helping the client assess his/her emotional, physical, and financial readiness for pregnancy and/or parenting.)~~ Client-centered education and counseling services designed to strengthen decision making skills and support a client's safe, effective and successful use of his or her chosen contraceptive method. For women, ECRR is part of the annual preventive medicine visit. For men, ECRR is a stand alone service for those men seeking family planning services and whose partners are at moderate to high risk of unintended pregnancy.

~~((**"Intensive follow-up services" or "IFS"**—Those supplemental services specified in some TAKE CHARGE provider contracts that support clients in the successful use of contraceptive methods. Department selected TAKE CHARGE providers perform IFS as part of the research component of the TAKE CHARGE program (see WAC 388-532-730 (1)(f)).))~~

"TAKE CHARGE"—The department's ~~((five-year))~~ demonstration and research program approved by the federal government under a Medicaid program waiver to provide family planning services.

"TAKE CHARGE provider"—A provider who is approved by the department to participate in TAKE CHARGE by:

(1) Being a department-approved family planning provider; and

(2) Having a supplemental TAKE CHARGE agreement to provide TAKE CHARGE family planning services to eligible clients under the terms of the federally approved Medicaid waiver for the TAKE CHARGE program.

AMENDATORY SECTION (Amending WSR 05-24-032, filed 11/30/05, effective 12/31/05)

WAC 388-532-720 TAKE CHARGE program—Eligibility. (1) The TAKE CHARGE program is for men and women. To be eligible for the TAKE CHARGE program, an applicant must:

(a) Be a United States citizen, U.S. National, or "qualified alien" as described in chapter 388-424 WAC and provide proof of citizenship or qualified alien status, and identity;

(b) Be a resident of the state of Washington as described in WAC 388-468-0005;

(c) Have income at or below two hundred percent of the federal poverty level as described in WAC 388-478-0075;

(d) Need family planning services;

(e) Apply voluntarily for family planning services with a TAKE CHARGE provider; and

~~((e) Need family planning services but have:~~

~~(i) No family planning coverage through another medical assistance program; or~~

~~(ii) Family planning coverage that does not cover one hundred percent of the applicant's chosen birth control))~~ (f) Not currently covered through another medical assistance program for family planning or have any health insurance that covers family planning.

(2) A client who is currently pregnant or sterilized is not eligible for TAKE CHARGE.

(3) A client is authorized for TAKE CHARGE coverage for one year from the date the department determines eligibility or for the duration of the demonstration and research program, whichever is shorter, as long as the criteria in subsection (1) and (2) of this section continue to be met. Upon reapplication for TAKE CHARGE by the client, the department may renew the coverage for additional periods of up to one year each, or for the duration of the demonstration and research program, whichever is shorter.

AMENDATORY SECTION (Amending WSR 05-24-032, filed 11/30/05, effective 12/31/05)

WAC 388-532-730 TAKE CHARGE program—Provider requirements. (1) A TAKE CHARGE provider must:

(a) Be a department-approved family planning provider as described in WAC 388-532-050;

(b) Sign the supplemental TAKE CHARGE agreement to participate in the TAKE CHARGE demonstration and research program according to the department's TAKE CHARGE program guidelines;

(c) Participate in the department's specialized training for the TAKE CHARGE demonstration and research program prior to providing TAKE CHARGE services. Providers must ~~((assure))~~ document that each individual responsible for providing TAKE CHARGE services is trained on all aspects of the TAKE CHARGE program;

(d) Comply with the required general department and TAKE CHARGE provider policies, procedures, and administrative practices as detailed in the department's billing instructions and provide referral information to clients regarding available and affordable nonfamily planning primary care services; ~~(and)~~

(e) If requested by the department, participate in the research and evaluation component of the TAKE CHARGE demonstration and research program. ~~(If selected by the department for the research and evaluation component, the provider must accept assignment to either:~~

~~(i) A randomly selected group of providers that give intensive follow-up service (IFS) to TAKE CHARGE clients under a TAKE CHARGE research component client services contract. See WAC 388-532-740(2) for a related limitation; or~~

~~(ii) A randomly selected control group of providers subject to a TAKE CHARGE research component client services contract.)~~

(f) Unless otherwise requested in writing by the client, forward the client's medical identification card and TAKE CHARGE brochure to the client within seven working days of receipt;

(g) Inform the client of their right to see any TAKE CHARGE provider within the state; and

(h) Refer the client to available and affordable non-family planning care services, as needed.

(2) Department providers (e.g., pharmacies, laboratories, surgeons performing sterilization procedures) who are not TAKE CHARGE providers may furnish family planning ~~(and take charge-lary))~~ ancillary TAKE CHARGE services, as defined in this chapter, to eligible clients. The department reimburses for these services under the rules and fee schedules applicable to the specific services provided under the department's other programs.

Reviser's note: RCW 34.05.395 requires the use of underlining and deletion marks to indicate amendments to existing rules. The rule published above varies from its predecessor in certain respects not indicated by the use of these markings.

AMENDATORY SECTION (Amending WSR 05-24-032, filed 11/30/05, effective 12/31/05)

WAC 388-532-740 TAKE CHARGE program—Covered services for women. (1) The department covers the following TAKE CHARGE services for ~~((men and))~~ women:

(a) One session of application assistance per client, per year;

(b) Food and Drug Administration (FDA) approved prescription and nonprescription contraceptives as provided in chapter 388-530 WAC;

(c) Over-the-counter (OTC) contraceptives, drugs, and supplies (as described in chapter ~~((388-538))~~ 388-530 WAC, Pharmacy services);

~~(d) ((Gynecological examination that may include a cervical and vaginal cancer screening exam, one per year when it is:~~

~~(i) Provided according to the current standard of care; and~~

~~(ii) Conducted at the time of an office visit with a primary focus and diagnosis of family planning.~~

~~(e) Education, counseling, and risk reduction (ECRR) intervention, specifically intended for clients at higher risk of contraceptive failure, that have identified or demonstrated risks of unintended pregnancy. MAA limits ECRR as follows:~~

~~(i) For women at risk of unintended pregnancy, limited to one ECRR service every ten months;~~

~~(ii) For men whose sexual partner is at risk of unintended pregnancy, limited to one ECRR service every twelve months;~~

~~(iii) Must be a minimum of thirty minutes in duration;~~

~~(iv) Must be appropriate and individualized to the client's needs, age, language, cultural background, risk behaviors, sexual orientation, and psychosocial history;~~

~~(v) Must be provided by one of the following TAKE CHARGE trained providers:~~

~~(A) An advanced registered nurse practitioner (ARNP);~~

~~(B) Registered nurse (RN), licensed practical nurse (LPN);~~

~~(C) Physician or physician's assistant (PA); or~~

~~(D) A trained and experienced health educator or medical assistant when used for assisting and augmenting the above listed clinicians.~~

~~(vi) Must be documented in the client's chart with detailed information that would allow for a well-informed follow-up visit;~~

~~(vii) A client who does not have identified or demonstrated risks of unintended pregnancy and who is not at increased risk of contraceptive failure is not eligible for ECRR.~~

~~(f)) One comprehensive family planning preventive medicine visit billable by a TAKE CHARGE provider only. Under a delayed pelvic protocol, the comprehensive family planning preventive medicine visit may be split into two visits, per client, per year.~~

~~(e) Sterilization procedure that meets the requirements of WAC 388-531-1550, if the service is:~~

~~(i) Requested by the TAKE CHARGE client; and~~

~~(ii) Performed in an appropriate setting for the procedure.~~

~~((g)) (f) Screening and treatment for sexually transmitted diseases-infections (STD-I), including laboratory tests and procedures, only when the screening and treatment is:~~

~~(i) For chlamydia and gonorrhea as part of the comprehensive family planning preventive medicine visit for women thirteen to twenty-five years of age; or~~

~~(ii) Performed in conjunction with an office visit that has a primary focus and diagnosis of family planning; and~~

~~((h)) (iii) Medically necessary for the client to safely, effectively, and successfully use, or continue to use, his or her chosen contraceptive method.~~

~~((h)) (g) Education and supplies for FDA-approved contraceptives, natural family planning and abstinence.~~

~~(2) ((The department covers intensive follow-up services (IFS) for certain clients as part of the research component of the TAKE CHARGE demonstration and research program. Only those clients served by the department's randomly selected research sites receive IFS (see WAC 388-532-730 (1)(e)(i)). The specific elements of IFS are negotiated with each~~

~~research site~~) The comprehensive family planning preventive medicine visit must be:

(a) Provided by one or more of the following TAKE CHARGE trained providers:

(i) Physician or physician's assistant (PA);

(ii) An advanced registered nurse practitioner (ARNP);

or

(iii) A registered nurse (RN), licensed practical nurse (LPN), a trained and experienced health educator, medical assistant, or certified nursing assistant when used for assisting and augmenting the above listed clinicians.

(b) Documented in the client's chart with detailed information that would allow for a well-informed follow-up visit.

(3) An office visit directly related to a family planning problem, when medically necessary.

NEW SECTION

WAC 388-532-745 TAKE CHARGE Program - Covered services for men. The department covers the following TAKE CHARGE services for men:

(1) One session of application assistance per client, per year;

(2) Over-the-counter (OTC) contraceptives, drugs, and supplies (as described in chapter 388-530 WAC, Pharmacy Services);

(3) Sterilization procedure that meets the requirements of WAC 388-531-1550, if the service is:

(a) Requested by the TAKE CHARGE client; and

(b) Performed in an appropriate setting for the procedure.

(4) Screening and treatment for sexually transmitted diseases-infections (STD-I), including laboratory tests and procedures, only when the screening and treatment is related to, and medically necessary for, a sterilization procedure.

(5) Education and supplies for FDA-approved contraceptives, natural family planning and abstinence.

(6) One education and counseling session for risk reduction (ECRR) per client, every twelve months. ECRR must be:

(a) Provided by one or more of the following TAKE CHARGE trained providers:

(i) Physician or physician's assistant (PA);

(ii) An advanced registered nurse practitioner (ARNP);

or

(iii) A registered nurse (RN), licensed practical nurse (LPN), a trained and experienced health educator, medical assistant, or certified nursing assistant when used for assisting and augmenting the above listed clinicians; and

(b) Documented in the client's chart with detailed information that would allow for a well-informed follow-up visit.

AMENDATORY SECTION (Amending WSR 05-24-032, filed 11/30/05, effective 12/31/05)

WAC 388-532-750 TAKE CHARGE program—Non-covered services. The department does not cover medical services under the TAKE CHARGE program (~~unless those services are~~):

(1) Abortions and other pregnancy-related services;

(2) Any other medical services, unless those services are:

(a) Performed in relation to a primary focus and diagnosis of family planning; and

~~((2))~~ (b) Medically necessary for the client to safely, effectively, and successfully use, or continue to use, his or her chosen contraceptive method.

AMENDATORY SECTION (Amending WSR 05-24-032, filed 11/30/05, effective 12/31/05)

WAC 388-532-760 TAKE CHARGE program—Documentation requirements. In addition to the documentation requirements in WAC 388-502-0020, TAKE CHARGE providers must keep the following records:

(1) TAKE CHARGE (~~(preapplication worksheet)~~) application form(s) ((and application(s));

(2) Signed supplemental TAKE CHARGE agreement to participate in the TAKE CHARGE program;

(3) Documentation of the department's specialized TAKE CHARGE training and/or in-house in-service TAKE CHARGE training for each individual responsible for providing TAKE CHARGE.

(4) Chart notes that reflect the primary focus and diagnosis of the visit was family planning;

(5) Contraceptive methods discussed with the client;

(6) Notes on any discussions of emergency contraception and needed prescription(s);

(7) The client's plan for the contraceptive method to be used, or the reason for no contraceptive method and plan;

(8) Documentation of the education, counseling and risk reduction (ECRR) service, if provided, (~~(including all of the required components as defined in WAC 388-532-710)~~) with sufficient detail that allows for follow-up;

(9) Documentation of referrals to or from other providers;

(10) A form signed by the client authorizing release of information for referral purposes, as necessary; (~~and~~)

(11) The client's written and signed consent requesting that his or her medical identification card be sent to the TAKE CHARGE provider's office to protect confidentiality;

(12) A copy of the client's picture identification;

(13) Documentation used to establish US citizenship or legal permanent resident; and

(14) If applicable, a copy of the completed DSHS sterilization consent form [DSHS 13-364 - available for download at <http://www.dshs.wa.gov/msa/forms/eforms.html>] (see WAC 388-531-1550).

Reviser's note: The brackets and enclosed material in the text of the above section occurred in the copy filed by the agency and appear in the Register pursuant to the requirements of RCW 34.08.040.

AMENDATORY SECTION (Amending WSR 05-24-032, filed 11/30/05, effective 12/31/05)

WAC 388-532-780 TAKE CHARGE program—Reimbursement and payment limitations. (1) The department limits reimbursement under the TAKE CHARGE program to those services that:

(a) Have a primary focus and diagnosis of family planning as determined by a qualified licensed medical practitioner; and

(b) Are medically necessary for the client to safely, effectively, and successfully use, or continue to use, his or her chosen contraceptive method.

(2) The department reimburses providers for covered TAKE CHARGE services according to the department's published TAKE CHARGE fee schedule.

(3)(~~(3)~~) The department limits reimbursement for TAKE CHARGE (~~(intensive follow up services (IFS) to those randomly selected research sites described in WAC 388-532-740(2). See WAC 388-532-730 (1)(e)(i) for related information)~~) research and evaluation activities to selected research sites.

(4) Federally qualified health centers (FQHCs), rural health centers (RHCs), and Indian health providers who choose to become TAKE CHARGE providers must bill the department for TAKE CHARGE services without regard to their special rates and fee schedules. The department does not reimburse FQHCs, RHCs or Indian health providers under the encounter rate structure for TAKE CHARGE services.

(5) The department requires TAKE CHARGE providers to meet the billing requirements of WAC 388-502-0150 (billing time limits). In addition, all final billings and billing adjustments related to the TAKE CHARGE program must be completed no later than (~~(June 30, 2008, or no later than)~~) two years after the demonstration and research program terminates (~~(, whichever occurs first)~~). The department will not accept new billings or billing adjustments that increase expenditures for the TAKE CHARGE program after the cut-off date (~~(in this subsection)~~).

(6) The department does not cover inpatient services under the TAKE CHARGE program. However, inpatient charges may be incurred as a result of complications arising directly from a covered TAKE CHARGE service. If this happens, providers of TAKE CHARGE related inpatient services that are not otherwise covered by third parties or other medical assistance programs must submit to the department a complete report of the circumstances and conditions that caused the need for inpatient services for the department to consider payment under WAC 388-501-0165.

(7) The department requires a provider under WAC 388-501-0200 to seek timely reimbursement from a third party when a client has available third party resources. The exceptions to this requirement are described under WAC 388-501-0200 (2) and (3) and 388-532-790.

AMENDATORY SECTION (Amending WSR 05-24-032, filed 11/30/05, effective 12/31/05)

WAC 388-532-790 TAKE CHARGE program—Good cause exemption from billing third party insurance. (1) TAKE CHARGE applicants who are (~~(either adolescents or young adults)~~) eighteen years of age or younger and (who) depend on their parents' medical insurance, or individuals who are domestic violence victims who depend on their spouses insurance may request an exemption of available third party family planning coverage due to "good cause." Under the TAKE CHARGE program, "good cause" means that use of the third party coverage would violate his or her privacy because the third party:

(a) Routinely or randomly sends verification of services to the third party subscriber and that subscriber is other than the applicant; and/or

(b) Requires the applicant to use a primary care provider who is likely to report the applicant's request for family planning services to another party.

(2) If subsection (1)(a) or (1)(b) of this section applies, the applicant is considered for TAKE CHARGE without regard to the available third party family planning coverage.

WSR 06-23-016

EMERGENCY RULES

PUBLIC DISCLOSURE COMMISSION

[Filed November 3, 2006, 1:23 p.m., effective November 7, 2006]

Effective Date of Rule: November 7, 2006.

Purpose: To provide clarification and guidance to elected and appointed officials on the filing requirements under RCW 42.17.241. Amending WAC 390-24-010 Forms for statement of financial affairs.

Citation of Existing Rules Affected by this Order: Amending 1 [WAC 390-24-010].

Statutory Authority for Adoption: RCW 42.17.370 and 42.17.241 (1)(n).

Under RCW 34.05.350 the agency for good cause finds that immediate adoption, amendment, or repeal of a rule is necessary for the preservation of the public health, safety, or general welfare, and that observing the time requirements of notice and opportunity to comment upon adoption of a permanent rule would be contrary to the public interest.

Reasons for this Finding: The commission finds that elected and appointed officials are currently seeking guidance on reporting requirements for the purposes of RCW 42.17.241 and WAC 390-24-201.

The commission finds that there is a need to amend the forms for statement of financial affairs now to provide that guidance to annual financial affairs filers. The commission finds that the forms need to be amended to make the language of the forms consistent with the language of WAC 390-24-201 (the rule describing the filing). The commission finds the forms and the rule need to be made consistent on the same date (November 7, 2006) in order to avoid confusion among current filers and the public regarding filing and disclosure requirements concerning statements of financial affairs, and to provide for consistent information filed on the forms and guidance provided about the forms. Thus, there is a need to proceed with the rule making on an emergency basis and observing the time requirements of notice and opportunity to comment upon adoption of a permanent rule for current filers and the public would be contrary to the public interest.

The commission is authorized to provide such interpretation and reporting forms through rule making pursuant to its authority in chapter 42.17 RCW, including RCW 42.17.241 (1)(n).

While full notice and opportunity for comment was not possible prior to the commission's October 31, 2006, meeting, notice of the proposed emergency rules was placed on the commission's web site at www.pdc.wa.gov on October 25, 2006, and there was opportunity for public testimony and

for written comments at the commission's October 31, 2006, meeting, prior to adoption of the emergency rule.

Number of Sections Adopted in Order to Comply with Federal Statute: New 0, Amended 0, Repealed 0; Federal Rules or Standards: New 0, Amended 0, Repealed 0; or Recently Enacted State Statutes: New 0, Amended 0, Repealed 0.

Number of Sections Adopted at Request of a Nongovernmental Entity: New 0, Amended 0, Repealed 0.

Number of Sections Adopted on the Agency's Own Initiative: New 0, Amended 1, Repealed 0.

Number of Sections Adopted in Order to Clarify, Streamline, or Reform Agency Procedures: New 0, Amended 0, Repealed 0.

Number of Sections Adopted Using Negotiated Rule Making: New 0, Amended 0, Repealed 0; Pilot Rule Making: New 0, Amended 0, Repealed 0; or Other Alternative Rule Making: New 0, Amended 0, Repealed 0.

Date Adopted: October 31, 2006.

Doug Ellis
Assistant Director

AMENDATORY SECTION (Amending WSR 06-18-034, filed 8/28/06, effective 9/28/06)

WAC 390-24-010 Forms for statement of financial affairs. The official form for statements of financial affairs as required by RCW 42.17.240 is designated "F-1," revised ((6/06)) 10/06. Copies of this form are available at the Commission Office, 711 Capitol Way, Room 206, Evergreen Plaza Building, PO Box 40908, Olympia, Washington 98504-0908. Any paper attachments must be on 8-1/2" x 11" white paper.

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PDC FORM F-1 (6/06)	PERSONAL FINANCIAL AFFAIRS STATEMENT	PDC OFFICE USE P M O S T R K R E C E I V E D
Refer to instruction manual for detailed assistance and examples. Deadlines: Incumbent elected and appointed officials -- by April 15. Candidates and others -- within two weeks of becoming a candidate or being newly appointed to a position.		
SEND REPORT TO PUBLIC DISCLOSURE COMMISSION		

Last Name _____ First _____ Middle Initial _____			Names of immediate family members. If there is no reportable information to disclose for dependent children, or other dependents living in your household, do not identify them. Do identify your spouse. See F-1 manual for details.
Mailing Address (Use PO Box or Work Address) _____			
City _____	County _____	Zip + 4 _____	
Filing Status (Check only one box.) <input type="checkbox"/> An elected or state appointed official filing annual report <input type="checkbox"/> Final report as an elected official. Term expired: _____ year _____ <input type="checkbox"/> Candidate running in an election: month _____ year _____ <input type="checkbox"/> Newly appointed to an elective office <input type="checkbox"/> Newly appointed to a state appointive office <input type="checkbox"/> Professional Staff			Office Held or Sought Office title: _____ County, city, district or agency of the office, name and number: _____ Position number: _____ Term begins: _____ ends: _____

1 INCOME List each employer, or other source of income (pension, social security, legal judgment, etc.) from which you or a family member received \$1,500 or more during the period. (Report interest and dividends in Item 3 on reverse)

	Name and Address of Employer or Source of Compensation	Occupation or How Compensation Was Earned	Amount: (Use Code)
Show Self (S) Spouse (SP) Dependent (D)			

Check Here if continued on attached sheet

2 REAL ESTATE List street address, assessor's parcel number, or legal description AND county for each parcel of Washington real estate with value of over \$7,500 in which you or a family member held a personal financial interest during the reporting period. (Show partnership, company, etc. real estate on F-1 supplement.)

Property Sold or Interest Divested	Assessed Value (Use Code)	Name and Address of Purchaser		Nature and Amount (Use Code) of Payment or Consideration Received		
Property Purchased or Interest Acquired		Creditor's Name/Address	Payment Terms	Security Given	Mortgage Amount - (Use Code) Original _____ Current _____	
All Other Property Entirely or Partially Owned						

Check here if continued on attached sheet

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3 ASSETS / INVESTMENTS - INTEREST / DIVIDENDS List bank and savings accounts, insurance policies, stock, bonds and other intangible property held during the reporting period.

A. Name and address of each bank or financial institution in which you or a family member had an account over \$15,000 any time during the report period.	Type of Account or Description of Asset	Asset Value (Use Code)	Income Amount (Use Code)
B. Name and address of each insurance company where you or a family member had a policy with a cash or loan value over \$15,000 during the period.			
C. Name and address of each company, association, government agency, etc. in which you or a family member owned or had a financial interest worth over \$1,500. Include stocks, bonds, ownership, retirement plan, IRA, notes, and other intangible property.			

Check here if continued on attached sheet.

4 CREDITORS List each creditor you or a family member owed \$1,500 or more any time during the period. Don't include retail charge accounts, credit cards, or mortgages or real estate reported in Item 2.

Creditor's Name and Address	Terms of Payment	Security Given	AMOUNT (USE CODE)	
			Original	Present

Check here if continued on attached sheet.

5 All filers answer questions A thru D below. If the answer is YES to any of these questions, the F-1 Supplement must also be completed as part of this report. If all answers are NO and you are a candidate for state or local office, an appointee to a vacant elective office, or a state executive officer filing your initial report, no F-1 Supplement is required.

Incumbent elected officials and state executive officers filing an annual financial affairs report also must answer question E. An F-1 Supplement is required of these officeholders unless all answers to questions A thru E are NO.

A. Were you, your spouse or dependents an officer, director, general partner or trustee of any corporation, company, union, association, joint venture or other entity at any time during the reporting period? ___ If yes, complete Supplement, Part A.

B. Did you, your spouse or dependents have an ownership of 10% or more in any company, corporation, partnership, joint venture or other business at any time during the reporting period? ___ If yes, complete Supplement, Part A.

C. Did you, your spouse or dependents own a business at any time during the reporting period? ___ If yes, complete Supplement, Part A.

D. Did you, your spouse or dependents prepare, promote or oppose state legislation, rules, rates or standards for current or deferred compensation (other than pay for a currently-held public office) at any time during the reporting period? ___ If yes, complete Supplement, Part B.

E. **Only for Persons Filing Annual Report.** Regarding the receipt of items not provided or paid for by your governmental agency during the previous calendar year: 1) Did you, your spouse or dependents (or any combination thereof) accept a gift of food or beverages costing over \$50 per occasion? ___ or 2) Did any source other than your governmental agency provide or pay in whole or in part for you, your spouse and/or dependents to travel or to attend a seminar or other training? ___ If yes to either or both questions, complete Supplement, Part C.

<p>ALL FILERS EXCEPT CANDIDATES. Check the appropriate box.</p> <p><input type="checkbox"/> I hold a state elected office, am an executive state officer or professional staff. I have read and am familiar with RCW 42.52.180 regarding the use of public resources in campaigns.</p> <p><input type="checkbox"/> I hold a local elected office. I have read and am familiar with RCW 42.17.130 regarding the use of public facilities in campaigns.</p>	<p>CERTIFICATION: I certify under penalty of perjury that the information contained in this report is true and correct to the best of my knowledge.</p> <p>Signature _____ Date _____</p> <p>Contact Telephone: () _____</p> <p>Email: _____ (work)</p> <p>Email: _____ (Home)</p>
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REPORT NOT ACCEPTABLE WITHOUT FILER'S SIGNATURE

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PDC FORM F-1 SUPPLEMENT (6/06)	SUPPLEMENT PAGE PERSONAL FINANCIAL AFFAIRS STATEMENT
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PROVIDE INFORMATION FOR YOURSELF, SPOUSE, DEPENDENT CHILDREN AND OTHER DEPENDENTS IN YOUR HOUSEHOLD

Last Name	First	Middle Initial	DATE
<p>A OFFICE HELD, BUSINESS INTERESTS: For each corporation, non-profit organization, association, union, partnership, joint venture or other entity in which you, your spouse or dependents are an officer, director, general partner, trustee, or 10 percent or more owner – provide the following information:</p> <ul style="list-style-type: none"> • Legal Name: Report name used on legal documents establishing the entity. • Trade or Operating Name: Report name used for business purposes if different from the legal name. • Position or Percent of Ownership: The office, title and/or percent of ownership held. • Brief Description of the Business/Organization: Report the purpose, product(s), and/or the service(s) rendered. • Payments from Governmental Unit: If the governmental unit in which you hold or seek office made payments to the business entity concerning which you're reporting, show the purpose of each payment and the actual amount received. • Payments from Business Customers and Other Government Agencies: List each corporation, partnership, joint venture, sole proprietorship, union, association, business or other commercial entity and each government agency (other than the one you seek/hold office) which paid compensation of \$7,500 or more during the period to the entity. Briefly say what property, goods, services or other consideration was given or performed for the compensation. • Washington Real Estate: Identify real estate owned by the business entity if the qualifications referenced below are met. 			
ENTITY NO. 1		Reporting For: Self <input type="checkbox"/> Spouse <input type="checkbox"/> Dependent <input type="checkbox"/>	
LEGAL NAME:		POSITION OR PERCENT OF OWNERSHIP	
TRADE OR OPERATING NAME:			
ADDRESS:			
BRIEF DESCRIPTION OF THE BUSINESS/ORGANIZATION:			
PAYMENTS ENTITY RECEIVED FROM GOVERNMENTAL UNIT IN WHICH YOU SEEK/HOLD OFFICE:			
Purpose of payments		Amount (actual dollars)	
		\$	
PAYMENTS ENTITY RECEIVED FROM BUSINESS CUSTOMERS AND OTHER GOVERNMENT AGENCIES OF \$7,500 OR MORE:			
Customer name:		Purpose of payment (amount not required)	
WASHINGTON REAL ESTATE IN WHICH ENTITY HELD A DIRECT FINANCIAL INTEREST (Complete only if ownership in the ENTITY is 10% or more and assessed value of property is over \$15,000. List street address, assessor parcel number, or legal description and county for each parcel):			
Check here <input type="checkbox"/> if continued on attached sheet			

CONTINUE PARTS B AND C ON NEXT PAGE

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Page 2

F-1 Supplement

Name

ENTITY NO. 2 Reporting For: Self Spouse Dependent
LEGAL NAME: POSITION OR PERCENT OF OWNERSHIP
TRADE OR OPERATING NAME:
ADDRESS:
BRIEF DESCRIPTION OF THE BUSINESS/ORGANIZATION:

PAYMENTS ENTITY RECEIVED FROM GOVERNMENTAL UNIT IN WHICH YOU SEEK/HOLD OFFICE:
 Purpose of payments Amount (actual dollars)
 \$

PAYMENTS ENTITY RECEIVED FROM BUSINESS CUSTOMERS AND OTHER GOVERNMENT AGENCIES OF \$7,500 OR MORE:
 Customer name: Purpose of payment (amount not required)

WASHINGTON REAL ESTATE IN WHICH ENTITY HELD A DIRECT FINANCIAL INTEREST (Complete only if ownership in the ENTITY is 10% or more and assessed value of property is over \$15,000. List street address, assessor parcel number, or legal description and county for each parcel):

Check here if continued on attached sheet

B LOBBYING: List persons for whom you or any immediate family member lobbied or prepared state legislation or state rules, rates or standards for current or deferred compensation. Do not list pay from government body in which you are an elected official or professional staff member.

Person to Whom Services Rendered	Description of Legislation, Rules, Etc.	Compensation (Use Code)
Check here <input type="checkbox"/> if continued on attached sheet		

C FOOD TRAVEL SEMINARS Complete this section if a source other than your own governmental agency paid for or otherwise provided all or a portion of the following items to you, your spouse or dependents, or a combination thereof: 1) Food and beverages costing over \$50 per occasion; 2) Travel occasions; or 3) Seminars, educational programs or other training.

Date Received	Donor's Name, City and State	Brief Description	Actual Dollar Amount	Value (Use Code)
Check here <input type="checkbox"/> if continued on attached sheet				

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<p>3 ASSETS / INVESTMENTS - INTEREST / DIVIDENDS</p> <p>A. Name and address of each bank or financial institution in which you or a family member had an account over \$15,000 any time during the report period.</p> <p>B. Name and address of each insurance company where you or a family member had a policy with a cash or loan value over \$15,000 during the period.</p> <p>C. Name and address of each company, association, government agency, etc. in which you or a family member owned or had a financial interest worth over \$1,500. Include stocks, bonds, ownership, retirement plan, IRA, notes, and other intangible property.</p> <p>Check here <input type="checkbox"/> if continued on attached sheet.</p>	<p>List bank and savings accounts, insurance policies, stock, bonds and other intangible property held during the reporting period.</p>		
	Type of Account or Description of Asset	Asset Value (Use Code)	Income Amount (Use Code)
	<p>Check here <input type="checkbox"/> if continued on attached sheet.</p>		

<p>4 CREDITORS</p> <p>Creditor's Name and Address</p> <p>Check here <input type="checkbox"/> if continued on attached sheet.</p>	<p>List each creditor you or a family member owed \$1,500 or more any time during the period. Don't include retail charge accounts, credit cards, or mortgages or real estate reported in Item 2.</p>		<p>AMOUNT (USE CODE)</p>	
	Terms of Payment	Security Given	Original	Present

5 All filers answer questions A thru D below. If the answer is YES to any of these questions, the F-1 Supplement must also be completed as part of this report. If all answers are NO and you are a candidate for state or local office, an appointee to a vacant elective office, or a state executive officer filing your initial report, no F-1 Supplement is required.

Incumbent elected officials and state executive officers filing an annual financial affairs report also must answer question E. An F-1 Supplement is required of these officeholders unless all answers to questions A thru E are NO.

- A. At any time during the reporting period were you, your spouse or dependents (1) an officer, director, general partner or trustee of any corporation, company, union, association, joint venture or other entity or (2) a partner or member of any limited partnership, limited liability partnership, limited liability company or similar entity including but not limited to a professional limited liability company? ___ If yes, complete Supplement, Part A.
- B. Did you, your spouse or dependents have an ownership of 10% or more in any company, corporation, partnership, joint venture or other business at any time during the reporting period? ___ If yes, complete Supplement, Part A.
- C. Did you, your spouse or dependents own a business at any time during the reporting period? ___ If yes, complete Supplement, Part A.
- D. Did you, your spouse or dependents prepare, promote or oppose state legislation, rules, rates or standards for current or deferred compensation (other than pay for a currently-held public office) at any time during the reporting period? ___ If yes, complete Supplement, Part B.
- E. **Only for Persons Filing Annual Report.** Regarding the receipt of items not provided or paid for by your governmental agency during the previous calendar year: 1) Did you, your spouse or dependents (or any combination thereof) accept a gift of food or beverages costing over \$50 per occasion? ___ or 2) Did any source other than your governmental agency provide or pay in whole or in part for you, your spouse and/or dependents to travel or to attend a seminar or other training? ___ If yes to either or both questions, complete Supplement, Part C.

<p>ALL FILERS EXCEPT CANDIDATES. Check the appropriate box.</p> <p><input type="checkbox"/> I hold a state elected office, am an executive state officer or professional staff. I have read and am familiar with RCW 42.52.180 regarding the use of public resources in campaigns.</p> <p><input type="checkbox"/> I hold a local elected office. I have read and am familiar with RCW 42.17.130 regarding the use of public facilities in campaigns.</p>	<p>CERTIFICATION: I certify under penalty of perjury that the information contained in this report is true and correct to the best of my knowledge.</p> <p>Signature _____ Date _____</p> <p>Contact Telephone: () _____</p> <p>Email: _____(work)</p> <p>Email: _____(Home)</p>
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REPORT NOT ACCEPTABLE WITHOUT FILER'S SIGNATURE

Information Continued

F-1

Name											
1 INCOME (continued)											
Show Self (S) Spouse (SP) Dependent (D)	Name and Address of Employer or Source of Compensation		Occupation or How Compensation Was Earned		Amount: (Use Code)						
2 REAL ESTATE (continued)											
Property Sold or Interest Divested	Assessed Value (Use Code)	Name and Address of Purchaser		Nature and Amount (Use Code) of Payment or Consideration Received							
Property Purchased or Interest Acquired		Creditor's Name/Address	Payment Terms	Security Given	Mortgage Amount - (Use Code) Original Current						
All Other Property Entirely or Partially Owned											
3 ASSETS / INVESTMENTS - INTEREST / DIVIDENDS (continued)											
A. Name and address of each bank or financial institution		Type of Account or Description of Asset		Asset Value (Use Code)	Income Amount (Use Code)						
B. Name and address of each insurance company											
C. Name and address of each company, association, government agency											
4 CREDITORS (continued)											
Creditor's Name and Address			Terms of Payment	Security Given	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th colspan="2" style="text-align: center;">AMOUNT (USE CODE)</th> </tr> <tr> <td style="width:50%;">Original</td> <td style="width:50%;">Present</td> </tr> <tr> <td> </td> <td> </td> </tr> </table>	AMOUNT (USE CODE)		Original	Present		
AMOUNT (USE CODE)											
Original	Present										

 <p>PUBLIC DISCLOSURE COMMISSION 711 CAPITOL WAY RM 206 PO BOX 40908 OLYMPIA WA 98504-0908 (360) 753-1111 TOLL FREE 1-877-601-2828 EMAIL: pdc@pdc.wa.gov</p>	PDC FORM F-1 SUPPLEMENT <small>(10/06)</small>	SUPPLEMENT PAGE PERSONAL FINANCIAL AFFAIRS STATEMENT	
PROVIDE INFORMATION FOR YOURSELF, SPOUSE, DEPENDENT CHILDREN AND OTHER DEPENDENTS IN YOUR HOUSEHOLD			
Last Name	First	Middle Initial	DATE
<p>A OFFICE HELD, BUSINESS INTERESTS: Provide the following information if, during the reporting period, you, your spouse or dependents</p> <p>(1) were an officer, director, general partner, trustee, or 10 percent or more owner of a corporation, non-profit organization, union, partnership, joint venture or other entity; and/or</p> <p>(2) were a partner or member of a limited partnership, limited liability partnership, limited liability company or similar entity, including but not limited to a professional limited liability company.</p> <ul style="list-style-type: none"> • Legal Name: Report name used on legal documents establishing the entity. • Trade or Operating Name: Report name used for business purposes if different from the legal name. • Position or Percent of Ownership: The office, title and/or percent of ownership held. • Brief Description of the Business/Organization: Report the purpose, product(s), and/or the service(s) rendered. • Payments from Governmental Unit: If the governmental unit in which you hold or seek office made payments to the business entity concerning which you're reporting, show the purpose of each payment and the actual amount received. • Payments from Business Customers and Other Government Agencies: List each corporation, partnership, joint venture, sole proprietorship, union, association, business or other commercial entity and each government agency (other than the one you seek/hold office) which paid compensation of \$7,500 or more during the period to the entity. Briefly say what property, goods, services or other consideration was given or performed for the compensation. • Washington Real Estate: Identify real estate owned by the business entity if the qualifications referenced below are met. 			
ENTITY NO. 1 LEGAL NAME:		Reporting For: Self <input type="checkbox"/> Spouse <input type="checkbox"/> Dependent <input type="checkbox"/> POSITION OR PERCENT OF OWNERSHIP	
TRADE OR OPERATING NAME:			
ADDRESS:			
BRIEF DESCRIPTION OF THE BUSINESS/ORGANIZATION:			
PAYMENTS ENTITY RECEIVED FROM GOVERNMENTAL UNIT IN WHICH YOU SEEK/HOLD OFFICE:			
Purpose of payments		Amount (actual dollars)	
		\$	
PAYMENTS ENTITY RECEIVED FROM BUSINESS CUSTOMERS AND OTHER GOVERNMENT AGENCIES OVER \$7,500:			
Customer name:		Purpose of payment (amount not required)	
WASHINGTON REAL ESTATE IN WHICH ENTITY HELD A DIRECT FINANCIAL INTEREST (Complete only if ownership in the ENTITY is 10% or more and assessed value of property is over \$15,000. List street address, assessor parcel number, or legal description and county for each parcel):			
Check here <input type="checkbox"/> if continued on attached sheet			

CONTINUE PARTS B AND C ON NEXT PAGE

Name				
ENTITY NO. 2 Reporting For: Self <input type="checkbox"/> Spouse <input type="checkbox"/> Dependent <input type="checkbox"/> LEGAL NAME: POSITION OR PERCENT OF OWNERSHIP TRADE OR OPERATING NAME: ADDRESS: BRIEF DESCRIPTION OF THE BUSINESS/ORGANIZATION: PAYMENTS ENTITY RECEIVED FROM GOVERNMENTAL UNIT IN WHICH YOU SEEK/HOLD OFFICE: Purpose of payments Amount (actual dollars) \$ PAYMENTS ENTITY RECEIVED FROM BUSINESS CUSTOMERS AND OTHER GOVERNMENT AGENCIES OVER \$7,500: Customer name: Purpose of payment (amount not required)				
WASHINGTON REAL ESTATE IN WHICH ENTITY HELD A DIRECT FINANCIAL INTEREST (Complete only if ownership in the ENTITY is 10% or more and assessed value of property is over \$15,000. List street address, assessor parcel number, or legal description and county for each parcel): Check here <input type="checkbox"/> if continued on attached sheet				
B LOBBYING: List persons for whom you or any immediate family member lobbied or prepared state legislation or state rules, rates or standards for current or deferred compensation. Do not list pay from government body in which you are an elected official or professional staff member.				
Person to Whom Services Rendered	Description of Legislation, Rules, Etc.	Compensation (Use Code)		
Check here <input type="checkbox"/> if continued on attached sheet				
C FOOD TRAVEL SEMINARS Complete this section if a source other than your own governmental agency paid for or otherwise provided all or a portion of the following items to you, your spouse or dependents, or a combination thereof: 1) Food and beverages costing over \$50 per occasion; 2) Travel occasions; or 3) Seminars, educational programs or other training.				
Date Received	Donor's Name, City and State	Brief Description	Actual Dollar Amount	Value (Use Code)
			\$	
Check here <input type="checkbox"/> if continued on attached sheet				

Information Continued

F-1 Supplement

Name	
ENTITY NO. LEGAL NAME: TRADE OR OPERATING NAME: ADDRESS: BRIEF DESCRIPTION OF THE BUSINESS/ORGANIZATION: PAYMENTS ENTITY RECEIVED FROM GOVERNMENTAL UNIT IN WHICH YOU SEEK/HOLD OFFICE: Purpose of payments	Reporting For: Self <input type="checkbox"/> Spouse <input type="checkbox"/> Dependent <input type="checkbox"/> POSITION OR PERCENT OF OWNERSHIP Amount (actual dollars) \$
PAYMENTS ENTITY RECEIVED FROM BUSINESS CUSTOMERS AND OTHER GOVERNMENT AGENCIES OVER \$7,500: Customer name:	Purpose of payment (amount not required)
WASHINGTON REAL ESTATE IN WHICH ENTITY HELD A DIRECT FINANCIAL INTEREST (Complete only if ownership in the ENTITY is 10% or more and assessed value of property is over \$15,000. List street address, assessor parcel number, or legal description and county for each parcel):	

B LOBBYING: (Continued)		
Person to Whom Services Rendered	Description of Legislation, Rules, Etc.	Compensation (Use Code)

C FOOD TRAVEL SEMINARS (continued)				
Date Received	Donor's Name, City and State	Brief Description	Actual Dollar Amount	Value (Use Code)
			\$	

**WSR 06-23-026
EMERGENCY RULES
DEPARTMENT OF
FISH AND WILDLIFE**

[Order 06-284—Filed November 3, 2006, 3:00 p.m., effective November 5, 2006, 12:01 a.m.]

Effective Date of Rule: November 5, 2006, 12:01 a.m.

Purpose: Amend commercial fishing rules.

Citation of Existing Rules Affected by this Order:

Repealing WAC 220-47-31100I, 220-47-31100J, 220-47-41100J and 220-47-41100K; and amending WAC 220-47-311 and 220-47-411.

Statutory Authority for Adoption: RCW 77.12.047.

Under RCW 34.05.350 the agency for good cause finds that immediate adoption, amendment, or repeal of a rule is necessary for the preservation of the public health, safety, or general welfare, and that observing the time requirements of notice and opportunity to comment upon adoption of a permanent rule would be contrary to the public interest.

Reasons for this Finding: It is estimated that there are sufficient harvestable fish remaining in the nontreaty share to sustain this schedule at expected effort and catch levels. Treaty-tribe comanagers have been consulted and agreed to these fishing schedules. These fisheries are not expected to exceed by-catch levels modeled during the preseason process. There is insufficient time to make this a part of the permanent rules process.

Number of Sections Adopted in Order to Comply with Federal Statute: New 0, Amended 0, Repealed 0; Federal Rules or Standards: New 0, Amended 0, Repealed 0; or Recently Enacted State Statutes: New 0, Amended 0, Repealed 0.

Number of Sections Adopted at Request of a Nongovernmental Entity: New 0, Amended 0, Repealed 0.

Number of Sections Adopted on the Agency's Own Initiative: New 2, Amended 0, Repealed 4.

Number of Sections Adopted in Order to Clarify, Streamline, or Reform Agency Procedures: New 0, Amended 0, Repealed 0.

Number of Sections Adopted Using Negotiated Rule Making: New 0, Amended 0, Repealed 0; Pilot Rule Making: New 0, Amended 0, Repealed 0; or Other Alternative Rule Making: New 0, Amended 0, Repealed 0.

Date Adopted: November 2, 2006.

Morris W. Barker
for Jeff Koenings
Director

NEW SECTION

WAC 220-47-31100J Purse seine—Open periods.

Notwithstanding the provisions of WAC 220-47-311, effective 12:01 a.m. November 5 through 11:59 p.m. November 10, 2006, it is unlawful to take, fish for or possess salmon taken for commercial purposes in Puget Sound Salmon Management and Catch Reporting Areas 7, 7A, 10, 11, 12, 12B, and 12C except in accordance with the open periods, mesh size, areas, species restrictions, notification, and landing requirements set forth in this chapter, provided that unless

otherwise amended, all permanent rules for all other catch reporting areas remain in effect:

AREA	TIME	-	DATE(S)
7 & 7A:	7AM	- 5PM with use of operating recovery box	11/6, 11/7, 11/8, 11/9, 11/10
	7AM	- 2:30PM without recovery box	11/6, 11/7, 11/8, 11/9, 11/10
10 & 11:	7AM	- 5PM	11/6
12 & 12B:	7AM	- 5PM	11/6, 11/8
12C:			CLOSED

(i) In Areas 7 & 7A Chinook and Coho salmon must be released or placed in an operating recovery box until the fish has recovered or death has occurred. All Chinook and coho must be released alive or dead.

(ii) Fishing vessel operators must be in possession of a "Fish Friendly" Best Fishing Practices certification card documenting attendance of a Best Fishing Practices workshop to participate in any area 7 or 7A salmon fishery.

NEW SECTION

WAC 220-47-41100K Gill net—Open periods. (1)

Notwithstanding the provisions of WAC 220-47-411, effective 12:01 a.m. November 5 through 11:59 p.m. November 10, 2006, it is unlawful to take, fish for or possess salmon taken for commercial purposes in Puget Sound Salmon Management and Catch Reporting Areas 7, 7A, 10, 11, 12, 12B, and 12C except in accordance with the open periods, mesh size, areas, species restrictions, notification, and landing requirements set forth in this chapter, provided that unless otherwise amended, all permanent rules for all other catch reporting areas remain in effect:

AREA	TIME	-	DATE(S)	MINIMUM MESH
7 & 7A:	12 PM	- 11:59 PM	11/6, 11/7, 11/8, 11/9, 11/10	6 1/4"
10 & 11:	3PM (11/5)	- 7AM (11/6)	11/5	6 1/4"
	3PM (11/7)	- 7AM (11/8)	11/7	6 1/4"
12 & 12B:	7AM	- 7PM	11/7, 11/9	6 1/4"
12C:			CLOSED	

(i) Fishing vessel operators must be in possession of a "Fish Friendly" Best Fishing Practices certification card documenting attendance of a Best Fishing Practices workshop to participate in any area 7 or 7A salmon fishery.

REPEALER

The following sections of the Washington Administrative Code are repealed effective 12:01 a.m. November 5, 2006:

WAC 220-47-31100I	Purse seine—Open periods. (06-280)
WAC 220-47-41100J	Gill net—Open periods. (06-280)

The following sections of the Washington Administrative Code are repealed effective 12:01 a.m. November 11, 2006:

WAC 220-47-31100J Purse seine—Open periods.
WAC 220-47-41100K Gill net—Open periods.

WSR 06-23-027
EMERGENCY RULES
DEPARTMENT OF
FISH AND WILDLIFE

[Order 06-285—Filed November 3, 2006, 3:02 p.m., effective November 3, 2006]

Effective Date of Rule: Immediately.

Purpose: Amend personal use fishing rules.

Citation of Existing Rules Affected by this Order: Repealing WAC 232-28-61900D and 232-28-61900E; and amending WAC 232-28-619.

Statutory Authority for Adoption: RCW 77.12.047.

Under RCW 34.05.350 the agency for good cause finds that immediate adoption, amendment, or repeal of a rule is necessary for the preservation of the public health, safety, or general welfare, and that observing the time requirements of notice and opportunity to comment upon adoption of a permanent rule would be contrary to the public interest.

Reasons for this Finding: Hatchery escapement is expected to be met and surplus coho are available for harvest. Night closure and nonbuoyant lure restrictions are needed to ensure a safe and orderly fishery. There is insufficient time to promulgate permanent rules.

Number of Sections Adopted in Order to Comply with Federal Statute: New 0, Amended 0, Repealed 0; Federal Rules or Standards: New 0, Amended 0, Repealed 0; or Recently Enacted State Statutes: New 0, Amended 0, Repealed 0.

Number of Sections Adopted at Request of a Nongovernmental Entity: New 0, Amended 0, Repealed 0.

Number of Sections Adopted on the Agency's Own Initiative: New 1, Amended 0, Repealed 2.

Number of Sections Adopted in Order to Clarify, Streamline, or Reform Agency Procedures: New 0, Amended 0, Repealed 0.

Number of Sections Adopted Using Negotiated Rule Making: New 0, Amended 0, Repealed 0; Pilot Rule Making: New 0, Amended 0, Repealed 0; or Other Alternative Rule Making: New 0, Amended 0, Repealed 0.

Date Adopted: November 3, 2006.

Aletta Early
for Jeff Koenings
Director

NEW SECTION

WAC 232-28-61900E Exceptions to statewide rules—Cowlitz River. Notwithstanding the provisions of WAC 232-28-619:

(1) Effective immediately through December 31, 2006 in those waters of the Cowlitz River from boundary markers at the mouth to Mayfield Dam. Special daily limit of six salmon, no more than four adults, except only two adult chinook. Wild coho and chum must be released. Except closed 100' or posted markers below the Cowlitz Salmon Hatchery barrier dam to boundary markers near the Cowlitz Salmon Hatchery water intake located about 1,700' upstream from the Cowlitz Salmon Hatchery barrier dam.

(2) Effective November 6 through December 31, 2006 night closure and non-buoyant lure restrictions in effect in those waters of the Cowlitz River within the area between 100 feet downstream (posted markers) and 400 feet downstream of the Cowlitz Salmon Hatchery barrier dam.

REPEALER

The following section of the Washington Administrative Code is repealed:

WAC 232-28-61900D Exceptions to statewide rules—Cowlitz River. (06-278)

The following section of the Washington Administrative Code is repealed effective January 1, 2007:

WAC 232-28-61900E Exceptions to statewide rules—Cowlitz River.

WSR 06-23-044
EMERGENCY RULES
DEPARTMENT OF
FISH AND WILDLIFE

[Order 06-286—Filed November 7, 2006, 1:38 p.m., effective November 8, 2006]

Effective Date of Rule: November 8, 2006.

Purpose: Amend commercial fishing rules.

Citation of Existing Rules Affected by this Order: Repealing WAC 220-52-07300D; and amending WAC 220-52-073.

Statutory Authority for Adoption: RCW 77.12.047.

Under RCW 34.05.350 the agency for good cause finds that immediate adoption, amendment, or repeal of a rule is necessary for the preservation of the public health, safety, or general welfare, and that observing the time requirements of notice and opportunity to comment upon adoption of a permanent rule would be contrary to the public interest.

Reasons for this Finding: Harvestable amounts of red and green sea urchins exist in the areas described. Prohibition of all diving from licensed sea urchin and sea cucumber harvest vessels within two days of scheduled sea urchin openings discourages the practice of fishing on closed days and hiding the unlawful catch underwater until the legal opening. There is insufficient time to promulgate permanent rules.

Number of Sections Adopted in Order to Comply with Federal Statute: New 0, Amended 0, Repealed 0; Federal Rules or Standards: New 0, Amended 0, Repealed 0; or Recently Enacted State Statutes: New 0, Amended 0, Repealed 0.

Number of Sections Adopted at Request of a Nongovernmental Entity: New 0, Amended 0, Repealed 0.

Number of Sections Adopted on the Agency's Own Initiative: New 1, Amended 0, Repealed 1.

Number of Sections Adopted in Order to Clarify, Streamline, or Reform Agency Procedures: New 0, Amended 0, Repealed 0.

Number of Sections Adopted Using Negotiated Rule Making: New 0, Amended 0, Repealed 0; Pilot Rule Making: New 0, Amended 0, Repealed 0; or Other Alternative Rule Making: New 0, Amended 0, Repealed 0.

Date Adopted: November 7, 2006.

J. P. Koenings
Director

NEW SECTION

WAC 220-52-07300E Sea urchins. Notwithstanding the provisions of WAC 220-52-073, effective November 8, 2006 until further notice, it is unlawful to take or possess sea urchins taken for commercial purposes except as provided for in this section:

(1) Green sea urchins: Sea Urchin Districts 1 and 2 are open only on Sunday of each week. Sea Urchin Districts 3, 4, 6 and 7 are open only on Sunday and Monday of each week. The minimum size for green sea urchins is 2.25 inches (size in largest test diameter exclusive of spines).

(2) Red sea urchins: Sea Urchin Districts 1 and 2 are open only on Sunday, Monday and Tuesday of each week. In Sea Urchin Districts 1 and 2 it is unlawful to harvest red sea urchins smaller than 4.0 inches or larger than 5.5 inches (size in largest test diameter exclusive of spines).

(3) It is unlawful to dive for any purpose from a commercially licensed sea urchin or sea cucumber fishing vessel on Friday and Saturday of each week, except by written permission from the Director.

REPEALER

The following section of the Washington Administrative Code is repealed effective November 8, 2006:

WAC 220-52-07300D Sea urchins.

WSR 06-23-047

EMERGENCY RULES

DEPARTMENT OF TRANSPORTATION

[Filed November 7, 2006, 4:28 p.m., effective November 7, 2006]

Effective Date of Rule: Immediately.

Purpose: The purpose of this rule making is to amend WAC 468-510-010 High occupancy vehicles, to incorporate fire department vehicles.

Citation of Existing Rules Affected by this Order: Amending WAC 468-510-010.

Statutory Authority for Adoption: RCW 47.52.025 Additional powers, controlling use of limited access facilities—High.

Under RCW 34.05.350 the agency for good cause finds that immediate adoption, amendment, or repeal of a rule is necessary for the preservation of the public health, safety, or general welfare, and that observing the time requirements of notice and opportunity to comment upon adoption of a permanent rule would be contrary to the public interest.

Reasons for this Finding: The Washington State Association of Fire Chiefs requests this rule making to facilitate time-critical operations of single occupant fire department vehicles. Association membership requests expedient adoption of this rule.

Number of Sections Adopted in Order to Comply with Federal Statute: New 0, Amended 0, Repealed 0; Federal Rules or Standards: New 0, Amended 0, Repealed 0; or Recently Enacted State Statutes: New 0, Amended 0, Repealed 0.

Number of Sections Adopted at Request of a Nongovernmental Entity: New 0, Amended 1, Repealed 0.

Number of Sections Adopted on the Agency's Own Initiative: New 0, Amended 0, Repealed 0.

Number of Sections Adopted in Order to Clarify, Streamline, or Reform Agency Procedures: New 0, Amended 0, Repealed 0.

Number of Sections Adopted Using Negotiated Rule Making: New 0, Amended 1, Repealed 0; Pilot Rule Making: New 0, Amended 0, Repealed 0; or Other Alternative Rule Making: New 0, Amended 0, Repealed 0.

Date Adopted: November 2, 2006.

John F. Conrad
Assistant Secretary
Engineering and Field Operations

AMENDATORY SECTION (Amending WSR 03-20-083, filed 9/30/03, effective 10/31/03)

WAC 468-510-010 High occupancy vehicles (HOVs). Pursuant to RCW 46.61.165 and 47.52.025, the department has reserved portions of interstate highways, state highways, and ramps, as HOV lanes for the exclusive use of public transportation vehicles or private motor vehicles with the number of occupants specified on signs. Motor vehicles authorized to use HOV lanes are:

(1) Rubber tired municipal transit vehicles conforming to RCW 46.04.355.

(2) Buses with a carrying capacity of sixteen or more persons, including the operator.

(3) Motorcycles conforming to RCW 46.04.330.

(4) Recreational vehicles with the number of occupants specified on signs.

(5) Official marked law enforcement and fire department vehicles equipped with emergency lights and siren, (~~issued by a state, local or county law enforcement agency and~~) operated by an on-duty state patrol, local, or county law enforcement personnel, or on-duty local, county, or special district fire department personnel.

(6) All other vehicles with the number of occupants specified on signs, except that trucks in excess of 10,000 lb. G.V.W. are prohibited from the use of HOV lanes regardless of the number of occupants. Tow trucks that would be otherwise prohibited because of weight or number of occupants may use HOV lanes when en route to an emergency on a specific roadway or roadside.

WSR 06-23-054
EMERGENCY RULES
DEPARTMENT OF
SOCIAL AND HEALTH SERVICES

(Aging and Disability Services Administration)

[Filed November 8, 2006, 10:38 a.m., effective November 8, 2006]

Effective Date of Rule: Immediately.

Purpose: The division of developmental disabilities has received approval from the federal Centers for Medicare and Medicaid Services (CMS) to increase the dollar maximum for certain services in the Basic and Basic Plus waivers within the home and community based service (HCBS) waivers. This second emergency rule replaces the emergency rule filed as WSR 06-15-050 on July 12, 2006, and is necessary as the rule is part of a major rewrite of chapter 388-845 WAC. The major rewrite has not been completed as we are waiting for further clarification from CMS on other aspects of the waiver rules.

Citation of Existing Rules Affected by this Order: Amending WAC 388-845-0205 and 388-845-0210.

Statutory Authority for Adoption: RCW 71A.12.030, 71A.12.120.

Under RCW 34.05.350 the agency for good cause finds that immediate adoption, amendment, or repeal of a rule is necessary for the preservation of the public health, safety, or general welfare, and that observing the time requirements of notice and opportunity to comment upon adoption of a permanent rule would be contrary to the public interest.

Reasons for this Finding: The approval of the amendments to the HCBS waivers by CMS allows the department to increase the dollar maximum for certain services within the Basic and Basic Plus waivers. These increases are necessary for the public general welfare to ensure that the eligible clients receive the full benefits for which they are entitled while the department completes the adoption of permanent rules which was begun under WSR 06-09-013 filed on April 10, 2006. We expect the permanent rule to be implemented by March 27, 2007.

Number of Sections Adopted in Order to Comply with Federal Statute: New 0, Amended 0, Repealed 0; Federal Rules or Standards: New 0, Amended 2, Repealed 0; or Recently Enacted State Statutes: New 0, Amended 0, Repealed 0.

Number of Sections Adopted at Request of a Nongovernmental Entity: New 0, Amended 0, Repealed 0.

Number of Sections Adopted on the Agency's Own Initiative: New 0, Amended 0, Repealed 0.

Number of Sections Adopted in Order to Clarify, Streamline, or Reform Agency Procedures: New 0, Amended 0, Repealed 0.

Number of Sections Adopted Using Negotiated Rule Making: New 0, Amended 0, Repealed 0; Pilot Rule Making: New 0, Amended 0, Repealed 0; or Other Alternative Rule Making: New 0, Amended 2, Repealed 0.

Date Adopted: November 8, 2006.

Andy Fernando, Manager
 Rules and Policies Assistance Unit

AMENDATORY SECTION (Amending WSR 06-01-024, filed 12/13/05, effective 1/13/06)

WAC 388-845-0205 Basic waiver services.

BASIC WAIVER	SERVICES	YEARLY LIMIT
	AGGREGATE SERVICES: Behavior management and consultation Community guide Environmental accessibility adaptations Occupational therapy Physical therapy Specialized medical equipment/supplies Specialized psychiatric services Speech, hearing and language services Staff/family consultation and training Transportation	May not exceed \$(1425)) <u>1454</u> per year on any combination of these services
	EMPLOYMENT/DAY PROGRAM SERVICES: Community access Person-to-person Prevocational services Supported employment	May not exceed \$(6500)) <u>6631</u> per year
	Sexual deviancy evaluation	Limits are determined by DDD
	Respite care	Limits are determined respite assessment
	Personal care	Limits are determined by CARE assessment

BASIC WAIVER	SERVICES	YEARLY LIMIT
	MENTAL HEALTH STABILIZATION SERVICES: Behavior management and consultation Mental health crisis diversion bed services Skilled nursing Specialized psychiatric services	Limits are determined by a mental health professional or DDD
	Emergency assistance is only for services contained in the Basic waiver	\$6000 per year; Preauthorization required

BASIC PLUS WAIVER	SERVICES	YEARLY LIMIT
	MENTAL HEALTH STABILIZATION SERVICES: Behavior management and consultation Mental health crisis diversion bed services Skilled nursing Specialized psychiatric services	Limits determined by a mental health professional or DDD
	Personal care	Limits determined by the CARE assessment
	Respite care	Limits are determined by respite assessment
	Sexual deviancy evaluation	Limits are determined by DDD
	Emergency assistance ((#)) is only for services contained in the Basic Plus waiver	\$6000 per year; Preauthorization required

AMENDATORY SECTION (Amending WSR 06-01-024, filed 12/13/05, effective 1/13/06)

WAC 388-845-0210 Basic Plus waiver services.

BASIC PLUS WAIVER	SERVICES	YEARLY LIMIT
	AGGREGATE SERVICES: Behavior management and consultation Community guide Environmental accessibility adaptations Occupational therapy Physical therapy Skilled nursing Specialized medical equipment/supplies Specialized psychiatric services Speech, hearing and language services Staff/family consultation and training Transportation	May not exceed \$(6070) <u>6192</u> per year on any combination of these services
	EMPLOYMENT/DAY PROGRAM SERVICES: Community access Person-to-person Prevocational services Supported employment	May not exceed \$(9500) <u>9691</u> per year
	Adult foster care (adult family home) Adult residential care (boarding home)	Determined per department rate structure

**WSR 06-23-069
EMERGENCY RULES
DEPARTMENT OF
FISH AND WILDLIFE**

[Order 06-287—Filed November 9, 2006, 2:55 p.m., effective November 12, 2006, 12:01 a.m.]

Effective Date of Rule: November 12, 2006, 12:01 a.m.

Purpose: Amend commercial fishing rules.

Citation of Existing Rules Affected by this Order: Repealing WAC 220-47-31100J, 220-47-31100K, 220-47-41100K and 220-47-41100L; and amending WAC 220-47-311 and 220-47-411.

Statutory Authority for Adoption: RCW 77.12.047.

Under RCW 34.05.350 the agency for good cause finds that immediate adoption, amendment, or repeal of a rule is necessary for the preservation of the public health, safety, or general welfare, and that observing the time requirements of notice and opportunity to comment upon adoption of a permanent rule would be contrary to the public interest.

Reasons for this Finding: It is estimated that there are sufficient harvestable fish remaining in the nontreaty share to sustain this schedule at expected effort and catch levels. Treaty-tribe comanagers have been consulted and agreed to these fishing schedules. These fisheries are not expected to exceed by-catch levels modeled during the preseason process. There is insufficient time to make this a part of the permanent rule process.

Number of Sections Adopted in Order to Comply with Federal Statute: New 0, Amended 0, Repealed 0; Federal Rules or Standards: New 0, Amended 0, Repealed 0; or

Recently Enacted State Statutes: New 0, Amended 0, Repealed 0.

Number of Sections Adopted at Request of a Nongovernmental Entity: New 0, Amended 0, Repealed 0.

Number of Sections Adopted on the Agency's Own Initiative: New 2, Amended 0, Repealed 4.

Number of Sections Adopted in Order to Clarify, Streamline, or Reform Agency Procedures: New 0, Amended 0, Repealed 0.

Number of Sections Adopted Using Negotiated Rule Making: New 0, Amended 0, Repealed 0; Pilot Rule Making: New 0, Amended 0, Repealed 0; or Other Alternative Rule Making: New 0, Amended 0, Repealed 0.

Date Adopted: November 9, 2006.

J. P. Koenings
Director
by Larry Peck

NEW SECTION

WAC 220-47-31100K Purse seine—Open periods.

Notwithstanding the provisions of WAC 220-47-311, effective 12:01 a.m. November 12 through 11:59 p.m. November 18, 2006, it is unlawful to take, fish for or possess salmon taken for commercial purposes in Puget Sound Salmon Management and Catch Reporting Areas 7, 7A, 10, 11, 12, 12B, and 12C except in accordance with the open periods, mesh size, areas, species restrictions, notification, and landing requirements set forth in this chapter, provided that unless otherwise amended, all permanent rules for all other catch reporting areas remain in effect:

AREA	TIME	-	DATE(S)
7 & 7A:			CLOSED
10 & 11:			CLOSED
12 & 12B:	7AM	- 5PM	11/13, 11/15
12C:			CLOSED

NEW SECTION

WAC 220-47-41100L Gill net—Open periods. (1)

Notwithstanding the provisions of WAC 220-47-411, effective 12:01 a.m. November 12 through 11:59 p.m. November 18, 2006, it is unlawful to take, fish for or possess salmon taken for commercial purposes in Puget Sound Salmon Management and Catch Reporting Areas 7, 7A, 10, 11, 12, 12B, and 12C except in accordance with the open periods, mesh size, areas, species restrictions, notification, and landing requirements set forth in this chapter, provided that unless otherwise amended, all permanent rules for all other catch reporting areas remain in effect:

AREA	TIME	-	DATE(S)	MINIMUM MESH
7 & 7A:			CLOSED	
10 & 11:			CLOSED	
12 & 12B	7AM	- 7PM	11/14, 11/16	6 1/4"
12C			CLOSED	

REPEALER

The following sections of the Washington Administrative Code are repealed effective 12:01 a.m. November 12, 2006:

WAC 220-47-31100J	Purse seine—Open periods. (06-284)
WAC 220-47-41100K	Gill net—Open periods. (06-284)

The following sections of the Washington Administrative Code are repealed effective 12:01 a.m. November 19, 2006:

WAC 220-47-31100K	Purse seine—Open periods.
WAC 220-47-41100L	Gill net—Open periods.

**WSR 06-23-100
EMERGENCY RULES
HEALTH CARE AUTHORITY
(Community Health Services)**

[Order 06-12—Filed November 16, 2006, 9:46 a.m., effective November 16, 2006]

Effective Date of Rule: Immediately.

Purpose: The emergency rule will amend chapter 182-20 WAC and establish rules regarding the administration and implementation of the community health care collaborative grant program pursuant to E2SSB 6459, chapter 67, Laws of 2006. The rule will allow for community health services, under the direction of the administrator of the authority, to administer the program, determine eligibility, and allocate grant funds while the permanent rule-making process is underway.

Citation of Existing Rules Affected by this Order: Amending WAC 182-20-001.

Statutory Authority for Adoption: RCW 41.05.160, 41.05.220 and 41.05.230.

Other Authority: Chapter 67, Laws of 206 [2006].

Under RCW 34.05.350 the agency for good cause finds that immediate adoption, amendment, or repeal of a rule is necessary for the preservation of the public health, safety, or general welfare, and that observing the time requirements of notice and opportunity to comment upon adoption of a permanent rule would be contrary to the public interest.

Reasons for this Finding: The general welfare of the people of Washington requires that these rules become effective immediately in order to ensure the timely and appropriate distribution of grant funds. The rule provides for the legal procedure, notice, and for a fair and equitable means in which grant distribution decisions will be made.

Number of Sections Adopted in Order to Comply with Federal Statute: New 0, Amended 0, Repealed 0; Federal Rules or Standards: New 0, Amended 0, Repealed 0; or Recently Enacted State Statutes: New 3, Amended 1, Repealed 0.

Number of Sections Adopted at Request of a Nongovernmental Entity: New 0, Amended 0, Repealed 0.

Number of Sections Adopted on the Agency's Own Initiative: New 0, Amended 0, Repealed 0.

Number of Sections Adopted in Order to Clarify, Streamline, or Reform Agency Procedures: New 0, Amended 0, Repealed 0.

Number of Sections Adopted Using Negotiated Rule Making: New 0, Amended 0, Repealed 0; Pilot Rule Making: New 0, Amended 0, Repealed 0; or Other Alternative Rule Making: New 0, Amended 0, Repealed 0.

Date Adopted: November 16, 2006.

Jason Siems
Rules Coordinator

AMENDATORY SECTION (Amending Order 00-06, filed 2/7/01, effective 3/10/01)

WAC 182-20-001 Purpose. The purpose of this chapter is to establish procedures at the Washington state health care authority for determining eligibility and distribution of funds for:

(1) Medical, dental, and migrant services to community health clinics under section 214(3), chapter 19, Laws of 1989 1st ex. sess., including other state general fund appropriations for medical, dental, and migrant services in community health clinics since 1985; and

(2) Other grant programs assigned to the authority. The authority shall disburse grant awards to community-based organizations to develop innovative health care delivery models that address:

(a) Access to medical treatment;

(b) Efficient use of health care resources; or

(c) Improve quality of care.

NEW SECTION

WAC 182-20-600 Community health care collaborative program. The community health care collaborative grant program was established July 1, 2006, to develop innovative health care delivery models. The funding covers a two-year cycle; half of the award to be distributed throughout the first year and the final half distributed throughout the second year upon evidence of successful program progress and achieving grant objectives, based upon available funding.

NEW SECTION

WAC 182-20-610 Administration. The authority is responsible for:

(1) Preaward development.

(a) Develop criteria for the selection of community-based organizations to receive grant funding;

(b) Develop equitable standards governing the granting of awards;

(c) Determine nature and format of the application and process.

(2) Award determinations.

(a) Consult with representatives, appointed by the secretary of the department of health, the assistant secretary of health and recovery services administration within the

department of social and health services, and the office of the insurance commissioner to make recommendations for final applicant selection and grant determination;

(b) The administrator will review recommendations and make final determination based upon recommendations, funds available and utilization of resources to meet the goals of the program;

(c) Conduct on-site visits to ensure applicant's ability to achieve grant objectives and performance measures identified in the application;

(d) Contract with successful applicants; and

(e) Disburse grant funds according to program policy.

(3) Post-award actions.

(a) Review periodic progress reports from contractors;

(b) Conduct on-site visits of contractors to provide assistance and ensure compliance of grant objectives;

(c) Consult with representatives from department of health, the assistant secretary of health and recovery services administration within the department of social and health services, and office of the insurance commissioner, one year following initial disbursement, to make recommendations to administrator for disbursement of the second half of grant funds, based upon performance measures identified in the application and evidence of successful program progress and achieving grant objectives;

(d) The administrator will review and make final determination for grant disbursements; and

(e) Compile a report to the governor and legislature on July 1, 2008, which:

(i) Describes organizations and programs funded;

(ii) Describes and analyzes results achieved;

(iii) Makes recommendations for improvements to the program; and

(iv) Highlights best practices that can be replicated statewide.

NEW SECTION

WAC 182-20-620 Application process. (1) Eligibility.

(a) Applicants must provide the following in the application format prescribed by the authority:

(i) Evidence of private, nonprofit, tax exempt status incorporated in Washington state or public agency status under the jurisdiction of a local, county, or tribal government;

(ii) Evidence of the specific geographic region served and a formal collaborative governing structure by documentation that may include, but is not limited to:

(A) Bylaws;

(B) Agreements;

(C) Contracts;

(D) Memorandum of understanding;

(E) Minutes;

(F) Letters; or

(G) Other communications;

(iii) Amount of funds requested and how the dollars will be spent;

(iv) Data to evaluate program progress and grant objectives.

(b) Applicants will be evaluated competitively on their ability to:

- (i) Address documented health care needs in the specific region served;
 - (ii) Engage key community members;
 - (iii) Show evidence of matching funds of at least two dollars for each grant dollar requested. All matching fund contributions, including cash and in-kind, shall meet the criteria determined by the administrator and included in the application guidelines;
 - (iv) Ability to meet the documented health care needs and address sustainability of programs;
 - (v) Show innovation in program approaches that could be replicated throughout the state;
 - (vi) Make efficient and cost-effective use of funds by simplifying administration affecting the health care delivery system;
 - (vii) Clearly describe size of organization, program objectives, and populations served; and
 - (viii) Meet the reporting requirements of the authority.
- (c) Application access.
- (i) The call for grant applications will be made by posting the announcement to the authority's official web site and by notification sent to interested parties.
- (ii) To be placed on the interested parties distribution list, send contact information, including mailing and e-mail addresses to community health care collaboration at Washington State Health Care Authority, P.O. Box 42721, Olympia, Washington 98504-2721.
- (2) The guidelines and application forms will be available on the authority's official web site and included with the published guidelines distributed by e-mail to those who request an application. The application will be available in hard copy and sent by United States mail upon request. Applications must be completed and submitted in the format and filed by the deadlines prescribed by the authority and published in the guidelines.

WSR 06-23-113

EMERGENCY RULES

DEPARTMENT OF

FISH AND WILDLIFE

[Order 06-288—Filed November 17, 2006, 1:28 p.m., effective November 20, 2006, 12:01 a.m.]

Effective Date of Rule: November 20, 2006, 12:01 a.m.
 Purpose: Amend commercial fishing rules.

Citation of Existing Rules Affected by this Order: Repealing WAC 220-47-31100K, 220-47-31100L, 220-47-41100L and 220-47-41100M; and amending WAC 220-47-311 and 220-47-411.

Statutory Authority for Adoption: RCW 77.12.047.

Under RCW 34.05.350 the agency for good cause finds that immediate adoption, amendment, or repeal of a rule is necessary for the preservation of the public health, safety, or general welfare, and that observing the time requirements of notice and opportunity to comment upon adoption of a permanent rule would be contrary to the public interest.

Reasons for this Finding: It is estimated that there are sufficient harvestable fish remaining in the nontreaty share to sustain this schedule at expected effort and catch levels.

Treaty-tribe comanagers have been consulted and agreed to these fishing schedules. These fisheries are not expected to exceed by-catch levels modeled during the preseason process. There is insufficient time to make this a part of the permanent rules process.

Number of Sections Adopted in Order to Comply with Federal Statute: New 0, Amended 0, Repealed 0; Federal Rules or Standards: New 0, Amended 0, Repealed 0; or Recently Enacted State Statutes: New 0, Amended 0, Repealed 0.

Number of Sections Adopted at Request of a Nongovernmental Entity: New 0, Amended 0, Repealed 0.

Number of Sections Adopted on the Agency's Own Initiative: New 2, Amended 0, Repealed 4.

Number of Sections Adopted in Order to Clarify, Streamline, or Reform Agency Procedures: New 0, Amended 0, Repealed 0.

Number of Sections Adopted Using Negotiated Rule Making: New 0, Amended 0, Repealed 0; Pilot Rule Making: New 0, Amended 0, Repealed 0; or Other Alternative Rule Making: New 0, Amended 0, Repealed 0.

Date Adopted: November 17, 2006.

J. P. Koenings
 Director

NEW SECTION

WAC 220-47-31100L Purse seine—Open periods.

Notwithstanding the provisions of WAC 220-47-311, effective 12:01 a.m. November 19 through 11:59 p.m. November 25, 2006, it is unlawful to take, fish for or possess salmon taken for commercial purposes in Puget Sound Salmon Management and Catch Reporting Areas 7, 7A, 8A, 8D, 10, 11, 12, 12B, and 12C except in accordance with the open periods, mesh size, areas, species restrictions, notification, and landing requirements set forth in this chapter, provided that unless otherwise amended, all permanent rules for all other catch reporting areas remain in effect:

AREA	TIME	-	DATE(S)
7 & 7A:			CLOSED
8A	7AM	- 4PM	11/20, 11/22
8D	7AM	- 4PM	11/20, 11/22
10 & 11:			CLOSED
12 & 12B:	7AM	- 4PM	11/20
12C:			CLOSED

NEW SECTION

WAC 220-47-41100M Gill net—Open periods. (1)

Notwithstanding the provisions of WAC 220-47-411, effective 12:01 a.m. November 19 through 11:59 p.m. November 25, 2006, it is unlawful to take, fish for or possess salmon taken for commercial purposes in Puget Sound Salmon Management and Catch Reporting Areas 7, 7A, 10, 11, 12, 12B, and 12C except in accordance with the open periods, mesh size, areas, species restrictions, notification, and landing requirements set forth in this chapter, provided that unless otherwise amended, all permanent rules for all other catch reporting areas remain in effect:

AREA	TIME	-	DATE(S)	MINIMUM MESH
7 & 7A:			CLOSED	
10 & 11:			CLOSED	
12 & 12B:	7 AM	-	11/20	6 1/4
12C:			CLOSED	

REPEALER

The following sections of the Washington Administrative Code are repealed effective 12:01 a.m. November 19, 2006:

- WAC 220-47-31100K Purse seine—Open periods. (06-287)
- WAC 220-47-41100L Gill net—Open periods. (06-287)

The following sections of the Washington Administrative Code are repealed effective 12:01 a.m. November 26, 2006:

- WAC 220-47-31100L Purse seine—Open periods.
- WAC 220-47-41100M Gill net—Open periods.