### WSR 10-20-103 EMERGENCY RULES DEPARTMENT OF REVENUE

[Filed October 1, 2010, 10:10 a.m., effective October 1, 2010, 10:10 a.m.]

Effective Date of Rule: Immediately.

Purpose: WAC 458-20-194 (Rule 194) explains the apportionment requirements of persons entitled to apportion income under RCW 82.04.460(1). It also describes Washington nexus standards for business activities subject to apportionment under RCW 82.04.460(1). Rule 194 applies to persons subject to the service and other activities, international investment income, licensed boarding home, and low-level radioactive waste disposal business and occupation (B&O) tax classifications, and who are not required to apportion their income under another statute or rule.

WAC 458-20-14601 (Rule 14601) provides tax reporting instructions for financial institutions doing business both inside and outside the state of Washington.

Chapter 23, Laws of 2010 1st sp. sess. (2ESSB 6143) changed the apportionment and nexus provisions addressed in these rules, effective June 1, 2010. The department is amending these rules to recognize that the guidance provided in the rules does not apply after May 31, 2010.

Citation of Existing Rules Affected by this Order: Amending WAC 458-20-194 Doing business inside and outside the state and 458-20-14601 Financial institutions—Income apportionment.

Statutory Authority for Adoption: RCW 82.32.300 and 82.01.060(2).

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: An emergency adoption is necessary because permanent rules cannot be adopted at this time. This is the second emergency adoption of these rules. These drafts are the same as the previously adopted emergency rules, except that typographical errors noted by the code reviser have been corrected.

Number of Sections Adopted in Order to Comply with Federal Statute: New 0, Amended 0, Repealed 0; Federal Rules or Standards: New 0, Amended 0, Repealed 0; or Recently Enacted State Statutes: New 0, Amended 2, Repealed 0.

Number of Sections Adopted at Request of a Nongovernmental Entity: New 0, Amended 0, Repealed 0.

Number of Sections Adopted on the Agency's Own Initiative: New 0, Amended 2, Repealed 0.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 1, 2010.

Alan R. Lynn Rules Coordinator AMENDATORY SECTION (Amending WSR 97-11-033, filed 5/15/97, effective 7/1/97)

### WAC 458-20-14601 Financial institutions—Income apportionment. (1) Introduction.

- (a) This section provides tax reporting instructions for financial institutions doing business both inside and outside the state of Washington, and applies to tax liability incurred through May 31, 2010. Chapter 23, 2010 Laws 1st Special Session (2ESSB 6143) changed the apportionment reporting requirements for financial institutions effective June 1, 2010. Refer to WAC 458-20-19404 (Financial institutions Income apportionment) for tax liability incurred on and after June 1, 2010. Financial businesses that do not meet the definition of "financial institution" in subsection (3)(j) of this section and other businesses taxable under RCW 82.04.290 should refer to WAC 458-20-194 (Doing business inside and outside the state) for tax liability incurred on or before May 31, 2010.
- (b) Financial institutions engaged in making interstate sales of tangible personal property should also refer to WAC 458-20-193 (Inbound and outbound interstate sales of tangible personal property).

#### (2) Apportionment and allocation.

- (a) Except as otherwise specifically provided, a financial institution taxable under RCW 82.04.290 and taxable in another state shall allocate and apportion its apportionable income as provided in this section. All gross income that is not includable in apportionable income shall be allocated pursuant to the provisions of chapter 82.04 RCW. A financial institution organized under the laws of a foreign country, the Commonwealth of Puerto Rico, or a territory or possession of the United States, except such institutions that are exempt under RCW 82.04.315, whose effectively connected income (as defined under the Federal Internal Revenue Code) is taxable both in this state and another state, other than the state in which it is organized, shall allocate and apportion its gross income as provided in this section.
- (b) The apportionment percentage is determined by adding the taxpayer's receipts factor (as described in subsection (4) of this section), property factor (as described in subsection (5) of this section), and payroll factor (as described in subsection (6) of this section) together and dividing the sum by three. If one of the factors is missing, the two remaining factors are added together and the sum is divided by two. If two of the factors are missing, the remaining factor is the apportionment percentage. A factor is missing if both its numerator and denominator are zero, but it is not missing merely because its numerator is zero.
- (c) Each factor shall be computed according to the method of accounting (cash or accrual basis) used by the tax-payer for Washington state tax purposes for the taxable period. Persons should refer to WAC 458-20-197 (When tax liability arises) and WAC 458-20-199 (Accounting methods) for further guidance on the requirements of each accounting method. Generally, financial institutions are required to file returns on a monthly basis. To enable financial institutions to more easily comply with the provisions of this section, financial institutions will file returns using factors calculated based on the most recent calendar year for which information is available. A reconciliation shall be filed for each year within thirty days of the time that the taxpayer files its federal

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income tax returns for that year, but not later than October 30th of the following year. For example, for returns filed for taxable activities occurring during calendar year 1998, a tax-payer would use factors calculated based on its 1996 information. A reconciliation would be filed for 1998 using factors based on 1998 information as soon as the information was available to the taxpayer, but not later than thirty days after the time federal income tax returns were due for 1998, or October 30, 1999. In the case of consolidations, mergers, or divestitures, a taxpayer shall make the appropriate adjustments to the factors to reflect its changed operations.

- (d) If the allocation and apportionment provisions of this section do not fairly represent the extent of its business activity in this state, the taxpayer may petition for, or the department may require, in respect to all or any part of the taxpayer's business activity:
  - (i) Separate accounting;
- (ii) A calculation of tax liability utilizing the cost of doing business method outlined in RCW 82.04.460(1);
  - (iii) The exclusion of any one or more of the factors;
- (iv) The inclusion of one or more additional factors which will fairly represent the taxpayer's business activity in this state: or
- (v) The employment of any other method to effectuate an equitable allocation and apportionment of the taxpayer's receipts.
- (3) **Definitions.** The following definitions apply throughout this section:
- (a) "Apportionable income" means the gross income of the business taxable under RCW 82.04.290, including income received from activities outside this state if the income would be taxable under RCW 82.04.290 if received from activities in this state, less the exemptions and deductions allowable under chapter 82.04 RCW.
- (b) "Billing address" means the location indicated in the books and records of the taxpayer on the first day of the taxable period (or on such later date in the taxable period when the customer relationship began) as the address where any notice, statement and/or bill relating to a customer's account is mailed.
- (c) "Borrower or credit card holder located in this state" means:
- (i) A borrower, other than a credit card holder, that is engaged in a trade or business which maintains its commercial domicile in this state; or
- (ii) A borrower that is not engaged in a trade or business or a credit card holder, whose billing address is in this state.
  - (d) "Commercial domicile" means:
- (i) The headquarters of the trade or business, that is, the place from which the trade or business is principally managed and directed; or
- (ii) If a taxpayer is organized under the laws of a foreign country, or of the Commonwealth of Puerto Rico, or any territory or possession of the United States, such taxpayer's commercial domicile is deemed for the purposes of this section to be the state of the United States or the District of Columbia from which such taxpayer's trade or business in the United States is principally managed and directed. It is presumed, subject to rebuttal by a preponderance of the evidence, that the location from which the taxpayer's trade or

business is principally managed and directed is the state of the United States or the District of Columbia to which the greatest number of employees are regularly connected or out of which they are working, irrespective of where the services of such employees are performed, as of the last day of the taxable period.

- (e) "Compensation" means wages, salaries, commissions and any other form of remuneration paid to employees for personal services that are included in such employee's gross income under the Federal Internal Revenue Code. In the case of employees not subject to the Federal Internal Revenue Code, e.g., those employed in foreign countries, the determination of whether such payments would constitute gross income to such employees under the Federal Internal Revenue Code shall be made as though such employees were subject to the Federal Internal Revenue Code.
- (f) "Credit card" means credit, travel or entertainment card.
- (g) "Credit card issuer's reimbursement fee" means the fee a taxpayer receives from a merchant's bank because one of the persons to whom the taxpayer has issued a credit card has charged merchandise or services to the credit card.
  - (h) "Department" means the department of revenue.
- (i) "Employee" means, with respect to a particular taxpayer, any individual who, under the usual common-law rules applicable in determining the employer-employee relationship, has the status of an employee of that taxpayer.
  - (j) "Financial institution" means:
- (i) Any corporation or other business entity chartered under Titles 30, 31, 32, 33 RCW, or registered under the Federal Bank Holding Company Act of 1956, as amended, or registered as a savings and loan holding company under the Federal National Housing Act, as amended;
- (ii) A national bank organized and existing as a national bank association pursuant to the provisions of the National Bank Act, 12 U.S.C. §§21 et seq.;
- (iii) A savings association or federal savings bank as defined in the Federal Deposit Insurance Act, 12 U.S.C. §1813 (b)(1);
- (iv) Any bank or thrift institution incorporated or organized under the laws of any state;
- (v) Any corporation organized under the provisions of 12 U.S.C. §§611 to 631;
- (vi) Any agency or branch of a foreign depository as defined in 12 U.S.C. §3101 that is not exempt under RCW 82.04.315;
- (vii) Any credit union, other than a state or federal credit union exempt under state or federal law;
- (viii) A production credit association organized under the Federal Farm Credit Act of 1933, all of whose stock held by the Federal Production Credit Corporation has been retired:
- (ix) Any corporation or other business entity who receives gross income taxable under RCW 82.04.290, and whose voting interests are more than fifty percent owned, directly or indirectly, by any person or business entity described in (j)(i) through (viii) of this subsection other than an insurance company liable for the insurance premiums tax under RCW 48.14.020 or any other company taxable under chapter 48.14 RCW;

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- (x) A corporation or other business entity that derives more than fifty percent of its total gross income for federal income tax purposes from finance leases. For purposes of this subsection, a "finance lease" means a lease which meets two requirements:
- (A) It is the type of lease permitted to be made by national banks (see 12 U.S.C. 24(7), 12 U.S.C. 24(10), Comptroller of the Currency-Regulations, Part 23-Leasing (added by 56 Fed. Reg. 28314, June 20, 1991, effective July 22, 1991), and Regulation Y of the Federal Reserve System 12 CFR 225.25, as amended); and
- (B) It is the economic equivalent of an extension of credit, i.e., the lease is treated by the lessor as a loan for federal income tax purposes. In no event does a lease qualify as an extension of credit where the lessor takes depreciation on such property for federal income tax purposes.

For this classification to apply, the average of the gross income in the current tax year and immediately preceding two tax years must satisfy the more than fifty percent requirement;

- (xi) Any other person or business entity, other than an insurance general agent taxable under RCW 82.04.280(5), an insurance business exempt from the business and occupation tax under RCW 82.04.320, a real estate broker taxable under RCW 82.04.255, a securities dealer or international investment management company taxable under RCW 82.04.290(2), that derives more than fifty percent of its gross receipts from activities that a person described in (j)(ii) through (viii) and (x) of this subsection is authorized to transact. For purposes of this subparagraph, the computation of apportionable income shall not include income from nonrecurring, extraordinary items;
- (xii) The department is authorized to exclude any person from the application of (j)(xi) of this subsection upon such person proving, by clear and convincing evidence, that the activity producing the receipts of such person is not in substantial competition with those persons described in (j)(ii) through (viii) and (x) of this subsection.
- (k) "Gross income of the business," "gross income," or "income" has the same meaning as in RCW 82.04.080 and means the value proceeding or accruing by reason of the transaction of the business engaged in and includes gross proceeds of sales, compensation for the rendition of services, gains realized from trading in stocks, bonds, or other evidences of indebtedness, interest, discount, rents, royalties, fees, commissions, dividends, and other emoluments however designated, all without any deduction on account of the cost of tangible property sold, the cost of materials used, labor costs, interest, discount, delivery costs, taxes, or any other expense whatsoever paid or accrued and without any deduction on account of losses.
- (l) "Gross rents" means the actual sum of money or other consideration payable for the use or possession of real property. "Gross rents" includes, but is not limited to:
- (i) Any amount payable for the use or possession of real property whether designated as a fixed sum of money or as a percentage of receipts, profits or otherwise;
- (ii) Any amount payable as additional rent or in lieu of rent, such as interest, taxes, insurance, repairs or any other

- amount required to be paid by the terms of a lease or other arrangement; and
- (iii) A proportionate part of the cost of any improvement to real property made by or on behalf of the taxpayer which reverts to the owner or grantor upon termination of a lease or other arrangement. The amount to be included in gross rents is the amount of amortization or depreciation allowed in computing the taxable income base for the taxable period. However, where a building is erected on leased land by or on behalf of the taxpayer, the value of the land is determined by multiplying the gross rent by eight and the value of the building is determined in the same manner as if owned by the taxpayer.
- (iv) The following are not included in the term "gross rents":
- (A) Reasonable amounts payable as separate charges for water and electric service furnished by the lessor;
- (B) Reasonable amounts payable as service charges for janitorial services furnished by the lessor;
- (C) Reasonable amounts payable for storage, provided such amounts are payable for space not designated and not under the control of the taxpayer; and
- (D) That portion of any rental payment which is applicable to the space subleased from the taxpayer and not used by it
- (m) "Loan" means any extension of credit resulting from direct negotiations between the taxpayer and its customer, and/or the purchase, in whole or in part, of such extension of credit from another. "Loan" includes participations, syndications, and leases treated as loans for federal income tax purposes. "Loan" does not include: Properties treated as loans under Section 595 of the Federal Internal Revenue Code; futures or forward contracts; options; notional principal contracts such as swaps; credit card receivables, including purchased credit card relationships; noninterest bearing balances due from depository institutions; cash items in the process of collection; federal funds sold; securities purchased under agreements to resell; assets held in a trading account; securities; interests in a REMIC, or other mortgage-backed or asset-backed security; and other similar items.
- (n) "Loan secured by real property" means that fifty percent or more of the aggregate value of the collateral used to secure a loan or other obligation was real property, when valued at fair market value as of the time the original loan or obligation was incurred.
- (o) "Merchant discount" means the fee (or negotiated discount) charged to a merchant by the taxpayer for the privilege of participating in a program whereby a credit card is accepted in payment for merchandise or services sold to the card holder.
- (p) "Participation" means an extension of credit in which an undivided ownership interest is held on a *pro rata* basis in a single loan or pool of loans and related collateral. In a loan participation, the credit originator initially makes the loan and then subsequently resells all or a portion of it to other lenders. The participation may or may not be known to the borrower.
  - (q) "Person" has the meaning given in RCW 82.04.030.
- (r) "Principal base of operations" with respect to transportation property means the place of more or less permanent

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nature from which said property is regularly directed or controlled. With respect to an employee, the "principal base of operations" means the place of more or less permanent nature from which the employee regularly:

- (i) Starts his or her work and to which he or she customarily returns in order to receive instructions from his or her employer; or
- (ii) Communicates with his or her customers or other persons; or
- (iii) Performs any other functions necessary to the exercise of his or her trade or profession at some other point or points.
- (s) "Real property owned" and "tangible personal property owned" mean real and tangible personal property, respectively:
- (i) On which the taxpayer may claim depreciation for federal income tax purposes; or
- (ii) Property to which the taxpayer holds legal title and on which no other person may claim depreciation for federal income tax purposes (or could claim depreciation if subject to federal income tax).

Real and tangible personal property do not include coin, currency, or property acquired in lieu of or pursuant to a fore-closure.

- (t) "Regular place of business" means an office at which the taxpayer carries on its business in a regular and systematic manner and which is continuously maintained, occupied and used by employees of the taxpayer.
- (u) "State" means a state of the United States, the District of Columbia, the Commonwealth of Puerto Rico, any territory or possession of the United States or any foreign country.
- (v) "Syndication" means an extension of credit in which two or more persons fund and each person is at risk only up to a specified percentage of the total extension of credit or up to a specified dollar amount.
  - (w) "Taxable in another state" means either:
- (i) That a taxpayer is subject in another state to a gross receipts or franchise tax for the privilege of doing business, a franchise tax measured by net income, a corporate stock tax (including a bank shares tax), a single business tax, or an earned surplus tax, or any other tax which is imposed upon or measured by gross or net income; or
- (ii) That another state has jurisdiction to subject the taxpayer to any of such taxes regardless of whether, in fact, the state does or does not.
- (x) "Taxable period" means the calendar year during which tax liability is incurred.
- (y) "Transportation property" means vehicles and vessels capable of moving under their own power, such as aircraft, trains, water vessels and motor vehicles, as well as any equipment or containers attached to such property, such as rolling stock, barges, trailers or the like.

#### (4) Receipts factor.

(a) **General.** Except as provided in subsection (7) of this section, the receipts factor is a fraction, the numerator of which is the gross income of the taxpayer in this state during the taxable period and the denominator of which is the gross income of the taxpayer inside and outside this state during the taxable period. The method of calculating receipts for pur-

poses of the denominator is the same as the method used in determining receipts for purposes of the numerator.

(b) Receipts from the lease of real property. The numerator of the receipts factor includes income from the lease or rental of real property owned by the taxpayer if the property is located within this state or income from the sublease of real property if the property is located within this state.

### (c) Receipts from the lease of tangible personal property.

- (i) Except as described in (c)(ii) of this subsection, the numerator of the receipts factor includes income from the lease or rental of tangible personal property owned by the taxpayer if the property is located within this state when it is first placed in service by the lessee.
- (ii) Income from the lease or rental of transportation property owned by the taxpayer is included in the numerator of the receipts factor to the extent that the property is used in this state. The extent an aircraft is used in this state and the amount of income that is to be included in the numerator of this state's receipts factor is determined by multiplying all the income from the lease or rental of the aircraft by a fraction, the numerator of which is the number of landings of the aircraft in this state and the denominator of which is the total number of landings of the aircraft. If the extent of the use of any transportation property within this state cannot be determined, then the property will be deemed to be used wholly in the state in which the property has its principal base of operations. A motor vehicle will be deemed to be used wholly in the state in which it is registered.

#### (d) Interest from loans secured by real property.

- (i) The numerator of the receipts factor includes interest and fees or penalties in the nature of interest from loans secured by real property if the property is located within this state. If the property is located both within this state and one or more other states, the income described in this subparagraph is included in the numerator of the receipts factor if more than fifty percent of the fair market value of the real property is located within this state. If more than fifty percent of the fair market value of the real property is not located within any one state, then the income described in this subparagraph shall be included in the numerator of the receipts factor if the borrower is located in this state.
- (ii) The determination of whether the real property securing a loan is located within this state shall be made as of the time the original agreement was made and any and all subsequent substitutions of collateral shall be disregarded.
- (e) **Interest from loans not secured by real property.** The numerator of the receipts factor includes interest and fees or penalties in the nature of interest from loans not secured by real property if the borrower is located in this state.
- (f) **Net gains from the sale of loans.** The numerator of the receipts factor includes net gains from the sale of loans. Net gains from the sale of loans includes income recorded under the coupon stripping rules of Section 1286 of the Federal Internal Revenue Code.
- (i) The amount of net gains (but not less than zero) from the sale of loans secured by real property included in the numerator is determined by multiplying such net gains by a fraction the numerator of which is the amount included in the

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- numerator of the receipts factor pursuant to subsection (4)(d) and the denominator of which is the total amount of interest and fees or penalties in the nature of interest from loans secured by real property.
- (ii) The amount of net gains (but not less than zero) from the sale of loans not secured by real property included in the numerator is determined by multiplying such net gains by a fraction the numerator of which is the amount included in the numerator of the receipts factor pursuant to (e) of this subsection and the denominator of which is the total amount of interest and fees or penalties in the nature of interest from loans not secured by real property.
- (g) Receipts from credit card receivables. The numerator of the receipts factor includes interest and fees or penalties in the nature of interest from credit card receivables and income from fees charged to card holders, such as annual fees, if the billing address of the card holder is in this state.
- (h) Net gains from the sale of credit card receivables. The numerator of the receipts factor includes net gains (but not less than zero) from the sale of credit card receivables multiplied by a fraction, the numerator of which is the amount included in the numerator of the receipts factor pursuant to (g) of this subsection and the denominator of which is the taxpayer's total amount of interest and fees or penalties in the nature of interest from credit card receivables and fees charged to card holders.
- (i) Credit card issuer's reimbursement fees. The numerator of the receipts factor includes all credit card issuer's reimbursement fees multiplied by a fraction, the numerator of which is the amount included in the numerator of the receipts factor pursuant to (g) of this subsection and the denominator of which is the taxpayer's total amount of interest and fees or penalties in the nature of interest from credit card receivables and fees charged to card holders.
- (j) Receipts from merchant discount. The numerator of the receipts factor includes receipts from merchant discount if the commercial domicile of the merchant is in this state. Such receipts shall be computed net of any cardholder charge backs, but shall not be reduced by any interchange transaction fees or by any issuer's reimbursement fees paid to another for charges made by its card holders.

#### (k) Loan servicing fees.

- (i)(A) The numerator of the receipts factor includes loan servicing fees derived from loans secured by real property multiplied by a fraction the numerator of which is the amount included in the numerator of the receipts factor under (d) of this subsection and the denominator of which is the total amount of interest and fees or penalties in the nature of interest from loans secured by real property.
- (B) The numerator of the receipts factor includes loan servicing fees derived from loans not secured by real property multiplied by a fraction the numerator of which is the amount included in the numerator of the receipts factor under (e) of this subsection and the denominator of which is the total amount of interest and fees or penalties in the nature of interest from loans not secured by real property.
- (ii) If the taxpayer receives loan servicing fees for servicing either the secured or the unsecured loans of another, the numerator of the receipts factor includes such fees if the borrower is located in this state.

(l) **Receipts from services.** The numerator of the receipts factor includes receipts from services not otherwise apportioned under this subsection if the service is performed in this state. If the service is performed both inside and outside this state, the numerator of the receipts factor includes receipts from services not otherwise apportioned under this section, if a greater proportion of the activity producing the receipts is performed in this state based on cost of performance.

### (m) Receipts from investment assets and activities and trading assets and activities.

- (i) Interest, dividends, net gains (but not less than zero) and other income from investment assets and activities and from trading assets and activities are included in the receipts factor. Investment assets and activities and trading assets and activities include but are not limited to: Investment securities; trading account assets; federal funds; securities purchased and sold under agreements to resell or repurchase; options; futures contracts; forward contracts; notional principal contracts such as swaps; equities; and foreign currency transactions. With respect to the investment and trading assets and activities described in (m)(i)(A) and (B) of this subsection, the receipts factor includes the following:
- (A) The receipts factor includes the amount by which interest from federal funds sold and securities purchased under resale agreements exceeds interest expense on federal funds purchased and securities sold under repurchase agreements.
- (B) The receipts factor includes the amount by which interest, dividends, gains and other receipts from trading assets and activities, including but not limited to assets and activities in the matched book, in the arbitrage book, and foreign currency transactions, exceed amounts paid in lieu of interest, amounts paid in lieu of dividends, and losses from such assets and activities.
- (ii) The numerator of the receipts factor includes interest, dividends, net gains (but not less than zero) and other receipts from investment assets and activities and from trading assets and activities described in (m)(i) of this subsection that are attributable to this state.
- (A) The amount of interest, dividends, net gains (but not less than zero) and other income from investment assets and activities in the investment account to be attributed to this state and included in the numerator is determined by multiplying all such income from such assets and activities by a fraction, the numerator of which is the average value of such assets which are properly assigned to a regular place of business of the taxpayer within this state and the denominator of which is the average value of all such assets.
- (B) The amount of interest from federal funds sold and purchased and from securities purchased under resale agreements and securities sold under repurchase agreements attributable to this state and included in the numerator is determined by multiplying the amount described in (m)(i)(A) of this subsection from such funds and such securities by a fraction, the numerator of which is the average value of federal funds sold and securities purchased under agreements to resell which are properly assigned to a regular place of business of the taxpayer within this state and the denominator of

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which is the average value of all such funds and such securities.

- (C) The amount of interest, dividends, gains and other income from trading assets and activities, including but not limited to assets and activities in the matched book, in the arbitrage book and foreign currency transactions, (but excluding amounts described in (m)(ii)(A) or (B) of this subsection), attributable to this state and included in the numerator is determined by multiplying the amount described in (m)(i)(B) of this subsection by a fraction, the numerator of which is the average value of such trading assets which are properly assigned to a regular place of business of the taxpayer within this state and the denominator of which is the average value of all such assets.
- (D) For purposes of this paragraph, average value shall be determined using the rules for determining the average value of tangible personal property set forth in subsection (5) of this section.
- (iii) In lieu of using the method set forth in (m)(ii) of this subsection, the taxpayer may elect, or the department may require in order to fairly represent the business activity of the taxpayer in this state, the use of the method set forth in this paragraph.
- (A) The amount of interest, dividends, net gains (but not less than zero) and other income from investment assets and activities in the investment account to be attributed to this state and included in the numerator is determined by multiplying all such income from such assets and activities by a fraction, the numerator of which is the gross receipts from such assets and activities which are properly assigned to a regular place of business of the taxpayer within this state and the denominator of which is the gross income from all such assets and activities.
- (B) The amount of interest from federal funds sold and purchased and from securities purchased under resale agreements and securities sold under repurchase agreements attributable to this state and included in the numerator is determined by multiplying the amount described in (m)(i)(A) of this subsection from such funds and such securities by a fraction, the numerator of which is the gross income from such funds and such securities which are properly assigned to a regular place of business of the taxpayer within this state and the denominator of which is the gross income from all such funds and such securities.
- (C) The amount of interest, dividends, gains and other receipts from trading assets and activities, including but not limited to assets and activities in the matched book, in the arbitrage book and foreign currency transactions, (but excluding amounts described in (m)(ii)(A) or (B) of this subsection), attributable to this state and included in the numerator is determined by multiplying the amount described in (m)(i)(B) of this subsection by a fraction, the numerator of which is the gross income from such trading assets and activities which are properly assigned to a regular place of business of the taxpayer within this state and the denominator of which is the gross income from all such assets and activities.
- (iv) If the taxpayer elects or is required by the department to use the method set forth in (m)(iii) of this subsection, it shall use this method on all subsequent returns unless the

- taxpayer receives prior permission from the department to use, or the department requires a different method.
- (v) The taxpayer has the burden of proving that an investment asset or activity or trading asset or activity was properly assigned to a regular place of business outside of this state by demonstrating that the day-to-day decisions regarding the asset or activity occurred at a regular place of business outside this state. If the day-to-day decisions regarding an investment asset or activity or trading asset or activity occur at more than one regular place of business and one such regular place of business is in this state and one such regular place of business is outside this state, such asset or activity is considered to be located at the regular place of business of the taxpayer where the investment or trading policies or guidelines with respect to the asset or activity are established. Such policies and guidelines are presumed, subject to rebuttal by preponderance of the evidence, to be established at the commercial domicile of the taxpayer.
- (n) Attribution of certain receipts to commercial domicile. All receipts which would be assigned under this section to a state in which the taxpayer is not taxable are included in the numerator of the receipts factor, if the taxpayer's commercial domicile is in this state.

#### (5) Property factor.

(a) **General.** Except as provided in subsection (7) of this section, the property factor is a fraction, the numerator of which is the average value of real property and tangible personal property rented to the taxpayer that is located or used within this state during the taxable period, the average value of the real and tangible personal property owned by the taxpayer that is located or used within this state during the taxable period, and the average value of the taxpayer's loans and credit card receivables that are located within this state during the taxable period, and the denominator of which is the average value of all such property located or used inside and outside this state during the taxable period.

#### (b) Value of property owned by the taxpayer.

- (i) The value of real property and tangible personal property owned by the taxpayer is the original cost or other basis of such property for federal income tax purposes without regard to depletion, depreciation or amortization.
- (ii) Loans are valued at their outstanding principal balance, without regard to any reserve for bad debts. If a loan is charged-off in whole or in part for federal income tax purposes, the portion of the loan charged off is not outstanding. A specifically allocated reserve established under regulatory or financial accounting guidelines which is treated as charged-off for federal income tax purposes shall be treated as charged-off for purposes of this section.
- (iii) Credit card receivables are valued at their out-standing principal balance, without regard to any reserve for bad debts. If a credit card receivable is charged-off in whole or in part for federal income tax purposes, the portion of the receivable charged-off is not outstanding.
- (c) Average value of property owned by the taxpayer. The average value of property owned by the taxpayer is computed on an annual basis by adding the value of the property on the first day of the taxable period and the value on the last day of the taxable period and dividing the sum by two. If averaging on this basis does not properly reflect average

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value, the department may require averaging on a more frequent basis. The taxpayer may elect to average on a more frequent basis. When averaging on a more frequent basis is required by the department or is elected by the taxpayer, the same method of valuation must be used consistently by the taxpayer with respect to property inside and outside this state and on all subsequent returns unless the taxpayer receives prior permission from the department or the department requires a different method of determining average value.

### (d) Average value of real property and tangible personal property rented to the taxpayer.

- (i) The average value of real property and tangible personal property that the taxpayer has rented from another and which is not treated as property owned by the taxpayer for federal income tax purposes, shall be determined annually by multiplying the gross rents payable during the taxable year by eight.
- (ii) Where the use of the general method described in this subsection results in inaccurate valuations of rented property, any other method which properly reflects the value may be adopted by the department or by the taxpayer when approved in writing by the department. Once approved, such other method of valuation must be used on all subsequent returns unless the taxpayer receives prior approval from the department or the department requires a different method of valuation.

### (e) Location of real property and tangible personal property owned by or rented to the taxpayer.

- (i) Except as described in (e)(ii) of this subsection, real property and tangible personal property owned by or rented to the taxpayer is considered to be located within this state if it is physically located, situated or used within this state.
- (ii) Transportation property is included in the numerator of the property factor to the extent that the property is used in this state. The extent an aircraft will be deemed to be used in this state and the amount of value that is to be included in the numerator of this state's property factor is determined by multiplying the average value of the aircraft by a fraction, the numerator of which is the number of landings of the aircraft in this state and the denominator of which is the total number of landings of the aircraft everywhere during the tax reporting period. If the extent of the use of any transportation property within this state cannot be determined, then the property is deemed to be used wholly in the state in which the property has its principal base of operations. A motor vehicle is deemed to be used wholly in the state in which it is registered. Thus, a motor vehicle will not be considered as used in Washington if there is no requirement for the vehicle to be licensed or registered in Washington.

#### (f) Location of loans.

- (i)(A) A loan is located within this state if it is properly assigned to a regular place of business of the taxpayer within this state.
- (B) A loan is properly assigned to the regular place of business with which it has a majority of substantive contacts. A loan assigned by the taxpayer to a regular place of business outside the state shall be presumed to have been properly assigned if:

- (I) The taxpayer has assigned, in the regular course of its business, such loan on its records to a regular place of business consistent with federal or state regulatory requirements;
- (II) Such assignment on its records is based upon substantive contacts of the loan to such regular place of business; and
- (III) The taxpayer uses said records reflecting assignment of loans for the filing of all state and local tax returns for which an assignment of loans to a regular place of business is required.
- (ii) The presumption of proper assignment of a loan provided in (f)(i)(A) of this subsection may be rebutted by a preponderance of the evidence, showing that the majority of substantive contacts regarding such loan did not occur at the regular place of business to which it was assigned on the taxpayer's records. When such presumption has been rebutted, the loan is located within this state if: The taxpayer had a regular place of business within this state at the time the loan was made; and the taxpayer fails to show, by a preponderance of the evidence, that the majority of substantive contacts regarding such loan did not occur within this state.
- (A) If a loan is assigned by the taxpayer to a place outside this state which is not a regular place of business, it is presumed, subject to rebuttal on a preponderance of evidence, that the majority of substantive contacts regarding the loan occurred within this state if, at the time the loan was made the taxpayer's commercial domicile, as defined in subsection (3)(d) of this section, was within this state.
- (B) To determine the state in which the majority of substantive contacts relating to a loan have occurred, the facts and circumstances regarding the loan at issue shall be reviewed on a case-by-case basis and consideration shall be given to such activities as the solicitation, investigation, negotiation, approval and administration of the loan. The terms "solicitation," "investigation," "negotiation," "approval" and "administration" are defined as follows:
- (I) Solicitation. Solicitation is either active or passive. Active solicitation occurs when an employee of the taxpayer initiates the contact with the customer. Such activity is located at the regular place of business which the taxpayer's employee is regularly connected with or working out of, regardless of where the services of such employee were actually performed. Passive solicitation occurs when the customer initiates the contact with the taxpayer. If the customer's initial contact was not at a regular place of business of the taxpayer, the regular place of business, if any, where the passive solicitation occurred is determined by the facts in each case.
- (II) *Investigation*. Investigation is the procedure whereby employees of the taxpayer determine the credit worthiness of the customer as well as the degree of risk involved in making a particular agreement. Such activity is located at the regular place of business which the taxpayer's employees are regularly connected with or working out of, regardless of where the services of such employees were actually performed.
- (III) Negotiation. Negotiation is the procedure whereby employees of the taxpayer and its customer determine the terms of the agreement (e.g., the amount, duration, interest rate, frequency of repayment, currency denomination and

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security required). Such activity is located at the regular place of business which the taxpayer's employees are regularly connected with or working out of, regardless of where the services of such employees were actually performed.

- (IV) Approval. Approval is the procedure whereby employees or the board of directors of the taxpayer make the final determination whether to enter into the agreement. Such activity is located at the regular place of business which the taxpayer's employees are regularly connected with or working out of, regardless of where the services of such employees were actually performed. If the board of directors makes the final determination, such activity is located at the commercial domicile of the taxpayer.
- (V) Administration. Administration is the process of managing the account. This process includes bookkeeping, collecting the payments, corresponding with the customer, reporting to management regarding the status of the agreement and proceeding against the borrower or the security interest if the borrower is in default. Such activity is located at the regular place of business which oversees this activity.
- (g) **Location of credit card receivables.** For purposes of determining the location of credit card receivables, credit card receivables are treated as loans and are subject to the provisions of (f) of this subsection.
- (h) Period for which properly assigned loan remains assigned. A loan that has been properly assigned to a state shall remain assigned to that state for the length of the original term of the loan, absent any change in material fact. If the original term of the loan is modified (extended or reduced), the loan may be properly assigned to another state if the loan has a majority of substantive contact to a regular place of business there.

#### (6) Payroll factor.

- (a) **General.** Except as provided in subsection (7) of this section, the payroll factor is a fraction, the numerator of which is the total amount paid in this state during the taxable period by the taxpayer for compensation of employees and the denominator of which is the total compensation paid both inside and outside this state during the taxable period. The payroll factor shall include all compensation paid to employees.
- (b) Compensation relating to independent contractors. Payments made to any independent contractor or any other person not properly classifiable as an employee is excluded from both the numerator and denominator of the factor.
- (c) When compensation paid in this state. Compensation is paid in this state if any one of the following tests, applied consecutively, is met:
- (i) The employee's services are performed entirely within this state.
- (ii) The employee's services are performed both inside and outside the state, but the service performed without the state is incidental to the employee's service within the state. The term "incidental" means any service which is temporary or transitory in nature, or which is rendered in connection with an isolated transaction.
- (iii) If the employee's services are performed both inside and outside this state, the employee's compensation will be attributed to this state:

- (A) If the employee's principal base of operations is inside this state; or
- (B) If there is no principal base of operations in any state in which some part of the services are performed, but the place from which the services are directed or controlled is in this state; or
- (C) If the principal base of operations and the place from which the services are directed or controlled are not in any state in which some part of the service is performed but the employee's residence is in this state.

#### (7) Alternative factor calculation.

- (a) **General.** A taxpayer may elect to use the alternative factors calculation as provided in this subsection. The alternative factors calculation requires the use of all three factors provided below. A taxpayer making such an election must keep books and records sufficient to explain the calculations. Such an election, once made, must continue for a full calendar year.
- (b) **Receipts factor.** The alternative receipts factor may be calculated by excluding from both the numerator and the denominator of the receipts factor as calculated in subsection (4) of this section gross income attributable to items that would not be subject to tax under the provisions of RCW 82.04.290, whether from activities inside or outside of the state. For example, a taxpayer making the election to use the alternative factors calculation must exclude all receipts from the rental of tangible personal property in Washington from the numerator and all receipts from the rental of tangible personal property, wherever located, in the denominator.
- (c) **Property factor.** The alternative property factor may be calculated by excluding from both the numerator and the denominator of the property factor as calculated in subsection (5) of this section property, the income from which would be considered wholesale or retail sales under chapter 82.04 RCW, whether from activities inside or outside the state. For example, a taxpayer making the election to use the alternative factors calculation must exclude all tangible personal property rented to customers in Washington from the numerator and all tangible personal property rented to customers, wherever located, in the denominator.
- (d) **Payroll factor.** The alternative payroll factor may be calculated by excluding from both the numerator and the denominator of the payroll factor as calculated in subsection (6) of this section that amount paid to employees in connection with earning gross income which would not be subject to tax under RCW 82.04.290, whether earned from activities inside or outside of the state. For example, a taxpayer making the election to use the alternative factors calculation must exclude all compensation paid to employees in connection with activities that are not taxable under RCW 82.04.290 from the numerator and all compensation paid to employees wherever located that would not be taxable under RCW 82.04.290 if it had been earned in Washington.

#### (8) Effective date.

- (a) **General.** This section applies to gross income that is reportable with respect to periods beginning on and after July 1. 1997.
- (b) **Transition period election.** A financial institution may notify the department of its intention to apportion its gross receipts in the manner prescribed in RCW 82.04.460(1)

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and WAC 458-20-194. Such election may continue until the earlier of the date the financial institution elects to report in accordance with this section, but not later than January 1, 2000.

**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 05-24-054, filed 12/1/05, effective 1/1/06)

### WAC 458-20-194 Doing business inside and outside the state. (1) Introduction.

(a) This section ((applies to)) explains the apportionment requirements of persons entitled to apportion income under RCW 82.04.460(1), and applies only to tax liability incurred during the period of January 1, 2006 through May 31, 2010. Chapter 23, 2010 Laws 1st Special Session (2ESSB 6143) changed the apportionment provisions of RCW 82.04.460(1) effective June 1, 2010. ((Specifically this)) This section specifically applies to taxpayers who maintain places of business both within and without the state that contribute to the rendition of services and who are taxable under RCW 82.04.290, 82.04.2908, or any other statute that provides for apportionment under RCW 82.04.460(1) during this period.

Persons subject to the service and other activities, international investment income, licensed boarding home, and low-level radioactive waste disposal business and occupation (B&O) tax classifications, and who are not required to apportion their income under another statute or rule, should use this section. In addition, this section describes Washington nexus standards for business activities subject to apportionment under RCW 82.04.460(1) for tax liability incurred between January 1, 2006 through May 31, 2010. Nexus is described in subsection (2) of this section; separate accounting in subsection (3) of this section; and cost apportionment in subsection (4) of this section.

- (b) Readers may also find helpful information in the following rules:
- (((i) WAC 458-20-14601 (Financial institutions—Income apportionment).
- (ii) WAC 458-20-170 (Constructing and repairing of new or existing buildings or other structures upon real property).
  - (iii) WAC 458-20-179 (Public utility tax).
- (iv) WAC 458 20 193 (Inbound and outbound interstate sales of tangible personal property).
- (v) WAC 458 20 236 (Baseball clubs and other sport organizations).))
- (i) WAC 458-20-19401 Minimum nexus thresholds for apportionable activities. This rule describes minimum nexus thresholds that are effective June 1, 2010.
- (ii) WAC 458-20-19402 Single factor receipts apportionment Generally. This rule describes the general application of single factor receipts apportionment that is effective June 1 2010
- (iii) WAC 458-20-19403 Single factor receipts apportionment Royalties. This rule describes the application of single factor receipts apportionment to gross income from

- royalties and applies only to tax liability incurred after May 31, 2010.
- (iv) WAC 458-20-19404 Single factor receipts apportionment Financial institutions. This rule describes the application of single factor receipts apportionment to certain income of financial institutions and applies only to tax liability incurred after May 31, 2010.
- (v) WAC 458-20-14601 Financial institutions Income apportionment. This rule describes the apportionment of income for financial institutions for tax liability incurred prior to June 1, 2010.
- (c) The examples included in this section identify a number of facts and then state a conclusion. These examples should be used only as a general guide. The tax results of all situations must be determined after a review of all the facts and circumstances.
  - (2) Nexus.
- (a) Place of business minimum presence necessary for tax. The following discussion of nexus applies only to gross income from activities subject to apportionment under this rule. A place of business exists in a state when a taxpayer engages in activities in the state that are sufficient to create nexus. Nexus is that minimum level of business activity or connection with the state of Washington which subjects the business to the taxing jurisdiction of this state. Nexus is created when a taxpayer is engaged in activities in the state, either directly or through a representative, for the purpose of performing a business activity. It is not necessary that a taxpayer have a permanent place of business within a state to create nexus.
- (b) **Examples.** The following examples demonstrate Washington's nexus principles.
- (i) Assume an attorney licensed to practice only in Washington performs services for clients located in both Washington and Florida. All of the services are performed within Washington. The attorney does not have nexus with any state other than Washington.
- (ii) Assume the same facts as the example in (b)(i) of this subsection, plus the attorney attends continuing education classes in Florida related to the subject matter for which his Florida clients hired him. The attorney's presence in Florida for the continuing education classes does not create nexus because he is not engaging in business in Florida.
- (iii) Assume the same facts as the example in (b)(ii) of this subsection, plus the attorney is licensed to practice law in Florida and frequently travels to Florida for the purpose of conducting discovery and trial work. Even though the attorney does not maintain an office in Florida, the attorney has nexus with both Washington and Florida.
- (iv) Assume an architectural firm maintains physical offices in both Washington and Idaho. The architectural firm has nexus with both Washington and Idaho.
- (v) Assume an architectural firm maintains its only physical office in Washington, and when the firm needs a presence in Idaho, it contracts with nonemployee architects in Idaho instead of maintaining a physical office in Idaho. Employees of the Washington firm do not travel to Idaho. Instead, the contract architects interact directly with the clients in Idaho, and perform the services the firm contracted to

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perform in Idaho. The architectural firm has nexus with both Washington and Idaho.

- (vi) Assume the same facts as the example in (b)(v) of this subsection except the contracted architects never meet with the firm's clients and instead forward all work products to the firm's Washington office, which then submits that work product to the client. In this case, the architectural firm does not have nexus with Idaho. The mere purchase of services from a subcontractor located in another state that does not act as the business' representative to customers does not create nexus.
- (vii) Assume that an accounting firm maintains its only office in Washington. The accounting firm enters into contracts with individual accountants to perform services for the firm in Oregon and Idaho. The contracted accountants represent the firm when they perform services for the firm's clients. The firm has nexus with Washington, Oregon, and Idaho.
- (viii) Assume that an accounting firm maintains its only office in Washington and has clients located in Washington, Oregon, and Idaho. The accounting firm's employees frequently travel to Oregon to meet with clients, review client's records, and present their findings, but do not travel to Idaho. The accounting firm has nexus with Washington and Oregon, but does not have nexus with Idaho.
- (ix) Assume that a sales representative earns commissions from the sale of tangible personal property. The sales representative is located in Oregon and does not enter Washington for any business purpose. The sales representative contacts Washington customers only by telephone and earns commissions on sales of tangible personal property to Washington customers. The sales representative does not have nexus with Washington and the commissions earned on sales to Washington customers are not subject to Washington's business and occupation tax.
- (x) The examples in this subsection (2) apply equally to situations where the Washington activities and out-of-state activities are reversed. For example, in example (b)(ix) of this subsection, if the locations were reversed, the sales representative would have nexus with Washington, but not in Oregon.

#### (3) Separate accounting.

- (a) **In general.** "Separate accounting" refers to a method of accounting that segregates and identifies sources or activities which account for the generation of income within the state of Washington. Separate accounting is distinct from cost apportionment, which assigns a formulary portion of total worldwide income to Washington. A separate accounting method must be used by a business entitled to apportion its income under RCW 82.04.460(1) if this use results in an accurate description of gross income attributable to its Washington activities.
- (b) **Accuracy.** Separate accounting is accurate only when the activities that significantly contribute, directly or indirectly, to the production of income can be identified and segregated geographically. Separate accounting thus links taxable income to activities occurring in a discrete jurisdiction. The result is inaccurate when services directly supporting these activities occur in different jurisdictions. For example, if a taxpayer provides investment advice to clients in

- Washington, but performs all of its research and due diligence activities in another state, then separate accounting would not be accurate. However, if instead of research and due diligence, only the client billing activity is performed in another state, then separate accounting would be allowed.
- (c) **Approved methods of separate accounting.** The following methods of separate accounting are acceptable to the department, if accurate:
- (i) Billable hours of employees or representative third parties performing services in Washington. If a business charges clients an hourly rate for the performance of services, and the place of performance of the employee, contractor, or other individual whose time is billed is reasonably ascertainable, then the billable hours may be used as a basis for separate accounting. The gross amount received from hours billed for services performed in Washington should be reported.
- (ii) **Specific projects or contracts.** A business may assign the revenue from specific projects or contracts in or out of Washington by the primary place of performance. For example:
- (A) A consulting business with no other presence in Washington that agrees to provide on-site management consulting services for a Washington business and receives five hundred thousand dollars in payment for the project must report five hundred thousand dollars in gross income to Washington.
- (B) If the same business gets another Washington client for on-site management consulting, and receives another payment of five hundred thousand dollars, the business must report an additional five hundred thousand dollars in gross income to Washington.
- (C) If a business contracts to distribute advertisements for another business within the state of Washington, the gross amount received for this action should be reported as Washington income.
- (iii) Other reasonable and accurate methods—Notice to the department.
- (A) A taxpayer may report with, or the department may require, the use of one of the alternative methods of separate accounting.
- (B) A taxpayer reporting under this subsection must notify the department at the time of filing that it is using an alternative method and provide a brief description of the method employed. If a taxpayer reports using an alternate method, the same method must be used for all subsequent tax reporting periods unless it is demonstrated another method is necessary under the standard in (c)(iii)(E) of this subsection.
- (C) If on review of a taxpayer's return(s) the department determines another method is necessary to fairly represent the extent of a taxpayer's business activity in Washington, then the department may impose the method for all returns within the statute of limitations. Statutory interest applies to both balances due and refund or credit claims arising under this section. Further, applicable penalties will be imposed on balances due arising under this section. However, if the taxpayer reported using the separate accounting method in (c)(i) or (ii) of this subsection or cost apportionment under subsection (4)(a) through (h) of this section, the department may impose the alternate method for future periods only.

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- (D) A taxpayer may request that the department approve an alternative method of separate accounting by submitting a request for prior ruling pursuant to WAC 458-20-100. Such letter ruling may be subject to audit verification before issuance
- (E) The taxpayer or the department, in requesting or imposing an alternate method of separate accounting, must demonstrate by clear and convincing evidence that the separate accounting methods in (c) of this subsection do not fairly represent the extent of the taxpayer's business activity in Washington.

#### (4) Cost apportionment.

#### (a) Apportionment ratio.

- (i) Each cost must be computed according to the method of accounting (cash or accrual basis) used by the taxpayer for Washington state tax purposes for the taxable period. Persons should refer to WAC 458-20-197 (When tax liability arises) and WAC 458-20-199 (Accounting methods) for further guidance on the requirements of each accounting method. Taxpayers must file returns using costs calculated based on the taxpayer's most recent fiscal year for which information is available, unless there is a significant change in business operations during the current period. A significant change in business operations includes commencement, expansion, or termination of business activities in or out of Washington, formation of a new business entity, merger, consolidation, creation of a subsidiary, or similar change. If there is a significant change in business operations, then the taxpayer must estimate its cost apportionment formula based on the best records available and then make the appropriate adjustments when the final data is available.
- (ii) The apportionment ratio is the cost of doing business in Washington divided by the total cost of doing business as described in RCW 82.04.460(1). The apportionment ratio is calculated under this section as follows. The denominator of the apportionment ratio is the worldwide costs of the apportionable activity and the numerator is all costs specifically assigned to Washington plus all costs assigned to Washington by formula, as described below. Costs are calculated on a worldwide basis for the tax reporting period in question. The tax due to Washington is calculated by multiplying total income times the apportionment ratio times the tax rate. Available tax credits may be applied against the result. Statutory interest and penalties apply to underreported income. For the purposes of this rule, "total income" means gross income under the tax classification in question, less deductions, calculated as if the B&O tax classification applied on a worldwide basis.
- (b) Place of business requirement. A taxpayer must maintain places of business within and without Washington that contribute to the rendition of its services in order to apportion its income. This "place of business" requirement, however, does not mean that the taxpayer must maintain a physical location as a place of business in another taxing jurisdiction in order to apportion its income. If a taxpayer has activities in a jurisdiction sufficient to create nexus under Washington standards, then the taxpayer is deemed to have a "place of business" in that jurisdiction for apportionment purposes. See subsection (2) of this section.

- (c) Noncost expenditures. The following is a list of expenditures that are not costs of doing business within the meaning of RCW 82.04.460 and are therefore excluded from both the numerator and the denominator of the apportionment ratio. Expenditures that are not costs of doing business include expenditures that exchange one business asset for another; that reflect a revaluation of an asset not consumed in the course of business; or federal, state, or local taxes measured by gross or net business income. This list is not exclusive. Costs of an activity taxable under another B&O tax classification are also excluded from the apportionment ratio. Similarly, the costs of acquiring a business by merger or otherwise, including the financing costs, are not the costs of doing the apportioned business activity and must be excluded from the cost apportionment calculation.
- (i) The cost of acquiring assets that are not depreciated, amortized, or otherwise expensed on the taxpayer's books and records on the basis of generally accepted accounting principles (GAAP), or a loss incurred on the sale of such assets. For example, expenditures for land and investments are excluded from the cost apportionment formula.
- (ii) Taxes (other then taxes specifically related to items of property such as retail sales or use taxes and real and personal property taxes).
- (iii) Asset revaluations such as stock impairment or goodwill impairment.
- (iv) Costs of doing a business activity subject to the B&O tax under a classification other than RCW 82.04.290 or 82.04.2908. For example, if a taxpayer were subject to manufacturing, wholesaling and service and other activities B&O tax, the costs associated with a warehouse and a manufacturing plant (property and employee costs) are excluded from the cost apportionment formula. But if costs support both the service activity and either manufacturing or wholesaling (for example, costs associated with headquarters or joint operating centers), then those costs must be included in the cost apportionment formula without segregating the service portion of the costs.
- (d) **Specifically assigned costs.** Real or tangible personal property costs, employee costs, and certain payments to third parties are specifically assigned under (e) through (g) of this subsection.

#### (e) Property costs.

- (i) **Definitions.** Real or tangible personal property costs are defined to include:
- (A) Depreciation as reported on the taxpayer's books and records according to GAAP, provided that if a taxpayer does not maintain its books and records in accordance with GAAP, it may use tax reporting depreciation. A taxpayer may not change its method of calculating depreciation costs without approval of the department;
- (B) Maintenance and warranty costs for specific property;
  - (C) Insurance costs for specific property;
  - (D) Utility costs for specific property;
  - (E) Lease or rental payments for specific property;
  - (F) Interest costs for specific property; and
  - (G) Taxes for specific property.
- (ii) **Assignment of costs.** Real or tangible personal property costs are assigned to the location of the property.

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Property in transit between locations of the taxpayer to which it belongs is assigned to the destination state. Property in transit between a buyer and seller and included by a taxpayer in the denominator of the apportionment ratio in accordance with its regular accounting practices is assigned to the destination state. Mobile or movable property located both within and without Washington during the measuring period is assigned in proportion to the total time within Washington during the measuring period. An automobile assigned to a traveling employee is assigned to the state to which the employee's compensation is assigned below or to the state in which the automobile is licensed. Where a business contracts for the maintenance, warranty services, or insurance of multiple properties, the relative rental or depreciation expense may be used to assign these costs.

#### (f) Employee costs.

- (i) **Definitions.** For the purposes of this subsection:
- (A) "Compensation" means wages, salaries, commissions, and any other form of remuneration paid to or accrued to employees for personal services. Employer contributions under a qualified cash plan, deferred arrangement plan, and nonqualified deferred compensation plan are considered compensation. Stock based compensation is considered compensation under this rule to the extent included in gross income for federal income tax purposes.
- (B) "Employee" means any individual who, under the usual common-law rules applicable in determining the employer-employee relationship, has the status of an employee, but does not include corporate officers.
- (ii) Allocation method. Employee costs include all compensation paid to employees and all employment based taxes and other fees, for example, amounts paid related to unemployment compensation, labor and industries insurance premiums, and the employer's share of Social Security and medicare taxes. An employee's compensation is assigned to Washington if the taxpayer reports the employee's wages to Washington for unemployment compensation purposes. Employee wages reported for federal income tax purposes may be used to assign the remaining compensation costs.

#### (g) Representative third-party costs.

(i) **Definitions.** For the purposes of this section:

"Representative third party" includes an agent, independent contractor, or other representative of the taxpayer who provides services on behalf of the taxpayer directly to customers. The term includes leased employees who meet the standards under (g) of this subsection.

(ii) **Allocation method.** Payments to a representative third party are assigned to the third party's place of performance. For example, if a business subcontracts with a representative third party who provides services on behalf of the taxpayer from a California location, the cost of compensating the representative third party is assigned to California. This is true even if the third party provides services to Washington customers. Conversely, the cost of compensating a representative third party providing services to California customers from a Washington location is assigned to Washington.

#### (iii) Examples.

(A) X, a Washington business, hires Taxpayer to design and write custom software for a document management system. Taxpayer subcontracts with Z, whose employees determine the needs of X, negotiate a statement of work, write the custom software, and install the software. Z's employees perform all of these services on-site at the X business location. Taxpayer's payments to Z are representative third-party costs and specifically assigned to Washington.

- (B) Taxpayer, a service provider, subcontracts with X, who agrees to maintain a customer service center where staff will answer telephone inquiries about Taxpayer's services. X in turn subcontracts with Z, whose employees actually respond to questions from a phone center located in California. The payments by taxpayer to X are representative third-party costs with respect to Taxpayer because X is responsible for providing the staff of the service center. The payments to X are specifically assigned to California.
- (C) Taxpayer sells various manufacturers' products at wholesale on a commission basis. Taxpayer subcontracts with X, who agrees to act as Taxpayer's sales representative on the West Coast. Taxpayer has various other sales representatives working on as independent contractors, who are assigned territories, but may make sales from an office or through in-person visits, or a combination of both. Taxpayer does not maintain records sufficient to show the representatives' places of performance. Taxpayer may use sales records and the standards under (h) of this subsection to assign commissions by each subcontractor.

#### (h) Costs assigned by formula.

- (i) Costs not specifically assigned under (e) through (g) of this subsection and not excluded from consideration by (c) of this subsection are assigned to Washington by formula. These costs are multiplied by the ratio of sales in Washington over sales everywhere. For example, if a business has one thousand dollars in other unassigned costs and sales of ten thousand dollars in each of the four states in which it has nexus under Washington standards (including Washington), twenty-five percent (\$10,000/\$40,000), or two hundred fifty dollars of the other costs are assigned to Washington.
- (ii) Sales are assigned to where the customer receives the benefit of the service. If the location where the services are received is not readily determinable, the services are attributed to the location of the office of the customer from which the services were ordered in the regular course of the customer's trade or business. If the ordering office cannot be determined, the services are attributed to the office of the customer to which the services are billed.
- (iii) If under the method described above a sale is attributed to a location where the taxpayer does not have nexus under Washington standards, the sale must be excluded from both the numerator and denominator of the sales ratio. For the purposes of this calculation only, the department will presume a taxpayer has nexus anywhere the taxpayer has employees or real property, or where the taxpayer reports business and occupation, franchise, value added, income or other business activity taxes in the state. The burden is on the taxpayer to demonstrate nexus exists in other states.

#### (i) Alternative methods.

- (i) A taxpayer may report with, or the department may require, the use of one of the alternative methods of cost apportionment described below:
- (A) The exclusion of one or more categories of costs from consideration;

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- (B) The specific allocation of one or more categories of costs which will fairly represent the taxpayer's business activity in Washington; or
- (C) The employment of another method of cost apportionment that will effectuate an equitable apportionment of the taxpayer's gross income.
- (ii) A taxpayer reporting under (i) of this subsection must notify the department at the time of filing that it is using an alternative method and provide a brief description of the method employed. If a taxpayer reports using an alternate method, the same method must be used for all subsequent tax reporting periods unless it is demonstrated another method is necessary under the standard in (i)(v) of this subsection.
- (iii) If on review of a taxpayer's return(s) the department determines another method is necessary to fairly represent the extent of a taxpayer's business activity in Washington, the department may impose the method for all returns within the statute of limitations. Statutory interest applies to both balances due and refund or credit claims arising under this section. Further, applicable penalties will be imposed on balances due arising under this section. However, if the taxpayer reported using the cost apportionment method in (a) through (h) of this subsection and separate accounting is unavailable, the department may impose the alternate method for future periods only.
- (iv) A taxpayer may request that the department approve an alternative method of cost apportionment by submitting a request for prior ruling pursuant to WAC 458-20-100. Such letter ruling may be subject to audit verification before issuance.
- (v) The taxpayer or the department, in requesting or imposing an alternate method, must demonstrate by clear and convincing evidence that the cost apportionment method in (a) through (h) of this subsection does not fairly represent the extent of the taxpayer's business activity in Washington.
- (5) **Effective date.** This amended rule shall be effective for tax reporting periods beginning on January 1, 2006, and thereafter.

#### WSR 10-22-006 EMERGENCY RULES SUPERINTENDENT OF PUBLIC INSTRUCTION

[Filed October 20, 2010, 3:10 p.m., effective October 20, 2010, 3:10 p.m.]

Effective Date of Rule: Immediately.

Purpose: The modification of WAC 392-502-020 allows office of superintendent of public instruction (OSPI) to offer, if deemed necessary, a supplemental approval cycle for multidistrict on-line providers. This allows for an additional opportunity for multidistrict providers to be approved prior to the state basic education funding restrictions that begin with the 2011-12 school year, as per RCW 28A.250.060, helping to insure that students receive a quality education consistent with state standards.

Citation of Existing Rules Affected by this Order: Amending WAC 392-502-020.

Statutory Authority for Adoption: RCW 28A.250.020.

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: Between one and two percent of the state's student population participated in on-line learning last year, and OSPI's approval process, defined in chapter 392-502 WAC, plays an important quality assurance role. Beginning with the 2011-12 school year, OSPI approval of multidistrict on-line providers will be required for districts to claim state basic education funding for students enrolled in on-line courses or programs, with some exceptions. The current rules allow for two approval cycles to occur prior to the 2011-12 school year. The supplemental cycle proposed in this rule will allow for an additional opportunity for providers who either did not apply for the first two cycles, or were not approved during those opportunities. The supplemental cycle insures that students receive a quality education, consistent with state standards, and prevents disruption to the educational options available to students across the state.

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 20, 2010.

Randy Dorn State Superintendent

AMENDATORY SECTION (Amending WSR 10-01-099, filed 12/17/09, effective 1/17/10)

WAC 392-502-020 Multidistrict on-line provider approval process and timeline. (1) Multidistrict on-line providers as defined in WAC 392-502-010 must complete the approval process as specified in this subsection in order to be eligible for listing as an approved multidistrict provider on the OSPI web site; and for school districts to claim state basic education funding for students enrolled in those approved multidistrict on-line courses or programs beginning in the 2011-12 school year and to the extent otherwise allowed by state law

When questions arise whether an entity is subject to approval as a multidistrict on-line course or program provider, the final determination will be made by the superintendent of public instruction taking into consideration the intent of the SSB 5410 legislation.

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(2) The superintendent of public instruction shall make a first round of approval decisions by April 1, 2010, for those multidistrict on-line providers applying for approval. Subsequent approval decisions shall be made annually by November 1, 2010, and each subsequent year. If the superintendent of public instruction deems it necessary, a supplemental approval cycle may take place with approval decisions made by April 1, 2011.

	Application for approval available	Application due date	Approval decisions made by
Initial Approval	December 31, 2009	January 31, 2010	April 1, 2010
Fall 2010 Approval Cycle	July 1, 2010	September 1, 2010	November 1, 2010
Spring 2011 Supplemental Approval Cycle, if deemed neces- sary	<u>December 31,</u> 2010	<u>January 31,</u> <u>2011</u>	April 1, 2011
Subsequent Approvals	April 1	September 1	November 1

For each of the dates on the table above, the effective dates move to the subsequent business day if they fall on a holiday or weekend; all are 5:00 p.m. deadlines.

- (3) Any multidistrict on-line provider that was approved by the digital learning commons or accredited by the Northwest association of accredited schools before July 26, 2009, and meets the Washington state teacher certification requirements is exempt from the initial approval process until August 31, 2012, but must comply with the process for renewal of approvals and must comply with approval requirements including the approval assurances and criteria.
- (4) If at the end of a given school year, the annual average headcount for that school year of students who reside outside the geographic boundaries of a school district or regional on-line learning program and are enrolled in a school district on-line program or regional on-line learning program increases to ten percent or more of the total program enrollment headcount, the program shall:
- (a) Be required to seek approval in the upcoming November cycle in order to be eligible to claim state basic education funding the subsequent school year.
- (b) Continue operating the year of the required review, but not the following school year unless approved as a multi-district on-line provider.
- (5) Multidistrict on-line providers seeking approval will submit an application outlined on the superintendent of public instruction web site which will be reviewed for compliance with the requested assurances and designated approval criteria and must meet or exceed the acceptable defined score.
- (6) The superintendent of public instruction will notify provider applicants of the results of the review, including feedback about the assurances and criteria that were not in compliance, by April 1, 2010, for the initial round of approvals and by November 1, 2010, and each subsequent year after that.
- (7) Any modifications to the conditions for approval, required assurances, approval criteria, and application forms

will appear on the superintendent of public instruction web site by July 1, 2010, and April 1st each subsequent year.

## WSR 10-22-021 EMERGENCY RULES DEPARTMENT OF SOCIAL AND HEALTH SERVICES

(Medicaid Purchasing Administration)

[Filed October 22, 2010, 1:14 p.m., effective October 22, 2010, 1:14 p.m.]

Effective Date of Rule: Immediately.

Purpose: The recent passage of the federal Children's Health Insurance Program Reauthorization Act (CHIPRA) requires the department to amend its rules regarding newborn eligibility for medical assistance. Per clarification from the federal Centers for Medicare and Medicaid Services (CMS), CHIPRA also requires the elimination of the three-month sanction for nonpayment of the children's health insurance program (CHIP) premium, and allow for medical coverage to be reinstated for all months within the certification period when payment of the delinquent premium is made prior to the end of the certification period. This change to Washington's CHIP program will meet "continuous eligibility" as an enrollment and retention strategy as defined in CHIPRA, which will qualify Washington for the performance bonus described in CHIPRA, section 104.

Citation of Existing Rules Affected by this Order: Amending WAC 388-416-0015, 388-450-0215, 388-505-0210, 388-505-0211, and 388-542-0020.

Statutory Authority for Adoption: RCW 74.04.050, 74.04.057, 74.08.090, Apple Health for Kids Act (ESHB 2128), and 42 U.S.C. 1305.

Other Authority: Public Law 111-3-FEB.4 (Children's Health Insurance Program Reauthorization Act of 2009).

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; and 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 change will allow the department to extend medical assistance to newborns who are not eligible under the current rule and will allow vulnerable children to remain connected to healthcare coverage. This change will also allow Washington to qualify for performance bonus funding as described in CHIPRA, section 104.

Number of Sections Adopted in Order to Comply with Federal Statute: New 0, Amended 5, 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 0, Repealed 0.

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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 5, Repealed 0.

Date Adopted: October 14, 2010.

Katherine I. Vasquez Rules Coordinator

AMENDATORY SECTION (Amending WSR 09-07-086, filed 3/17/09, effective 4/17/09)

- WAC 388-416-0015 Certification periods for categorically needy (CN) scope of care medical assistance programs. (1) A certification period is the period of time a person is determined eligible for a categorically needy (CN) scope of care medical program. Unless otherwise stated in this section, the certification period begins on the first day of the month of application and continues to the last day of the last month of the certification period.
- (2) For a child eligible for the newborn medical program, the certification period begins on the child's date of birth and continues through the end of the month of the child's first birthday.
- (3) For a woman eligible for a medical program based on pregnancy, the certification period ends the last day of the month that includes the sixtieth day from the day the pregnancy ends.
- (4) For families the certification period is twelve months with a six-month report required as a condition of eligibility as described in WAC 388-418-0011.
- (5) For children, the certification period is twelve months. Eligibility is continuous without regard to changes in circumstances other than aging out of the program, moving out-of-state, failing to pay a required premium(s), incarceration or death.
- (6) When the child turns nineteen the certification period ends even if the twelve-month period is not over. The certification period may be extended past the end of the month the child turns nineteen when:
- (a) The child is receiving inpatient services (see WAC 388-505-0230) on the last day of the month the child turns nineteen:
- (b) The inpatient stay continues into the following month or months; and
- (c) The child remains eligible except for exceeding age nineteen.
- (7) For an SSI-related person the certification period is twelve months.
- (8) When the medical assistance unit is also receiving benefits under a cash or food assistance program, the medical certification period is updated to begin anew at each:
  - (a) Approved application for cash or food assistance; or
  - (b) Completed eligibility review.
- (9) A retroactive certification period can begin up to three months immediately before the month of application when:

- (a) The client would have been eligible for medical assistance if the client had applied; and
- (b) The client received covered medical services as described in WAC 388-501-0060 and 388-501-0065.
- (10) If the client is eligible only during the three-month retroactive period, that period is the only period of certification, except when:
- (a) A pregnant woman is eligible in one of the three months preceding the month of application, but no earlier than the month of conception. Eligibility continues as described in subsection (3):
- (b) A child is eligible for a CN medical program as described in WAC 388-505-0210 (1) through  $((\frac{(4)}{0}))$  (5) and  $((\frac{(6)}{0}))$  (7) in one of the three months preceding the month of application. Eligibility continues for twelve months from the earliest month that the child is determined eligible.
- (11) Any months of a retroactive certification period are added to the designated certification periods described in this section.
- (12) Coverage under premium-based programs included in apple health for kids as described in WAC 388-505-0210 and chapter 388-542 WAC begins no sooner than the month after creditable coverage ends.

AMENDATORY SECTION (Amending WSR 08-02-054, filed 12/28/07, effective 2/1/08)

- WAC 388-450-0215 How does the department estimate my assistance unit's income to determine my eligibility and benefits? (1) We decide if your assistance unit (AU) is eligible for benefits and calculate your monthly benefits based on an estimate of your AU's gross monthly income and expenses. This is known as prospective budgeting.
- (2) We use your current, past, and future circumstances for a representative estimate of your monthly income.
- (3) We may need proof of your circumstances to ensure our estimate is reasonable. This may include documents, statements from other people, or other proof as explained in WAC 388-490-0005.
  - (4) We use one of two methods to estimate income:
- (a) **Anticipating monthly income (AM):** With this method, we base the estimate on the actual income we expect your AU to receive in the month (see subsection (5)); and
- (b) Averaging income (CA): With this method, we add the total income we expect your AU to receive for a period of time and divide by the number of months in the period (see subsection (6)).
- (5) Anticipating monthly income: We must use the anticipating monthly method:
  - (a) For the month you apply for benefits unless:
- (i) We are determining eligibility for ((ehildren's medical)) apple health for kids programs as listed in WAC 388-505-0210 (((3) through (6))), or pregnancy medical as listed in WAC 388-462-0015. For ((ehildren's)) apple health for kids and pregnancy medical we can use either method; or
- (ii) You are paid less often than monthly (for example: you are paid quarterly or annually). If you are paid less often than monthly, we average your income for the month you apply. Section (6) explains how we average your income.

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- (b) When we estimate income for anyone in your AU, if you or anyone in your AU receive SSI-related medical benefits under chapter 388-475 WAC.
- (c) When we must allocate income to someone who is receiving SSI-related medical benefits under chapter 388-475 WAC.
- (d) When you are a destitute migrant or destitute seasonal farmworker under WAC 388-406-0021. In this situation, we must use anticipating monthly (AM) for all your AU's income.
- (e) To budget SSI or Social Security benefits even if we average other sources of income your AU receives.
- (6) Averaging income: When we average your income, we consider changes we expect for your AU's income. We determine a monthly amount of your income based on how often you are paid:
- (a) If you are paid weekly, we multiply your expected income by 4.3;
- (b) If you are paid every other week, we multiply your expected income by 2.15;
- (c) In most cases if you receive your income other than weekly or every other week, we estimate your income over your certification period by:
- (i) Adding the total income for representative period of time:
- (ii) Dividing by the number of months in the time frame; and
  - (iii) Using the result as a monthly average.
- (d) If you receive your yearly income over less than a year because you are self employed or work under a contract, we average this income over the year unless you are:
  - (i) Paid on an hourly or piecework basis; or
- (ii) A migrant or seasonal farmworker under WAC 388-406-0021.
- (7) If we used the anticipating monthly income method for the month you applied for benefits, we may average your income for the rest of your certification period if we do not have to use this method for any other reason in section (5).
- (8) If you report a change in your AU's income, and we expect the change to last through the end of the next month after you reported it, we update the estimate of your AU's income based on this change.
- (9) If your actual income is different than the income we estimated, we don't make you repay an overpayment under chapter 388-410 WAC or increase your benefits unless you meet one of the following conditions:
  - (a) You provided incomplete or false information; or
  - (b) We made an error in calculating your benefits.

AMENDATORY SECTION (Amending WSR 09-07-086, filed 3/17/09, effective 4/17/09)

WAC 388-505-0210 ((Children's healthcare)) Apple health for kids and other children's medical assistance programs. Funding for ((children's healthcare)) coverage under the apple health for kids programs may come through Title XIX (medicaid), Title XXI ((SCHIP)) CHIP, or through state-funded programs. There are no resource limits for ((children's healthcare)) the apple health for kids programs. ((Children's healthcare programs that fall under the apple

- health for kids umbrella are described in subsections (1) through (4) below)) Apple health for kids coverage is free to children in households with incomes of no more than two-hundred percent of the federal poverty level (FPL), and available on a premium basis to children in households with incomes of no more than three-hundred percent FPL.
- (1) Newborns are eligible for federally matched categorically needy (CN) coverage through their first birthday when:
- (a) ((The child's mother was eligible for and receiving medical assistance at the time of the child's birth; and)) The newborn is a resident of the state of Washington.
- (b) ((The child remains with the mother and resides in the state)) The newborn's mother is eligible for medical assistance:
- (i) On the date of the newborn's birth, including a retroactive eligibility determination; or
- (ii) Based on meeting a medically needy (MN) spenddown liability with expenses incurred on, or prior to, the date of the newborn's birth.
- (2) Children under the age of nineteen who are U.S. citizens, U.S. nationals, or ((qualified)) <u>lawfully present</u> aliens as described in WAC 388-424-0001, 388-424-0010(4), and 388-424-0006 (1), (4), and (5) are eligible for <u>free</u> federally matched CN coverage when they meet the following criteria:
- (a) State residence as described in chapter 388-468 WAC:
- (b) A Social Security number or application as described in chapter 388-476 WAC;
- (c) Proof of citizenship or immigrant status and identity as required by WAC 388-490-0005(11);
- (d) Family income is at or below two hundred percent of federal poverty level (FPL), as described in WAC 388-478-0075 at each application or review; or
- (e) They received supplemental security income (SSI) cash payments in August 1996 and would continue to be eligible for those payments except for the August 1996 passage of amendments to federal disability definitions; or
- (f) They are <u>currently</u> eligible for ((<del>SSI related CN or MN coverage</del>)) <u>SSI</u>.
- (3) Noncitizen children under the age of nineteen, who ((do not meet qualified alien status)) are not lawfully present as described in WAC ((388-424-0006)) 388-424-0001, 388-424-0010(4), and 388-424-0006 (1), (4), and (5), are eligible for free state-funded ((CN)) coverage when they meet the following criteria:
- (a) State residence as described in chapter 388-468 WAC; and
- (b) Family income is at or below two hundred percent FPL at each application or review.
- (4) Children under the age of nineteen who are U.S. citizens, U.S. nationals, or lawfully present aliens as described in WAC 388-424-0001, 388-424-0010(4), and 388-424-0006 (1), (4), and (5) are eligible for premium-based federally-matched CN coverage as described in chapter 388-542 WAC when they meet the following criteria:
- (a) State residence as described in chapter 388-468 WAC:
- (b) A social security number or application as described in chapter 388-476 WAC;

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- (c) Proof of citizenship or immigrant status and identity as required by WAC 388-490-0005(11);
- (d) Family income is over two hundred percent FPL, as described in WAC 388-478-0075, but not over three\_hundred percent FPL at each application or review;
- (((e))) (e) They do not have other creditable health insurance as described in WAC 388-542-0050; and
- $((\frac{d}{d}))$  (f) They pay the required monthly premiums as described in WAC 388-505-0211
- (5) Noncitizen children under the age of nineteen, who are not lawfully present as described in WAC 388-424-0001, 388-424-0010(4), and 388-424-0006 (1), (4), and (5), are eligible for premium-based state-funded CN coverage when they meet the following criteria:
- (a) State residence as described in chapter 388-468 WAC;
- (b) Family income is over two-hundred percent FPL, as described in WAC 388-478-0075, but not over three-hundred percent FPL at each application or review;
- (c) They do not have other creditable health insurance as described in WAC 388-542-0050; and
- (d) They pay the required monthly premium as described in WAC 388-505-0211.
- (6) Children under age nineteen are eligible for the medically needy (MN) medicaid program when they meet the following criteria:
- (a) Citizenship or immigrant status, state residence, and Social Security number requirements as described in subsection (2)(a), (b), and (c);
- (b) Are ineligible for other ((federal medicaid)) federally-matched CN programs; ((and))
- (c) Have income that exceeds three hundred percent FPL; or
- (d) Have income less than three hundred percent FPL, but do not qualify for premium-based coverage as described in subsection (4) of this section because of creditable coverage; and
- (e) Meet their spenddown ((obligation)) <u>liability</u> as described in WAC 388-519-0100 and 388-519-0110.
- (((6))) (7) Children under the age of ((twenty-one)) nineteen who reside or are expected to reside in a medical institution, intermediate care facility for the mentally retarded (ICF/MR), hospice care center, nursing home, institution for mental diseases (IMD) or inpatient psychiatric facility may be eligible for apple health for kids healthcare coverage based upon institutional rules described in WAC 388-505-0260. Individuals between the age of nineteen and twenty-one may still be eligible for healthcare coverage but not under the apple health for kids programs. See WAC 388-505-0230 "Family related institutional medical" and WAC 388-513-1320 "Determining institutional status for long-term care((-))" for more information.
- (((<del>7)</del>)) (<u>8</u>) Children who are in foster care under the legal responsibility of the state, or a federally recognized tribe located within the state, and who meet eligibility requirements for residency, social security number, and citizenship as described in subsection (2)(a), (b) and (c) are eligible for federally-matched CN medicaid coverage through the month of their
  - (a) Eighteenth birthday;

- (b) Twenty-first birthday if <u>the</u> children's administration determines they remain eligible for continued foster care services; or
- (c) Twenty-first birthday if they were in foster care on their eighteenth birthday and that birthday was on or after July 22, 2007.
- (((8))) (9) Children are eligible for state-funded CN coverage through the month of their eighteenth birthday if they:
- (a) Are in foster care under the legal responsibility of the state or a federally-recognized tribe located within the state; and
- (b) Do not meet social security number and citizenship requirements in subsection (2)(b) and (c) of this section.
- (10) Children who receive subsidized adoption services are eligible for federally\_matched CN ((medicaid)) coverage.
- ((<del>(0)</del>)) (11) Children under the age of nineteen not eligible for apple health for kids programs listed above may ((also)) be eligible for one of the following medical assistance programs not included in apple health for kids:
  - (a) Family medical as described in WAC 388-505-0220;
- (b) Medical extensions as described in WAC 388-523-0100; ((or))
  - (c) SSI-related MN if they:
- (i) Meet the blind and/or disability criteria of the federal SSI program, or the condition of subsection (2)(e); and
- (ii) Have countable income above the level described in WAC 388-478-0070(1).
- (((10) Children who are ineligible for other programs included in apple health for kids may be eligible for the alien emergency medical program (AEM) if they meet the following criteria:
- (a) They have a documented emergent medical condition as defined in WAC 388-500-0005;
- (b) They meet the other AEM program requirements as described in WAC 388-438-0110; and
- (c) They have income that exceeds three hundred percent FPL; or
- (d) They are disqualified from receiving premium-based eoverage as described in subsection (4) of this section because of creditable coverage or nonpayment of premiums.
- (11))) (d) Home and community based waiver programs as described in chapter 388-515 WAC; or
- (e) Alien medical as described in WAC 388-438-0110, if they:
- (i) Have a documented emergency medical condition as defined in WAC 388-500-0005;
- (ii) Have income more than three hundred percent FPL; or
- (iii) Have income less than three hundred percent FPL, but do not qualify for premium-based coverage as described in subsection (5) of this section because of creditable coverage.
- (12) Except for a ((elient)) child described in subsection (((6))) (7), an inmate of a public institution, as defined in WAC 388-500-0005, is not eligible for any ((ehildren's healthcare)) apple health for kids program.

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AMENDATORY SECTION (Amending WSR 09-07-086, filed 3/17/09, effective 4/17/09)

- WAC 388-505-0211 Premium requirements for premium-based healthcare coverage under programs included in apple health for kids. (1) For the purposes of this chapter, "premium" means an amount paid for healthcare coverage under programs included in apple health for kids.
- (2) Payment of a premium is required as a condition of eligibility for premium-based coverage under programs included in apple health for kids, as described in WAC 388-505-0210(4), unless the child is:
  - (a) Pregnant; or
  - (b) An American Indian or Alaska native.
- (3) The premium requirement begins the first of the month following the determination of eligibility. There is no premium requirement for medical coverage received in a month or months before the determination of eligibility.
- (4) The premium amount for the assistance unit is based on the net countable income as described in WAC 388-450-0210 and the number of children in the assistance unit. If the household includes more than one assistance unit, the premium amount billed for the assistance units may be different amounts.
  - (5) The premium amount for each eligible child shall be:
- (a) Twenty dollars per month per child for households with income above two hundred percent FPL, but not above two hundred and fifty percent FPL;
- (b) Thirty dollars per month per child for households with income above two hundred and fifty percent FPL, but not above three hundred percent FPL; and
- (c) Limited to a monthly maximum of two premiums for households with two or more children.
- (6) All children in an assistance unit are ineligible for healthcare coverage when the head of household fails to pay required premium payments for three consecutive months.
- (7) When the department terminates the medical coverage of a child due to nonpayment of premiums, the ((ehild has a three-month period of ineligibility beginning the first of the following month. The three-month period of ineligibility is reseinded)) child's eligibility is restored only when the:
- (a) Past due premiums are paid in full prior to the ((begin date of the period of ineligibility)) end of the certification period; or
- (b) The child becomes eligible for coverage under a non-premium-based <u>CN</u> healthcare program. ((The department will not reseind the three-month period of ineligibility for reasons other than the criteria described in this subsection.))
- (8) The department writes off past-due premiums after twelve months.
- (9) ((When the designated three-month period of ineligibility is over, all past due premiums that are an obligation of the head of household must be paid or written off before a child can become eligible for premium-based coverage under a program included in apple health for kids)) If all past due premiums are paid after the certification period is over:
  - (a) Eligibility for prior months is not restored; and
- (b) Children are not eligible for premium-based coverage under apple health for kids until:

- (i) The month the premiums are paid or the department writes off the debt; or
  - (ii) The family reapplies and is found eligible.
- (10) A family cannot designate partial payment of the billed premium amount as payment for a specific child in the assistance unit. The full premium amount is the obligation of the head of household of the assistance unit. A family can decide to request healthcare coverage only for certain children in the assistance unit, if they want to reduce premium obligation.
- (11) A change that affects the premium amount is effective the month after the change is reported and processed.
- (12) A sponsor or other third party may pay the premium on behalf of the child or children in the assistance unit. The premium payment requirement remains the obligation of head of household of the assistance unit. The failure of a sponsor or other third party to pay the premium does not eliminate the((:
- (a) Establishment of the period of ineligibility described in subsection (7) of this section; or
- (b) Obligation of the head of household to pay past-due premiums)) obligation of the head of household to pay past due premiums.

AMENDATORY SECTION (Amending WSR 09-07-086, filed 3/17/09, effective 4/17/09)

- WAC 388-542-0020 Other rules that apply to premium-based healthcare coverage under programs included in apple health for kids. In addition to the rules of this chapter, children receiving premium-based coverage under ((programs included in)) apple health for kids are subject to the following rules:
- (1) Chapter 388-538 WAC, Managed care (except WAC 388-538-061, 388-538-063, and 388-538-065) if the child is covered under federally matched CN coverage;
- (2) WAC 388-505-0210 (4) and (5), ((Children's healthcare)) apple health for kids program eligibility;
- (3) WAC 388-505-0211, Premium requirements for premium-based coverage under programs included in apple health for kids;
- (4) WAC 388-416-0015(12), Certification periods for categorically needy (CN) scope of care medical assistance programs; and
- (5) WAC 388-418-0025, Effect of changes on medical program eligibility.

#### WSR 10-22-023 EMERGENCY RULES DEPARTMENT OF FISH AND WILDLIFE

[Order 10-283—Filed October 22, 2010, 4:04 p.m., effective October 23, 2010, 12:01 a.m.]

Effective Date of Rule: October 23, 2010, 12:01 a.m. Purpose: Amend commercial fishing rules.

Citation of Existing Rules Affected by this Order: Amending WAC 220-47-311, 220-47-401, and 220-47-411.

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Statutory Authority for Adoption: RCW 77.12.047 and 77.04.020.

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: United States fisheries are being closed to comply with limits specified in the Pacific salmon treaty. There is insufficient time to adopt 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 3, 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: October 22, 2010.

Joe Stohr for Philip Anderson Director

#### **NEW SECTION**

WAC 220-47-31100G Purse seines—Open periods. Notwithstanding the provisions of WAC 220-47-311, effective 12:01 a.m. October 23, 2010, until further notice, it is unlawful to fish for or possess salmon taken for commercial purposes with purse seine gear in waters of Puget Sound Salmon Management and Catch Reporting Areas 7 and 7A.

#### **NEW SECTION**

WAC 220-47-40100F Reef nets—Open periods. Notwithstanding the provisions of WAC 220-47-401, effective 12:01 a.m. October 23, 2010, until further notice, it is unlawful to fish for or possess salmon taken for commercial purposes with reef net gear in waters of Puget Sound Salmon Management and Catch Reporting Areas 7 and 7A.

#### **NEW SECTION**

WAC 220-47-41100P Gill nets—Open periods. Notwithstanding the provisions of WAC 220-47-411, effective 12:01 a.m. October 23, 2010, until further notice, it is unlawful to fish for or possess salmon taken for commercial purposes with gill net gear in waters of Puget Sound Salmon Management and Catch Reporting Areas 7 and 7A.

## WSR 10-22-024 EMERGENCY RULES DEPARTMENT OF FISH AND WILDLIFE

[Order 10-284—Filed October 22, 2010, 4:12 p.m., effective November 1, 2010]

Effective Date of Rule: November 1, 2010.

Purpose: Amend commercial fishing rules.

Citation of Existing Rules Affected by this Order: Repealing WAC 220-40-02700M and 220-40-02700N; and amending WAC 220-40-027.

Statutory Authority for Adoption: RCW 77.12.047 and 77.04.020.

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: Emergency rule is needed to clarify species allowed for retention during the sturgeon management period. Language was previously revised to adjust a gear restriction, and the revision inadvertently resulted in requirements for use of recovery boxes and wild coho release. Those requirements were contrary to preseason negotiations. There is insufficient time to adopt 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: October 22, 2010.

Joe Stohr for Philip Anderson Director

#### **NEW SECTION**

WAC 220-40-02700N Salmon—Willapa Bay fall fishery. Notwithstanding the provisions of WAC 220-40-027 and 220-40-020, effective immediately through November 30, 2010, it is unlawful to fish for salmon in Willapa Bay for commercial purposes or to possess salmon or white sturgeon taken from those waters for commercial purposes, except as provided in this section:

#### 1. Fishing periods and areas:

The Tokeland Boat basin is closed to commercial fishing. The Tokeland Boat basin is that portion of Salmon Man-

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agement and Catch Reporting Area (SMCRA) 2G bounded on the south by the shoreline of the boat basin, on the west by the seawall, and on the north and east by a line from the Tokeland Channel Marker "3" (flashing green, 4-seconds), to Tokeland Channel Marker "4," to the tip of the seawall.

Gill net gear may be used to fish for white sturgeon, Chinook, coho, and chum salmon only as shown below. All steelhead, green sturgeon, non-legal white sturgeon and all species other than legal sized white sturgeon, Chinook, coho, and chum salmon must be handled with care to minimize injury to the fish and must be released immediately to the river/bay.

Open periods: 12:00 p.m.	Open areas 2G, 2H, 2J,
November 6 through 12:00	and 2M.
p.m. November 30, 2010.	

#### 2. Landing limitations

Immediately through November 30, 2010, non-legal sturgeon and all steelhead must be handled with care to minimize injury to the fish and must be released immediately to the river/bay when fishing in Willapa Bay Areas 2G, 2H, 2J, 2K, and 2M.

#### 3. Gear

Gill net gear restrictions - All areas:

- a. Drift gill net gear only. It is unlawful to use set net gear. It is permissible to have on-board a commercial vessel more than one net, provided the nets are of a mesh size that is legal for the fishery, and the length of any one net does not exceed one thousand five hundred feet in length.
- b. Only one net may be fished at a time. Nets with a mesh size different from that being actively fished must be properly stored. A properly stored net is defined as a net on a drum that is fully covered by a tarp (canvas or plastic) and bound with a minimum of ten revolutions of rope that is 3/8 (0.375) inches or greater.
- c. It is unlawful to use a gill net to fish for salmon if the lead line weighs more than two pounds per fathom of net as measured on the cork line, provided that it is permissible to have a gill net with a lead line weighing more than two pounds per fathom aboard a vessel when the vessel is fishing in or is transiting through Willapa Bay.
- d. Effective 12:00 p.m. (noon) on November 6 through 12:00 p.m. (noon) on November 30, 2010, mesh size must not exceed nine inch minimum mesh.

#### 4. Other

- a. Quick reporting is required for wholesale dealers and fishers retailing their catch under a "direct retail endorsement." According to WAC 220-69-240(12), reports must be made by 10:00 a.m. the day following landing.
- b. NOAA Fisheries has listed the southern population of green sturgeon as threatened under the Endangered Species Act, effective July 6, 2006. Green sturgeon taken in Washington fisheries may be part of the southern population. Therefore, the retention of green sturgeon is prohibited to protect this federally listed stock.
- c. Fishers must take department staff on-board, if requested by WDFW, when participating in these openings to observe fishing operations and/or collect biological data on the catch.

#### **REPEALER**

The following section of the Washington Administrative Code is repealed effective November 1, 2010:

WAC 220-40-02700M Salmon—Willapa Bay fall fishery. (10-261)

The following section of the Washington Administrative Code is repealed effective December 1, 2010:

WAC 220-40-02700N Salmon—Willapa Bay fall fishery.

#### WSR 10-22-041 EMERGENCY RULES DEPARTMENT OF FISH AND WILDLIFE

[Order 09-285—Filed October 27, 2010, 2:58 p.m., effective November 15, 2010, 8:00 a.m.]

Effective Date of Rule: November 15, 2010, 8:00 a.m. Purpose: Amend personal use fishing rules.

Citation of Existing Rules Affected by this Order: Repealing WAC 220-56-33000I; and amending WAC 220-56-330.

Statutory Authority for Adoption: RCW 77.12.047 and 77.04.020.

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: These rules reopen the recreational crab fishery in the specified marine areas and adjust the open days per week to allow for inclement winter weather. Available harvest shares allow the areas to be opened in this rule. There is insufficient time to adopt 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: October 27, 2010.

Philip Anderson Director

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#### **NEW SECTION**

WAC 220-56-33000I Crab—Areas and seasons. Notwithstanding the provisions of WAC 220-56-330, effective 8:00 a.m. November 15, 2010, through 5:00 p.m. January 2, 2011, a person may fish for crab for personal use seven days a week in Marine Areas 6, 9, 10, and 12.

#### **REPEALER**

The following section of the Washington Administrative Code is repealed effective 5:01 p.m. January 2, 2011:

WAC 220-56-33000I Crab—Areas and seasons.

# WSR 10-22-042 EMERGENCY RULES OFFICE OF INSURANCE COMMISSIONER

[Insurance Commissioner Matter No. R 2010-06—Filed October 27, 2010, 3:54 p.m., effective October 29, 2010]

Effective Date of Rule: October 29, 2010.

Purpose: Explain to insurers the requirements for complying with RCW 48.05.190.

Citation of Existing Rules Affected by this Order: Amending WAC 284-30-670.

Statutory Authority for Adoption: RCW 48.02.060.

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: WAC 284-30-670 was filed for permanent adoption on June 2, 2010. After the rule was filed multiple impacted parties wrote to the commissioner indicating difficulty in implementing the new rule. An emergency rule was filed on July 3, 2010, to alleviate perceived implantation issues prior to the effective date of the new rule. The initial emergency rule may not remain in effect beyond October 29, 2010. A CR-101 was filed shortly after the emergency rule was filed beginning the process to permanently amend the rule. The permanent rule will not be adopted by October 29, 2010, which creates the need for another emergency rule. The agency plans to adopt the permanent rule before the expiration of this emergency.

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 1, Repealed 0.

Date Adopted: October 27, 2010.

Mike Kreidler Insurance Commissioner

AMENDATORY SECTION (Amending Matter No. R 2008-11, filed 6/2/10, effective 7/3/10)

- WAC 284-30-670 Insurers must transact business in their legal name. (1) Purpose and Scope. The purpose of this regulation is to adopt a long standing bulletin and a technical assistance advisory regarding the use of trade names, group names, logos or trademarks. The purpose of this regulation is also to set forth requirements to help ensure that a consumer knows the legal name of the insurer they are doing business with.
- (2) Pursuant to RCW 48.30.010, the commissioner ((is adopting this regulation as an unfair practice for the following reasons:
- (a) Many insurers fail or periodically fail to comply with the legal name requirement of RCW 48.05.190(1) when transacting insurance business.
- (b) When a consumer seeks assistance from the commissioner, the legal name of the company must be determined. When the consumer is unable to provide the information, the commissioner's staff must research it, which unnecessarily wastes the commissioner's resources and delays the inquiry and resolution, posing a risk of harm to the consumer.
- (e) Insurers will not accept a lawsuit from their insured if the paperwork does not identify the insurer correctly.
  - (2) The following definitions apply to this section:
- (a)) has found and hereby defines it to be an unfair practice for an insurer to conduct its business in any name other than its own legal name as required by RCW 48.05.190. Unless consumers are aware of the insurer's legal name, a consumer's policy rights and legal rights may be compromised. In addition, when consumers seek the commissioner's assistance and are not aware of the insurer's legal name, the commissioner's staff must research it, which unnecessarily wastes the commissioner's resources and delays the inquiry and resolution, posing a risk of harm to the consumer.
- (3) When used in this regulation, "legal name" of the insurer means the name displayed on the Washington state certificate of authority issued by the commissioner.
- (((b) "Contracted entity" means an entity with which an insurer contracts to transact any aspect of the business of insurance, such as adjudicating claims, determining eligibility, or underwriting or marketing products on behalf of an insurer, and includes such entities as insurance producers, claims administrators, and managing general agents as defined in RCW 48.98.005(3).
- (c) "Transacting business" includes insurance transaction, as defined in RCW 48.01.060.
- (3) An insurer must identify itself by its legal name when:

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- (a) Transacting business with a consumer, insured, potential insured or claimant as defined in WAC 284-30-320(2); and
- (b) Communicating orally, electronically, or in writing with the commissioner regarding an investigation, inquiry, enforcement matter or examination.) (4) Each insurer must have standards and procedures to ensure that each consumer with whom they conduct an insurance transaction is informed of and can consistently identify the legal name of the insurer. Each insurer must provide the insurance commissioner with its standards and procedures and proof of its compliance upon request. Existence of standards and procedures is not prima facie evidence of compliance. The insurer must be able to show the legal name was provided when issuing policy documents, billing statements, and other written communications regarding policy services, underwriting, and claims and at the point during policy sales transactions when the company is determined.
- (5) To assist the commissioner in identifying the legal name of the insurer, insurers' written communications ((with)) to the commissioner in response to any investigation, inquiry, enforcement matter or examination must ((also)) include the insurer's NAIC code.
- (((4) Advertisements directed to insureds or potential insureds must clearly display the insurer's legal name and the location of its home office or principal office, as required by RCW 48.30.050.
- (a) An advertisement by an insurance producer, licensee, or other marketing entity advertising an insurance product common to multiple insurers does not need to include the legal name of the insurer. The advertisement must include the insurance producer, licensee, or other marketing entity's name and address.
- (b) Advertisements directed solely to insurance producers, providers, or other marketing entities, but not directed to insureds or potential insureds, are exempt from this subsection.
- (5) Each single violation of this section by an insurer or its contracted entity may subject the insurer to all applicable provisions of Title 48 RCW, including, but not limited to, RCW 48.05.140 and 48.05.185.))
- (6) This regulation does not bar the use of trade names, ((group names,)) logos ((or)), trademarks((. To be in compliance with RCW 48.05.190(1), when an insurer uses a trade name, group name, logo or trademark when conducting its business, the insurer must also identify itself by its legal name as required by this section.)) or group names that identify companies collectively, for brand identification or for general purposes, but an insurer must also provide its legal name in the following:
- (a) In negotiations preliminary to the execution of an insurance contract;
  - (b) In the execution of an insurance contract; and
- (c) In the transaction of matters subsequent to the execution of an insurance contract and arising out of it.
- (7) Violation of this regulation is not a violation for purposes of RCW 48.30.015(5).

#### WSR 10-22-043 EMERGENCY RULES DEPARTMENT OF FISH AND WILDLIFE

[Order 10-286—Filed October 27, 2010, 4:51 p.m., effective October 29, 2010]

Effective Date of Rule: October 29, 2010.

Purpose: Amend personal use fishing rules.

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

Statutory Authority for Adoption: RCW 77.12.047 and 77.04.020.

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 number of late-stock, hatchery coho salmon returning to the Grays River this year is larger than expected. This regulation will allow anglers additional opportunity to harvest hatchery coho, as well as hatchery winter steelhead. The fishery also will help remove hatchery-origin fish, allowing a greater proportion of wild fish onto the spawning grounds. There is insufficient time to adopt 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: October 27, 2010.

Philip Anderson Director

#### **NEW SECTION**

WAC 232-28-61900X Exceptions to statewide rules—Grays River. Notwithstanding the provisions of WAC 232-28-619, effective October 29 through November 30, 2010, a person may fish for salmon and steelhead in waters of the West Fork Grays River from posted markers approximately 300 yards downstream of the hatchery road bridge upstream to the water intake/footbridge. Daily limit six salmon; minimum size 12 inches in length. Up to two may be adult Chinook. All Chinook must be adipose and/or ventral fin clipped to be retained. Release wild coho, Chinook not adipose and/or ventral fin clipped, and all chum. In

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addition, two hatchery steelhead may be retained. Release wild steelhead and all other game fish. Night closure, anti snagging rule, and stationary gear rules remain in effect.

#### **REPEALER**

The following section of the Washington Administrative Code is repealed effective December 1, 2010:

WAC 232-28-61900X

Exceptions to statewide rules—Grays River.

# WSR 10-22-044 EMERGENCY RULES DEPARTMENT OF FISH AND WILDLIFE

[Order 10-287—Filed October 27, 2010, 4:51 p.m., effective October 31, 2010, 6:00 p.m.]

Effective Date of Rule: October 31, 2010, 6:00 p.m.

Purpose: Amend commercial fishing rules.

Citation of Existing Rules Affected by this Order: Repealing WAC 220-52-05100Q.

Statutory Authority for Adoption: RCW 77.12.047 and 77.04.020.

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 closure of the shrimp trawl fishery in Region 3, implemented by this rule, is necessary to meet allocation, conservation, and management agreements of the 2010 state/tribal shrimp harvest management plans for the Strait of Juan de Fuca and Puget Sound. There is insufficient time to adopt 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 0, 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: October 27, 2010.

Philip Anderson Director

#### **REPEALER**

The following section of the Washington Administrative Code is repealed effective 6:00 p.m. October 31, 2010:

WAC 220-52-05100Q

Puget Sound shrimp pot and beam trawl fishery—Season. (10-258)

# WSR 10-22-047 EMERGENCY RULES DEPARTMENT OF SOCIAL AND HEALTH SERVICES

(Economic Services Administration)

(Division of Child Support)

[Filed October 28, 2010, 9:42 a.m., effective October 29, 2010]

Effective Date of Rule: October 29, 2010.

Purpose: The division of child support (DCS) is filing this second emergency rule to maintain the status quo as we complete the regular rule adoption process to comply with the budget for state fiscal year 2011, which required DCS to change its distribution rules regarding collections from federal tax refund offsets so that those collections are (1) applied only to child support arrears and (2) applied first to debt that has been assigned to the state. DCS adopted emergency rules effective July 1, 2010, under WSR 10-14-063 and intends to file the CR-102, notice of proposed rule making, to schedule the rule-making hearing, within the next few weeks.

Citation of Existing Rules Affected by this Order: Amending WAC 388-14A-5001, 388-14A-5002, 388-14A-5003, 388-14A-5004, 388-14A-5005, 388-14A-5006, and 388-14A-5010.

Statutory Authority for Adoption: RCW 26.23.035, 34.05.350 (1)(c).

Under RCW 34.05.350 the agency for good cause finds that in order to implement the requirements or reductions in appropriations enacted in any budget for fiscal years 2009, 2010, or 2011, which necessitates the need for the immediate adoption, amendment, or repeal of a rule, and that observing the time requirements of notice and opportunity to comment upon adoption of a permanent rule would be contrary to the fiscal needs or requirements of the agency.

Reasons for this Finding: The budget for state fiscal year 2011 requires DCS to change its distribution rules regarding collections from federal tax refund offsets so that those collections are (1) applied only to child support arrears and (2) applied first to debt that has been assigned to the state.

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 7, 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.

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Number of Sections Adopted in Order to Clarify, Streamline, or Reform Agency Procedures: New 1, 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 7, Repealed 0.

Date Adopted: October 27, 2010.

Susan N. Dreyfus Secretary

AMENDATORY SECTION (Amending WSR 09-02-059, filed 1/5/09, effective 1/27/09)

- WAC 388-14A-5001 What procedures does DCS follow to distribute support collections? (1) When distributing support collections, the division of child support (DCS) records collections in exact amounts of dollars and cents.
- (2) DCS distributes support collections within two days of the date DCS receives the collection, unless DCS is unable to distribute the collection for one or more of the following reasons:
- (a) ((The location of)) DCS is unable to locate the payee ((is unknown)) and the payee has not signed up for electronic funds transfer (EFT) of disbursements;
- (b) DCS does not have sufficient information to identify the accounts against which or to which it should distribute the money;
- (c) An action is pending before a court or agency which has jurisdiction over the issue to determine whether child support is owed or how DCS should distribute the collection.
- (d) DCS receives prepaid child support and is holding it for distribution in future months under ((subsection (2)(e) of this section)) WAC 388-14A-5008;
- (e) DCS mails a notice of intent to distribute support money ((to the custodial parent (CP))) under WAC 388-14A-5050:
- (f) DCS receives federal tax refund offset collections, which are distributed according to WAC 388-14A-5005 and 388-14A-5010.
- (g) DCS may hold funds and not issue a check to the family for amounts under one dollar. DCS must give credit for the collection, but may delay disbursement of that amount until a future collection is received which increases the amount of the disbursement to the family to at least one dollar. If no future collections are received which increase the disbursement to the family to at least one dollar, DCS transfers the amount to the department of revenue under RCW 63.29.130. This subsection does not apply to disbursements which can be made by ((electronic funds transfer ())EFT((), or to refunds of federal tax refund offset collections)); or
- ((<del>(g)</del>)) (h) Other circumstances exist which make a proper and timely distribution of the collection impossible through no fault or lack of diligence of DCS.
- (3) DCS distributes support collections based on the date DCS receives the collection, except as provided under WAC 388-14A-5005. DCS distributes support collections based on the date of collection. DCS considers the date of collection to be the date that DCS receives the support collection, no mat-

- ter when the money was withheld from the noncustodial parent (NCP).
- (4) Under state and federal law, the division of child support (DCS) disburses support collections to the:
- (a) Department when the department provides or has provided public assistance payments for the support of the family:
- (b) Payee under the order, or to the custodial parent (CP) of the child according to WAC 388-14A-5050;
- (c) Child support enforcement agency in another state or foreign country which submitted a request for support enforcement services;
- (d) Indian tribe which has a TANF program, child support program and/or a cooperative agreement regarding the delivery of child support services;
- (e) Persons or entity making the payment when DCS is unable to identify the person to whom the support is payable after making reasonable efforts to obtain identification information
- (5) If DCS is unable to disburse a support collection because the location of the family or person is unknown, it must exercise reasonable efforts to locate the family or person. When the family or person cannot be located, DCS handles the collection in accordance with chapter 63.29 RCW, the uniform unclaimed property act.
- (6) WAC 388-14A-5000 through 388-14A-5015 contain the rules for the distribution of support collections by DCS.
- (7) DCS changes the distribution rules based on changes in federal statutes and regulations. DCS may also change the distribution rules based on the state budget, but only to the extent allowed by federal law.

AMENDATORY SECTION (Amending WSR 09-02-059, filed 1/5/09, effective 1/27/09)

- WAC 388-14A-5002 How does DCS distribute support collections in a nonassistance case? (1) A nonassistance case is one where the family has never received a cash public assistance grant.
- (2) <u>Subject to the exceptions provided under WAC 388-14A-5005</u>, the division of child support (DCS) applies support collections within each Title IV-D nonassistance case:
- (a) First, to satisfy the current support obligation for the month DCS received the collection;
- (b) Second, to the noncustodial parent's support debts owed to the family;
- (c) Third, to prepaid support as provided for under WAC 388-14A-5008.
- (3) DCS uses the fee retained under WAC 388-14A-2200 to offset the fee amount charged by the federal government for IV-D cases that meet the fee criteria in WAC 388-14A-2200(1).

AMENDATORY SECTION (Amending WSR 09-02-059, filed 1/5/09, effective 1/27/09)

WAC 388-14A-5003 How does DCS distribute support collections in an assistance case? (1) An assistance case is one where the family is currently receiving a TANF grant.

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- (2) <u>Subject to the exceptions provided under WAC 388-14A-5005</u>, the division of child support (DCS) distributes support collections within each Title IV-D assistance case:
- (a) First, to satisfy the current support obligation for the month DCS received the collection;
- (b) Second, to satisfy support debts which are permanently assigned to the department to reimburse the cumulative amount of assistance which has been paid to the family;
  - (c) Third:
- (i) To satisfy support debts which are temporarily assigned to the department to reimburse the cumulative amount of assistance paid to the family; or
- (ii) To satisfy support debts which are conditionally assigned to the department. Support collections distributed to conditionally assigned arrears are disbursed according to WAC 388-14A-2039.
  - (d) Fourth, to satisfy support debts owed to the family;
- (e) Fifth, to prepaid support as provided for under WAC 388-14A-5008.

AMENDATORY SECTION (Amending WSR 09-02-059, filed 1/5/09, effective 1/27/09)

- WAC 388-14A-5004 How does DCS distribute support collections in a former assistance case? (1) A former assistance case is one where the family is not currently receiving a TANF grant, but has at some time in the past.
- (2) Subject to the exceptions provided under WAC 388-14A-5005, the division of child support (DCS) distributes support collections within each Title IV-D former-assistance case:
- (a) First, to satisfy the current support obligation for the month DCS received the collection;
  - (b) Second, to satisfy support debts owed to the family;
- (c) Third, to satisfy support debts which are conditionally or temporarily assigned to the department. These collections are disbursed according to WAC 388-14A-2039;
- (d) Fourth, to satisfy support debts which are permanently assigned to the department to reimburse the cumulative amount of assistance which has been paid to the family; and
- (e) Fifth, to prepaid support as provided for under WAC 388-14A-5008.

AMENDATORY SECTION (Amending WSR 09-02-059, filed 1/5/09, effective 1/27/09)

- WAC 388-14A-5005 How does DCS distribute federal tax refund offset collections? The division of child support (DCS) distributes federal tax refund offset collections in accordance with 42 U.S.C. Sec. 657, as follows:
- (1) ((First, to satisfy the current support obligation for the month in which DCS received the collection.
- (2) Second,)) DCS distributes ((any amounts over current support)) federal tax refund offset collections to arrears only, and not to current support.
- (2) DCS distributes federal tax refund offset collections within an individual case depending on the type of case to which the collection is distributed:

- (a) In a never assistance case, all ((remaining)) amounts are distributed to family arrears, meaning those arrears which have never been assigned.
- (b) In a former assistance case, all ((remaining)) amounts are distributed first to ((family)) permanently assigned arrears, then to ((permanently)) conditionally assigned arrears, then to ((eonditionally assigned)) family arrears.
- (c) In a current assistance case, all ((remaining)) amounts are distributed first to permanently assigned arrears, then to temporarily assigned arrears (if they exist), then to conditionally assigned arrears, and then to family arrears.
- (3) Federal tax refund offset collections distributed to assigned support are retained by the state to reimburse the cumulative amount of assistance which has been paid to the family.
- (4) DCS may distribute federal tax refund offset collections only to certified support debts ((and to current support obligations on cases with certified debts)). DCS must refund any excess to the noncustodial parent (NCP).
- (5) DCS may retain the twenty-five dollar annual fee required under the federal deficit reduction act of 2005 and RCW 74.20.040 from federal tax refund offset collections distributed to nonassistance cases.
- (6) When the Secretary of the Treasury, through the federal Office of Child Support Enforcement (OCSE), notifies DCS that a collection from a federal tax refund offset is from a tax refund based on a joint return, DCS follows the procedures set forth in WAC 388-14A-5010.

AMENDATORY SECTION (Amending WSR 09-02-059, filed 1/5/09, effective 1/27/09)

- WAC 388-14A-5006 How does DCS distribute support collections when the paying parent has more than one case? ((When the NCP has more than one Title IV Dease)) Subject to the exceptions provided under WAC 388-14A-5005, the division of child support (DCS) distributes support collections in the following manner when the noncustodial parent (NCP) has more than one Title IV-D case:
- (1) First, to the current support obligation on each Title IV-D case, in proportion to the amount of the current support order on each case; and
- (2) Second, to the total of the support debts whether owed to the family or to the department for the reimbursement of public assistance on each Title IV-D case, in proportion to the amount of support debt owed by the NCP on each case; and
- (3) Third, within each Title IV-D case according to WAC 388-14A-5002, 388-14A-5003, or 388-14A-5004.

AMENDATORY SECTION (Amending WSR 09-02-059, filed 1/5/09, effective 1/27/09)

WAC 388-14A-5010 How does the division of child support distribute federal tax refund offset collections from joint returns? (1) The division of child support (DCS) collects child support through the interception of federal tax refunds. This section deals with the issues that arise when the Secretary of the Treasury intercepts a tax refund based on a joint tax return filed by a noncustodial parent (NCP) and the NCP's spouse who does not owe child support.

[25] Emergency

- (2) When the Secretary of the Treasury, through the federal Office of Child Support Enforcement (OCSE), notifies DCS that a collection on behalf of an NCP is from an intercepted tax refund based on a joint return, DCS may distribute fifty percent of that collection as provided in WAC 388-14A-5005 and hold the remainder for up to six months in case the NCP's spouse is entitled to a share of the federal tax refund.
- (3) DCS distributes fifty percent of the collection according to WAC 388-14A-5005.
- (4) DCS holds the other fifty percent of the collection in suspense until the earlier of the following:
- (a) DCS is notified by OCSE or the Secretary of the Treasury whether DCS must pay back the unobligated spouse's portion of the refund; or
- (b) For a period not to exceed six months from notification of the offset.
- (5) After DCS holds part of a collection under subsection (4) of this section, DCS distributes the remainder of the collection to the NCP's support ((obligations if)) arrears according to WAC 388-14A-5005, unless DCS is ((not)) required to return the unobligated spouse's portion of the refund. The CP may:
- (a) Request that DCS distribute the payment to the NCP's support obligation sooner upon a showing of hardship to the CP; and
- (b) Request a conference board if the CP disagrees with DCS' denial of a hardship claim.

## WSR 10-22-049 EMERGENCY RULES DEPARTMENT OF SOCIAL AND HEALTH SERVICES

(Economic Services Administration) (Division of Child Support)

[Filed October 28, 2010, 9:54 a.m., effective October 29, 2010]

Effective Date of Rule: October 29, 2010.

Purpose: The division of child support (DCS) is filing this fifth emergency rule in order to maintain the status quo as we await the rule-making hearing for the adoption of final rules. THESE RULES ARE EXACTLY THE SAME AS THE PRIOR EMERGENCY RULES ADOPTED AS WSR 10-14-065 AND EFFECTIVE ON JULY 1, 2010. This fifth set of emergency rules takes effect on October 29, 2010, and is identical in every respect to the prior emergency rules filed as WSR 10-14-065.

BASIS FOR ADOPTION OF EMERGENCY RULES: In the 2009 legislative session, the Washington state legislature adopted ESHB 1794 (chapter 84, Laws of 2009), which makes changes to chapter 26.19 RCW, the Washington state child support schedule, based on recommendations of the 2007 child support schedule workgroup which was convened under 2SHB 1009 (chapter 313, Laws of 2007) and SHB 1845 (chapter 476, Laws of 2009), regarding medical support obligations in child support orders. Both of these bills had an effective date of October 1, 2009.

DCS filed emergency rules under WSR 09-20-030 in order to implement this legislation by October 1, 2009. DCS filed the second emergency rules, identical to the first, under

WSR 10-04-037 with an effective date of January 28, 2010. The third emergency was filed under WSR 10-12-039, and was effective on May 26, 2010. The fourth emergency was filed under WSR 10-14-065, and was effective on July 1, 2010; that rule-making order removed certain sections (WAC 388-14A-5002, 388-14A-5003, 388-14A-5004, 388-14A-5005 and 388-14A-5006) in order to amend DCS rules regarding the distribution of collections from federal tax refund offset, and those sections were amended by emergency rule adopted under WSR 10-14-063, effective July 1, 2010.

For a list of section numbers and titles in this fifth emergency filing, see below.

DCS began the regular rule-making process by filing a CR-101 Preproposal notice of inquiry, for each of the bills: The CR-101 for ESHB 1794 was filed as WSR 09-10-046, and the CR-101 for SHB 1845 was filed as WSR 09-14-075. Because both of the bills impact the establishment of child support obligations, DCS determined that it was necessary to adopt just one set of rules which covers both bills instead of two separate rule-making projects.

DCS has done a significant amount of redrafting and revising the rules from the form in which they were first proposed. After consulting with DCS staff, stakeholders and other partners, DCS intends to file the CR-102 Notice of proposed rule making, as soon as we can.

Between the filing of the CR-102 and the public rule-making hearing, DCS will again work with DCS staff, stake-holders and other partners to incorporate more comments and feedback. While the third emergency rules are exactly the same as the first emergency rules, DCS anticipates that because of the complexity of these two bills the rules proposed in the CR-102 will differ from the emergency rules in several respects, as will the final rules. DCS hopes to have final rules adopted as soon as possible.

Citation of Existing Rules Affected by this Order: WAC 388-14A-1020 What definitions apply to the rules regarding child support enforcement?, 388-14A-2035 Do I assign my rights to support when I receive public assistance?, 388-14A-2036 What does assigning my rights to support mean?, 388-14A-3140 What can happen at a hearing on a support establishment notice?, 388-14A-3205 How does DCS calculate my income?, 388-14A-3310 The division of child support serves a notice of support owed to establish a fixed dollar amount under an existing child support order, 388-14A-3312 The division of child support serves a notice of support owed for ((unreimbursed)) medical ((expenses)) support to establish a fixed dollar amount owed under a child support order, 388-14A-3315 When DCS serves a notice of support debt ((or)), notice of support owed ((or)), notice of support owed for ((unreimbursed)) medical ((expenses)) support, we notify the other party to the child support order, 388-14A-3317 What is an annual review of a support order under RCW 26.23.110?, 388-14A-3318 What is an annual review of a notice of support owed under WAC 388-14A-3312?, 388-14A-3320 What happens at a hearing on a notice of support owed?, 388-14A-3400 Are there limitations on how much of my income is available for child support?, 388-14A-4100 How does the division of child support enforce my obligation to provide health insurance for my children?, 388-14A-4110

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If my support order requires me to provide ((health insurance)) medical support for my children, what do I have to do?, 388-14A-4112 When does the division of child support enforce a custodial parent's obligation to provide ((health insurance coverage)) medical support?, 388-14A-4115 Can my support order reduce my support obligation if I pay for health insurance?, 388-14A-4120 DCS uses the National Medical Support Notice to enforce an obligation to provide health insurance coverage, 388-14A-4165 What happens when a noncustodial parent does not earn enough to pay child support plus the health insurance premium?, 388-14A-4175 ((<del>Is an employer</del>)) Who is required to notify the division of child support when insurance coverage for the children ends?, 388-14A-4180 When must the division of child support communicate with the DSHS health and recovery services administration?, 388-14A-5007 If the paying parent has more than one case, can DCS apply support money to only one specific case?, 388-14A-6300 Duty of the administrative law judge in a hearing to determine the amount of a support obligation and 388-14A-8130 How does DCS complete the WSCSS worksheets when setting a joint child support obligation when the parents of a child in foster care are married and residing together?; and new section WAC 388-14A-4111 When may DCS decline a request to enforce a medical support obligation?

Statutory Authority for Adoption: RCW 26.09.105(17), 26.18.170(19), 26.23.050(8), 26.23.110(14), 34.05.020, 34.05.060, 34.05.220, 74.08.090, 74.20.040, and 74.20A.055 (9) and (11).

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: ESHB 1794 (chapter 84, Laws of 2009) and SHB 1845 (chapter 476, Laws of 2009) both had an effective date of October 1, 2009. Although DCS has begun the regular rule-making process to adopt rules under this bill, we were unable to complete the adoption process by the effective date. DCS continues the regular rule-making process and will adopt final rules as soon as possible.

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 1, Amended 23, 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 23, Repealed 0.

Date Adopted: October 27, 2010.

Susan N. Dreyfus Secretary **Reviser's note:** The material contained in this filing exceeded the page-count limitations of WAC 1-21-040 for appearance in this issue of the Register. It will appear in the 10-24 issue of the Register.

#### WSR 10-22-051 EMERGENCY RULES BUILDING CODE COUNCIL

[Filed October 28, 2010, 12:09 p.m., effective October 28, 2010, 12:09 p.m.]

Effective Date of Rule: Immediately.

Purpose: To extend the emergency declaration filed under WSR 10-13-141 while in regular rule making filed as WSR 10-16-043.

Citation of Existing Rules Affected by this Order: Amending WAC 51-50-1005 and 51-54-1000.

Statutory Authority for Adoption: Chapter 19.27 RCW.

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 council finds that enforcement of the 2009 IBC section 1005 Egress Width would be extremely problematic and cause extensive confusion in the application of the building code statewide. The exception provided in the emergency rule makes the requirement consistent with the latest standard for health and safety. Enforcing the code as published in 2009 would require building designs to meet a significantly expanded prescriptive width requirement. The design changes would result in a period of time in which buildings use a radically different egress system, resulting in major economic impacts for building owners and designers and confusion resulting in a lack of compliance compromising public health and safety. The latest code as adopted by the International Code Council for publication in 2012 requires alternative safety systems which provide greater safety without radical and costly design changes.

The council has adopted a permanent rule to be effective after the 2011 legislative session per RCW 19.27.074.

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 2, 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.

[27] Emergency

Date Adopted: October 28, 2010.

John C. Cochran Chair

#### **NEW SECTION**

#### WAC 51-50-1005 Section 1005—Egress width.

1005.1 Minimum required egress width. The means of egress width shall not be less than required by this section. The total width of means of egress in inches (mm) shall not be less than the total occupant load served by the means of egress multiplied by 0.3 inches (7.62 mm) per occupant for stairways and by 0.2 inches (5.08 mm) per occupant for other egress components. The width shall not be less than specified elsewhere in this code. Multiple means of egress shall be sized such that the loss of any one means of egress shall not reduce the available capacity to less than 50 percent of the required capacity. The maximum capacity required from any story of a building shall be maintained to the termination of the means of egress.

**EXCEPTIONS:** 

- 1. Means of egress complying with Section 1028.
- 2. For other than H and I-2 occupancies, the total width of means of egress in inches (mm) shall not be less than the total occupant load served by the means of egress multiplied by 0.2 inches (5.1 mm) per occupant for stairways and by 0.15 inches (3.8 mm) per occupant for other egress components in buildings that are provided with sprinkler protection in accordance with 903.3.1.1 or 903.3.1.2 and an emergency voice/alarm communication system in accordance with 907.5.2.2.

<u>AMENDATORY SECTION</u> (Amending WSR 09-04-027, filed 1/28/09, effective 7/1/10)

WAC 51-54-1000 Chapter 10—Means of egress.

#### Section 1005-Egress width.

1005.1 Minimum required egress width. The means of egress width shall not be less than required by this section. The total width of means of egress in inches (mm) shall not be less than the total occupant load served by the means of egress multiplied by 0.3 inches (7.62 mm) per occupant for stairways and by 0.2 inches (5.08 mm) per occupant for other egress components. The width shall not be less than specified elsewhere in this code. Multiple means of egress shall be sized such that the loss of any one means of egress shall not reduce the available capacity to less than 50 percent of the required capacity. The maximum capacity required from any story of a building shall be maintained to the termination of the means of egress.

**EXCEPTIONS:** 

- 1. Means of egress complying with Section 1028.
- 2. For other than H and I-2 occupancies, the total width of means of egress in inches (mm) shall not be less than the total occupant load served by the means of egress multiplied by 0.2 inches (5.1 mm) per occupant for stairways and by 0.15 inches (3.8 mm) per occupant for other egress components in buildings that are provided with sprinkler protection in accordance with 903.3.1.1 or 903.3.1.2 and an emergency voice/alarm communication system in accordance with 907.5.2.2.

1007.1 Accessible means of egress required. Accessible means of egress shall comply with this section. Accessible spaces shall be provided with not less than one accessible means of egress. Where more than one means of egress are required by Section 1015.1 or 1021.1 from any accessible space, each accessible portion of the space shall be served by not less than two accessible means of egress.

**EXCEPTIONS:** 

- 1. Accessible means of egress are not required in alterations to existing buildings.
- 2. One accessible means of egress is required from an accessible mezzanine level in accordance with Section 1007.3, 1007.4 or 1007.5.
- 3. In assembly areas with sloped or stepped aisles, one accessible means of egress is permitted where the common path of travel is accessible and meets the requirements in Section 1028.8.
- 4. In parking garages, accessible means of egress are not required to serve parking areas that do not contain accessible parking spaces.

1007.8 Two-way communication. A two-way communication system shall be provided at the elevator landing on each accessible floor that is one or more stories above or below the story of exit discharge complying with Sections 1007.8.1 and 1007.8.2.

**EXCEPTIONS:** 

- 1. Two-way communication systems are not required at the elevator landing where two-way communication is provided within the areas of refuge in accordance with Section 1007.6.3.
- 2. Two-way communication systems are not required on floors provided with exit ramps conforming to provisions of Section 1010.

1007.8.1 System requirements. Two-way communication systems shall provide communication between each required location and the fire command center or a central control point location approved by the fire department. Where the central control point is not constantly attended, a two-way communication system shall have a timed automatic telephone dial-out capability to a monitoring location. The two-way communication system shall include both audible and visible signals. The two-way communication system shall have a battery backup or an approved alternate source of power that is capable of 90 minutes use upon failure of the normal power source.

**1008.1.2 Door swing.** Egress doors shall be side-hinged swinging.

EXCEPTIONS:

- 1. Private garages, office areas, factory and storage areas with an occupant load of 10 or less.
- 2. Group I-3 Occupancies used as a place of detention.
- 3. Critical or intensive care patient rooms within suites of health care facilities.
- 4. Doors within or serving a single dwelling unit in Groups R-2 and R-3 as applicable in Section 101.2.
- 5. In other than Group H Occupancies, revolving doors complying with Section 1008.1.3.1.
- 6. In other than Group H Occupancies, horizontal sliding doors complying with Section 1008.1.3.3 are permitted in a means of egress.
- 7. Power-operated doors in accordance with Section 1008 1 3 2
- 8. Doors serving a bathroom within an individual sleeping unit in Group R-1.
- 9. In other than Group H Occupancies, manually operated horizontal sliding doors are permitted in a means of egress from spaces with an occupant load of 10 or less

Emergency [28]

Doors shall swing in the direction of egress travel where serving an occupant load of 50 or more persons or a Group H Occupancy.

The opening force for interior side-swinging doors without closers shall not exceed a 5-pound (22 N) force. For other side-swinging, sliding, and folding doors, the door latch shall release when subjected to a 15-pound (67 N) force. The door shall be set in motion when subjected to a 30-pound (133 N) force. The door shall swing to a full-open position when subjected to a 15-pound (67 N) force. Forces shall be applied to the latch side.

- ((1008.1.8.3 Locks and latches. Locks and latches shall be permitted to prevent operation of doors where any of the following exists:
  - 1. Places of detention or restraint.
- 2. In buildings in occupancy Group A having an occupant load of 300 or less, Group B, F, M and S, and in places of religious worship, the main exterior door or doors are permitted to be equipped with key operated locking devices from the egress side provided:
- 2.1 The locking device is readily distinguishable as locked.
- 2.2 A readily visible durable sign is posted on the egress side on or adjacent to the door stating: THIS DOOR TO REMAIN UNLOCKED WHEN BUILDING IS OCCUPIED. The sign shall be in letters 1 inch (25 mm) high on a contrasting background; and
- 2.3 The use of the key-operated locking device is revocable by the fire code official for due cause.
- 3. Where egress doors are used in pairs, approved automatic flush bolts shall be permitted to be used, provided that the door leaf having the automatic flush bolts has no doorknob or surface-mounted hardware.
- 4. Doors from individual dwelling or sleeping units of Group R occupancies having an occupant load of 10 or less are permitted to be equipped with a night latch, dead bolt or security chain, provided such devices are openable from the inside without the use of a key or tool.
- 5. Approved, listed locks without delayed egress shall be permitted in nursing homes or portions of nursing homes, and boarding homes licensed by the state of Washington, provided that:
- 5.1 The clinical needs of one or more patients require specialized security measures for their safety;
- 5.2 The doors unlock upon actuation of the automatic sprinkler systems or automatic fire detection system;
- 5.3 The doors unlock upon loss of electrical power controlling the lock or lock mechanism;
- 5.4 The lock shall be capable of being deactivated by a signal from a switch located in an approved location; and
- 5.5 There is a system, such as a keypad and code, in place that allows visitors, staff persons and appropriate residents to exit. Instructions for exiting shall be posted within six feet of the door.
- 1009.12 Stairways in individual dwelling units. Stairs or ladders within an individual dwelling unit used for access to areas of 200 square feet (18.6 m²) or less, and not containing the primary bathroom or kitchen, are exempt from the requirements of Section 1009.

1014.2.2 Group I-2. Habitable rooms or suites in Group I-2 Occupancies shall have an exit access door leading directly to a corridor.

EXCEPTION: Rooms with exit doors opening directly to the outside at ground level.

1014.2.2.1 Definition. For the purposes of this section, a suite is defined as a cluster of rooms or spaces sharing common circulation. Partitions within a suite are not required to have smoke or fire-resistance-rated construction unless required by another section of this Code.

- 1014.2.3 Suites in patient sleeping areas. Patient sleeping areas in Group I-2 Occupancies shall be permitted to be divided into suites if one of the following conditions is met:
- 1. The intervening room within the suite is not used as an exit access for more than eight patient beds.
- 2. The arrangement of the suite allows for direct and constant visual supervision by nursing personnel.
- 1014.2.3.1 Area. Suites of sleeping rooms shall not exceed 5,000 square feet (465 m<sup>2</sup>).
- 1014.2.3.2 Exit access. Any patient sleeping room, or any suite that includes patient sleeping rooms, of more than 1,000 square feet (93 m²) shall have at least two exit access doors remotely located from each other.
- 1014.2.3.3 Travel distance. The travel distance between any point in a suite of sleeping rooms and an exit access door of that suite shall not exceed 100 feet (30,480 mm).
- 1014.2.4 Suites in areas other than patient sleeping areas. Areas other than patient sleeping areas in Group I-2 Occupancies shall be permitted to be divided into suites.
- 1014.2.4.1 Area. Suites of rooms, other than patient rooms, shall not exceed 10,000 square feet (929 m²).
- 1014.2.4.2 Exit access. Any rooms or suite of rooms, other than patient sleeping rooms, of more than 2,500 square feet (232 m²) shall have at least two exit access doors remotely located from each other.
- **1014.2.4.3** One intervening room. For rooms other than patient sleeping rooms, suites of rooms are permitted to have one intervening room if the travel distance within the suite is not greater than 100 feet (30,480 mm).
- 1014.2.4.4 Two intervening rooms. For rooms other than patient sleeping rooms located within a suite, exit access travel from within the suite shall be permitted through two intervening rooms where the travel distance to the exit access door is not greater than 50 feet (15,240 mm).
- 1014.2.5 Travel distance. The travel distance between any point in a Group I-2 Occupancy patient room and an exit access door in that room shall not exceed 50 feet (15,240 mm).
- **1014.2.6** Separation. Suites in Group I-2 Occupancies shall be separated from other portions of the building by a smoke partition complying with Section 710.

[29] Emergency

1015.1 Exits or exit access doorways from spaces. Two exits or exit access doorways from any space shall be provided where one of the following conditions exists:

1. The occupant load of the space exceeds one of the values in Table 1015.1.

**EXCEPTION:** 

One means of egress is permitted within and from dwelling units with a maximum occupant load of 20 where the dwelling unit is equipped throughout with an automatic sprinkler system in accordance with Section 903.3.1.1.

- 2. The common path of egress travel exceeds one of the limitations of Section 1014.3.
- 3. Where required by Sections 1015.3, 1015.4, 1015.5, 1015.6 or 1015.6.1.

EXCEPTION: Group I-2 Occupancies shall comply with Section 1014.2.2.

TABLE 1015.1
SPACES WITH ONE MEANS OF ECRESS

	MAXIMUM OCCUPANT
<del>OCCUPANCY</del>	<del>LOAD</del>
A, B, E*, F, M, U	<del>49</del>
H-1, H-2, H-3	3
H-4, H-5, I-1, I-3, I-4, R	<del>10</del>
S	<del>29</del>

a. Day care maximum occupant load is 10.

1015.1.1 Three or more exits or exit access doorways.

Three exits or exit access doorways shall be provided from any space with an occupant load of 501-1,000. Four exits or exit access doorways shall be provided from any space with an occupant load greater than 1,000.

1019.1 Exits from stories. All spaces within each story shall have access to the minimum number of exits as specified in Table 1019.1 based on the occupant load of the story, except as modified in Section 1019.2. For the purposes of this chapter, occupied roofs shall be provided with exits as required for stories. The required number of exits from any story, including basements, shall be maintained until arrival at grade or the public way.

**EXCEPTION:** 

One means of egress is permitted within and from dwelling units with a maximum occupant load of 20 where the dwelling unit is equipped throughout with an automatic sprinkler system in accordance with Section 903.3.1.1.

TABLE 1019.1
MINIMUM NUMBER OF EXITS FOR OCCUPANT LOAD

OCCUPANT LOAD (personsper story)	MINIMUM NUMBER OF EXITS (per story)
<del>1-500</del>	2
501-1,000	3
More than 1,000	4

**1019.2 Buildings with one exit.** Only one exit shall be required in buildings as specified below:

1. Buildings meeting the limitations of Table 1019.2, provided the building has not more than one level below the first story above grade plane.

- 2. Buildings of Group R-3 Occupancy.
- 3. Single-level buildings with occupied spaces at the level of exit discharge provided each space complies with Section 1015.1 as a space with one exit or exit access doorway.

TABLE 1019.2
BUILDINGS WITH ONE EXIT

	MAXIMUM- HEIGHT OF BUILDING ABOVE GRADE	MAXIMUM OCCUPANTS (OR DWELLING UNITS) PER FLOOR AND
<del>OCCUPANCY</del>	PLANE	TRAVEL DISTANCE
A, B <sup>d</sup> , E <sup>e</sup> , F, M, U	<del>1 Story</del>	49 occupants and 75 feet travel dis- tance
H-2, H-3	<del>1 Story</del>	3 occupants and 25 feet travel distance
H 4, H 5, I, R	<del>1 Story</del>	10 occupants and 75 feet travel dis- tance
<del>S</del> ª	<del>1 Story</del>	29 occupants and 100 feet travel dis- tance
B*, F, M, S*	2 Stories	30 occupants and 75 feet travel dis- tance
<del>R-2</del>	2 Stories <sup>e</sup>	4 dwelling units and 50 feet travel distance

For SI: 1 foot = 304.8 mm.

- a. For the required number of exits for open parking structures, see Section 1019.1.1.
- b. For the required number of exits for air traffic control towers, see Section 412.1.
- e. Buildings classified as Group R-2 equipped throughout with an automatic sprinkler system in accordance with Section 903.3.1.1 or 903.3.1.2 and provided with emergency escape and rescue openings in accordance with Section 1026 shall have a maximum height of three stories above grade plane.
- d. Buildings equipped throughout with an automatic sprinkler system in accordance with Section 903.3.1.1 with an occupancy in Group B shall have a maximum travel distance of 100 feet.
- e. Day care maximum occupant load is 10.))

1008.1.9.3 Locks and latches. Locks and latches shall be permitted to prevent operation of doors where any of the following exists:

- 1. Places of detention or restraint.
- 2. In buildings in occupancy Group A having an occupant load of 300 or less, Groups B, F, M and S, and in places of religious worship, the main exterior door or doors are permitted to be equipped with key-operated locking devices from the egress side provided:
- 2.1 The locking device is readily distinguishable as locked;
- 2.2 A readily visible sign is posted on the egress side on or adjacent to the door stating: THIS DOOR TO REMAIN

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- UNLOCKED WHEN BUILDING IS OCCUPIED. The sign shall be in letters 1 inch (25 mm) high on a contrasting background; and
- 2.3 The use of the key-operated locking device is revocable by the building official for due cause.
- 3. Where egress doors are used in pairs, approved automatic flush bolts shall be permitted to be used, provided that the door leaf having the automatic flush bolts has no doorknob or surface-mounted hardware.
- 4. Doors from individual dwelling or sleeping units of Group R occupancies having an occupant load of 10 or less are permitted to be equipped with a night latch, dead bolt, or security chain, provided such devices are openable from the inside without the use of a key or a tool.
- 5. Fire doors after the minimum elevated temperature has disabled the unlatching mechanism in accordance with listed fire door test procedures.
- 6. Approved, listed locks without delayed egress shall be permitted in Group R-2 boarding homes licensed by Washington state, provided that:
- 6.1. The clinical needs of one or more patients require specialized security measures for their safety.
- <u>6.2. The doors unlock upon actuation of the automatic sprinkler system or automatic fire detection system.</u>
- 6.3. The doors unlock upon loss of electrical power controlling the lock or lock mechanism.
- 6.4. The lock shall be capable of being deactivated by a signal from a switch located in an approved location.
- 6.5. There is a system, such as a keypad and code, in place that allows visitors, staff persons and appropriate residents to exit. Instructions for exiting shall be posted within six feet of the door.
- Approved locks shall be permitted in a Group I-2 Occupancy where the clinical needs of persons receiving care require such locking. Locks shall be permitted in such occupancies where the building is equipped throughout with an automatic sprinkler system in accordance with Section 903.3.1.1 or an approved automatic smoke or heat detection system installed in accordance with Section 907, provided that the doors unlock in accordance with Items 1 through 6 below.
- 1. The doors unlock upon actuation of the automatic sprinkler system or automatic fire detection system.
- 2. The doors unlock upon loss of power controlling the lock or lock mechanism.
- 3. The door locks shall have the capability of being unlocked by a signal from the fire command center, a nursing station or other approved location.
- 4. The procedures for the operation(s) of the unlocking system shall be described and approved as part of the emergency planning and preparedness required by Chapter 4 of the International Fire Code.
- 5. There is a system, such as a keypad and code, in place that allows visitors, staff persons and appropriate residents to exit. Instructions for exiting shall be posted within six feet of the door.
  - 6. Emergency lighting shall be provided at the door.

**EXCEPTION:** 

Items 1, 2, 3, and 5 shall not apply to doors to areas where persons which because of clinical needs require restraint or containment as part of the function of a Group I-2 mental hospital provided that all clinical

staff shall have the keys, codes or other means necessary to operate the locking devices.

1009.15 Stairways in individual dwelling units. Stairs or ladders within an individual dwelling unit used for access to areas of 200 square feet (18.6 m²) or less, and not containing the primary bathroom or kitchen, are exempt from the requirements of Section 1009.

**1010.1 Scope.** The provisions of this section shall apply to ramps used as a component of a means of egress.

**EXCEPTIONS:** 

- 1. Other than ramps that are part of the accessible routes providing access in accordance with Sections 1108.2 through 1108.2.4 and 1108.2.6, ramped aisles within assembly rooms or spaces shall conform with the provisions in Section 1028.11.
- 2. Curb ramps shall comply with ICC A117.1.
- 3. Vehicle ramps in parking garages for pedestrian exit access shall not be required to comply with Sections 1010.3 through 1010.9 when they are not an accessible route serving accessible parking spaces or other required accessible elements.
- 4. In a parking garage where one accessible means of egress serving accessible parking spaces or other accessible elements is provided, a second accessible means of egress serving that area may include a vehicle ramp that does not comply with Sections 1010.4 through 1010.8.
- 1014.2.2 Group I-2. General. Habitable spaces and suites in Group I-2 Occupancies are permitted to comply with this Section 1014.2.2.
- <u>1014.2.2.1 Exit access doors.</u> Habitable spaces and suites in Group I-2 Occupancies shall have an exit access door leading directly to a corridor.

**EXCEPTION:** 

Rooms with exit doors opening directly to the outside at ground level.

- 1014.2.2.2 Exit access through suites. Exit access from areas not classified as a Group I-2 Occupancy suite shall not pass through a suite. In a suite required to have more than one exit, one exit access may pass through an adjacent suite if all other requirements of Section 1014.2 are satisfied.
- 1014.2.2.3 Separation. Suites in Group I-2 Occupancies shall be separated from other portions of the building by a smoke partition complying with Section 711. Partitions within suites are not required to be smoke-resistant or fire-resistance-rated unless required by another section of this Code.
- 1014.2.2.4 Suites containing patient sleeping areas.

Patient sleeping areas in Group I-2 Occupancies shall be permitted to be divided into suites with one intervening room if one of the following conditions is met:

- 1. The intervening room within the suite is not used as an exit access for more than eight patient beds.
- 2. The arrangement of the suite allows for direct and constant visual supervision by nursing personnel.
- <u>1014.2.2.4.1 Area.</u> Suites of sleeping rooms shall not exceed <u>5,000 square feet (465 m<sup>2</sup>).</u>
- 1014.2.2.4.2 Exit access. Any patient sleeping room, or any suite that includes patient sleeping rooms, of more than 1,000

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square feet (93 m²) shall have at least two exit access doors located in accordance with Section 1015.2.

1014.2.2.4.3 Travel distance. The travel distance between any point in a suite of sleeping rooms and an exit access door of that suite shall not exceed 100 feet (30,480 mm). The travel distance between any point in a Group I-2 Occupancy patient sleeping room and an exit access door in that room shall not exceed 50 feet (15,240 mm).

Areas other than patient sleeping areas in Group I-2 Occupancies shall be permitted to be divided into suites that comply with Sections 1014.2.2.5.1 through 1014.2.2.5.4.

1014.2.2.5.1 Area. Suites of rooms, other than patient sleeping rooms, shall not exceed 10,000 square feet (929 m<sup>2</sup>).

1014.2.2.5.2 Exit access. Any room or suite of rooms, other than patient sleeping rooms, of more than 2,500 square feet (232 m<sup>2</sup>) shall have at least two exit access doors located in accordance with Section 1015.2.

1014.2.2.5.3 One intervening room. For rooms other than patient sleeping rooms, suites of rooms are permitted to have one intervening room if the travel distance within the suite to the exit access door is not greater than 100 feet (30,480 mm).

1014.2.2.5.4 Two intervening rooms. For rooms other than patient sleeping rooms located within a suite, exit access travel from within the suite shall be permitted through two intervening rooms where the travel distance to the exit access door is not greater than 50 feet (15,240 mm).

**1018.5 Air movement in corridors.** Corridors shall not serve as supply, return, exhaust, relief or ventilation air ducts.

**EXCEPTIONS**:

- 1. Use of a corridor as a source of makeup air for exhaust systems in rooms that open directly onto such corridors, including toilet rooms, bathrooms, dressing rooms, smoking lounges and janitor closets, shall be permitted, provided that each such corridor is directly supplied with outdoor air at a rate greater than the rate of makeup air taken from the corridor.
- 2. Where located within a dwelling unit, the use of corridors for conveying return air shall not be prohibited.
- 3. Where located within tenant spaces of one thousand square feet (93 m<sup>2</sup>) or less in area, utilization of corridors for conveying return air is permitted.
- 4. Incidental air movement from pressurized rooms within health care facilities, provided that a corridor is not the primary source of supply or return to the room.

  5. Where such air is part of an engineered smoke control system.
- 6. Air supplied to corridors serving residential occupancies shall not be considered as providing ventilation air to the dwelling units subject to the following: 6.1 The air supplied to the corridor is one hundred percent outside air; and
- 6.2 The units served by the corridor have conforming ventilation air independent of the air supplied to the corridor; and
- 6.3 For other than high-rise buildings, the supply fan will automatically shut off upon activation of corridor smoke detectors which shall be spaced at no more than thirty feet (9,144 mm) on center along the corridor; or 6.4 For high-rise buildings, corridor smoke detector activation will close required smoke/fire dampers at

the supply inlet to the corridor at the floor receiving the alarm.

<u>1018.6 Corridor continuity.</u> Fire-resistance-rated corridors shall be continuous from the point of entry to an exit, and shall not be interrupted by intervening rooms.

**EXCEPTIONS:** 

- 1. Foyers, lobbies or reception rooms constructed as required for corridors shall not be construed as intervening rooms.
- 2. In Group R-2 boarding homes and residential treatment facilities licensed by Washington state, seating areas shall be allowed to be open to the corridor provided:
- 2.1 The seating area is constructed as required for the corridor;
- 2.2 The floor is separated into at least two compartments complying with Section 407.4;
- 2.3 Each individual seating area does not exceed 150 square feet, excluding the corridor width;
- 2.4 The combined total space of seating areas per compartment does not exceed 300 square feet, excluding the corridor width;
- 2.5 Combustible furnishings located within the seating area shall be in accordance with the International Fire Code Section 805; and
- 2.6 Emergency means of egress lighting is provided as required by Section 1006 to illuminate the area.

#### WSR 10-22-052 EMERGENCY RULES BUILDING CODE COUNCIL

[Filed October 28, 2010, 12:14 p.m., effective October 28, 2010, 12:14 p.m.]

Effective Date of Rule: Immediately.

Purpose: To extend the emergency declaration filed under WSR 10-13-140 while in regular rule making filed as WSR 10-16-044.

Citation of Existing Rules Affected by this Order: Amending WAC 51-50-0903 and 51-54-0900.

Statutory Authority for Adoption: Chapter 19.27 RCW. 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: This amendment would provide a square foot threshold (5000 sq. ft.) above which sprinklers would be required in Occupancy Group M where upholstered furniture is sold, including mattresses. Under the current provisions there is no threshold; as currently written sprinklers would be required whenever a piece of upholstered furniture is present for sale, regardless of the square footage; this is essentially unenforceable by local officials. This was not intended to apply to all furniture stores, and could result in extreme economic impacts to small businesses, if this editorial error is not corrected. The change would make the code consistent with the most current life safety code for firefighters.

The council has adopted a permanent rule to be effective after the 2011 legislative session per RCW 19.27.074.

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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 1, Repealed 0.

Date Adopted: October 28, 2010.

John C. Cochran Chair

AMENDATORY SECTION (Amending WSR 10-03-097, filed 1/20/10, effective 7/1/10)

WAC 51-50-0903 Section 903—Automatic sprinkler systems.

903.2.1.6 Nightclub. An automatic sprinkler system shall be provided throughout Group A-2 nightclubs as defined in this code. ((An existing nightclub constructed prior to July 1, 2006, shall be provided with automatic sprinklers not later than December 1, 2009.))

**903.2.3 Group E.** An automatic sprinkler system shall be provided for Group E Occupancies.

EXCEPTIONS:

- 1. Portable school classrooms, provided aggregate area of any cluster or portion of a cluster of portable school classrooms does not exceed 5,000 square feet (1465 m²); and clusters of portable school classrooms shall be separated as required by the building code.
- 2. Group E occupancies with an occupant load of 50 or less, calculated in accordance with Table 1004.1.1.
- 903.2.7 Group M. An automatic sprinkler system shall be provided throughout buildings containing a Group M occupancy, where one of the following conditions exists:
- 1. A Group M fire area exceeds 12,000 square feet (1115 m<sup>2</sup>).
- 2. A Group M fire area is located more than three stories above grade plane.
- 3. The combined area of all Group M fire areas on all floors, including any mezzanines, exceeds 24,000 square feet (2230 m<sup>2</sup>).
- 4. Where a Group M occupancy that is used for the display and sale of upholstered furniture or mattresses exceeds 5000 square feet (464 m<sup>2</sup>).
- **903.2.8 Group R.** An automatic fire sprinkler system installed in accordance with Section 903.3 shall be provided throughout all buildings with a Group R fire area.

EXCEPTION:

Group R-1 if all of the following conditions apply:

- 1. The Group R fire area is no more than 500 square feet and is used for recreational use only.
- 2. The Group R fire area is only one story.

- 3. The Group R fire area does not include a basement.
- 4. The Group R fire area is no closer than 30 feet from another structure.
- 5. Cooking is not allowed within the Group R fire area
- 6. The Group R fire area has an occupant load of no more than 8.
- 7. A hand held (portable) fire extinguisher is in every Group R fire area.

AMENDATORY SECTION (Amending WSR 10-03-100, filed 1/20/10, effective 7/1/10)

WAC 51-54-0900 Chapter 9—Fire protection systems.

902.1 Definitions.

ALERT SIGNAL. See Section 402.1.

ALERTING SYSTEM. See Section 402.1.

PORTABLE SCHOOL CLASSROOM. A structure, transportable in one or more sections, which requires a chassis to be transported, and is designed to be used as an educational space with or without a permanent foundation. The structure shall be trailerable and capable of being demounted and relocated to other locations as needs arise.

**903.2.3 Group E.** An automatic sprinkler system shall be provided for Group E Occupancies.

**EXCEPTIONS:** 

- 1. Portable school classrooms, provided aggregate area of any cluster or portion of a cluster of portable school classrooms does not exceed 5,000 square feet (1465 m²); and clusters of portable school classrooms shall be separated as required by the building code.
- 2. Group E Occupancies with an occupant load of 50 or less, calculated in accordance with Table 1004.1.1.
- 903.2.7 Group M. An automatic sprinkler system shall be provided throughout buildings containing a Group M occupancy, where one of the following conditions exists:
- 1. A Group M fire area exceeds 12,000 square feet (1115 m<sup>2</sup>).
- 2. A group M fire area is located more than three stories above grade plane.
- 3. The combined area of all Group M fire areas on all floors, including any mezzanines, exceeds 24,000 square feet (2230 m²).
- 4. Where a Group M occupancy that is used for the display and sale of upholstered furniture or mattresses exceeds 5000 square feet (464 m<sup>2</sup>).
- **903.2.8 Group R.** An automatic sprinkler system installed in accordance with Section 903.3 shall be provided throughout all buildings with a Group R fire area.

EXCEPTION:

Group R-1 if all of the following conditions apply:

- 1. The Group R fire area is no more than 500 square feet and is used for recreational use only.
- 2. The Group R fire area is on only one story.
- 3. The Group R fire area does not include a basement.
- 4. The Group R fire area is no closer than 30 feet from another structure.
- 5. Cooking is not allowed within the Group R fire area.
- 6. The Group R fire area has an occupant load of no more than 8.

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7. A hand held (portable) fire extinguisher is in every Group R fire area.

**903.6.3 Nightclub.** Existing nightclubs constructed prior to July 1, 2006, shall be provided with automatic sprinklers not later than December 1, 2009.

#### SECTION 906—PORTABLE FIRE EXTINGUISHERS

- **906.1 Where required.** Portable fire extinguishers shall be installed in the following locations:
- 1. In new and existing Group A, B, E, F, H, I, M, R-1, R-2, R-4 and S occupancies.
- 2. Within 30 feet (9144 mm) of commercial cooking equipment.
- 3. In areas where flammable or combustible liquids are stored, used or dispensed.
- 4. On each floor of structures under construction, except Group R-3 occupancies, in accordance with Section 1415.1.
- 5. Where required by the sections indicated in Table 906.l.
- 6. Special-hazard areas, including, but not limited to, laboratories, computer rooms and generator rooms, where required by the fire code official.

#### SECTION 907—FIRE ALARM AND DETECTION SYSTEMS

- **[F] 907.2.8 Group R-1.** Fire alarm systems, smoke alarms and carbon monoxide alarms shall be installed in Group R-1 occupancies as required in this section and Section 907.2.8.4.
- **[F] 907.2.8.4. Carbon monoxide alarms.** For new construction, an approved carbon monoxide alarm shall be installed by January 1, 2011, outside of each separate sleeping area in the immediate vicinity of the bedroom in sleeping units. In a building where a tenancy exists, the tenant shall maintain the CO alarm as specified by the manufacturer including replacement of the batteries.
- **[F] 907.2.8.4.1 Existing sleeping units.** Existing sleeping units shall be equipped with carbon monoxide alarms by July 1, 2011.
- **[F] 907.2.8.4.2 Alarm requirements.** Single station carbon monoxide alarms shall be listed as complying with UL 2034 and shall be installed in accordance with this code and the manufacturer's installation instructions.
- **[F] 907.2.9 Group R-2.** Fire alarm systems, smoke alarms and carbon monoxide alarms shall be installed in Group R-2 occupancies as required in Sections 907.2.9.1 through 907.2.9.3.
- **907.2.9.1 Group R-2 boarding homes.** A manual fire alarm system shall be installed in Group R-2 occupancies where the building contains a boarding home licensed by the state of Washington.

EXCEPTION:

In boarding homes licensed by the state of Washington, manual fire alarm boxes in resident sleeping areas shall not be required at exits if located at all constantly attended staff locations, provided such staff locations are visible, continuously accessible, located on each floor, and positioned so no portion of the story exceeds a horizontal travel distance of 200 feet to a manual fire alarm box.

- **[F] 907.2.9.3 Carbon monoxide alarms.** For new construction, an approved carbon monoxide alarm shall be installed by January 1, 2011, outside of each separate sleeping area in the immediate vicinity of the bedroom in dwelling units. In a building where a tenancy exists, the tenant shall maintain the CO alarm as specified by the manufacturer including replacement of the batteries.
- **[F] 907.2.9.3.1 Existing dwelling units.** Existing dwelling units shall be equipped with carbon monoxide alarms by July 1, 2011.
- **[F] 907.2.10 Group R-3.** Carbon monoxide alarms shall be installed in Group R-3 occupancies as required in Sections 907.2.10.1 through 907.2.10.3.
- **[F] 907.2.10.1 Carbon monoxide alarms.** For new construction, an approved carbon monoxide alarm shall be installed by January 1, 2011, outside of each separate sleeping area in the immediate vicinity of the bedroom in dwelling units. In a building where a tenancy exists, the tenant shall maintain the CO alarm as specified by the manufacturer including replacement of the batteries.
- **[F] 907.2.10.2 Existing dwelling units.** Existing dwelling units shall be equipped with carbon monoxide alarms by July 1, 2011.

EXCEPTION: Owner-occupied Group R-3 residences legally occupied prior to July 1, 2010.

- **[F] 907.2.10.3 Alarm requirements.** Single station carbon monoxide alarms shall be listed as complying with UL 2034 and shall be installed in accordance with this code and the manufacturer's installation instructions.
- **909.6.3 Elevator shaft pressurization.** Where elevator shaft pressurization is required to comply with Exception 6 of IBC Section 708.14.1, the pressurization system shall comply with and be maintained in accordance with IBC 708.14.2.
- **909.6.3.1 Activation.** The elevator shaft pressurization system shall be activated by a fire alarm system which shall include smoke detectors or other approved detectors located near the elevator shaft on each floor as approved by the building official and fire code official. If the building has a fire alarm panel, detectors shall be connected to, with power supplied by, the fire alarm panel.
- **909.6.3.2 Power system.** The power source for the fire alarm system and the elevator shaft pressurization system shall be in accordance with Section 909.11.

#### SECTION 915 ALERTING SYSTEMS

**915.1 General.** An approved alerting system shall be provided in buildings and structures as required in chapter 4 and this section, unless other requirements are provided by another section of this code.

EXCEPTION: Approved alerting systems in existing buildings, structures or occupancies.

**915.2 Power source.** Alerting systems shall be provided with power supplies in accordance with Section 4.4.1 of NFPA 72 and circuit disconnecting means identified as "EMERGENCY ALERTING SYSTEM."

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EXCEPTION:

Systems which do not require electrical power to operate.

**915.3 Duration of Operation.** The alerting system shall be capable of operating under nonalarm condition (quiescent load) for a minimum of 24 hours and then shall be capable of operating during an emergency condition for a period of 15 minutes at maximum connected load.

**915.4 Combination system.** Alerting system components and equipment shall be allowed to be used for other purposes.

**915.4.1 System priority.** The alerting system use shall take precedence over any other use.

**915.4.2 Fire alarm system.** Fire alarm systems sharing components and equipment with alerting systems must be in accordance with Section 6.8.4 of NFPA 72.

**915.4.2.1 Signal priority.** Recorded or live alert signals generated by an alerting system that shares components with a fire alarm system shall, when actuated, take priority over fire alarm messages and signals.

**915.4.2.2 Temporary deactivation.** Should the fire alarm system be in the alarm mode when such an alerting system is actuated, it shall temporarily cause deactivation of all fire alarm-initiated audible messages or signals during the time period required to transmit the alert signal.

**915.4.2.3 Supervisory signal.** Deactivation of fire alarm audible and visual notification signals shall cause a supervisory signal for each notification zone affected in the fire alarm system.

**915.5 Audibility.** Audible characteristics of the alert signal shall be in accordance with Section 7.4.1 of NFPA 72 throughout the area served by the alerting system.

EXCEPTION:

Areas served by approved visual or textual notification, where the visible notification appliances are not also used as a fire alarm signal, are not required to be provided with audibility complying with Section 915.6.

**915.6 Visibility.** Visible and textual notification appliances shall be permitted in addition to alert signal audibility.

**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.

## WSR 10-22-053 EMERGENCY RULES DEPARTMENT OF SOCIAL AND HEALTH SERVICES

(Medicaid Purchasing Administration)
[Filed October 28, 2010, 1:27 p.m., effective October 29, 2010]

Effective Date of Rule: October 29, 2010.

Purpose: Under sections 201 and 209, chapter 564, Laws of 2009 (ESHB 1244), for fiscal years 2010 and 2011, funding for dental services is reduced from current levels. The department is amending language in sections in chapter 388-535 WAC in order to meet these targeted budget expenditure levels. The changes include, for clients though age

twenty, reducing coverage of restorative services (crowns) and reducing coverage for repairs to partial dentures; for clients age twenty-one and older, reducing coverage for endodontic treatment and oral and maxillofacial surgery, eliminating coverage for cast metal framework partial dentures, immediate dentures, oral and parenteral conscious sedation, intravenous conscious sedation, and nonintravenous conscious sedation; and limiting coverage of complete dentures and overdentures. For all clients, the department is reducing coverage for partial dentures. These rules may not be applicable to clients of the division of developmental disabilities.

Citation of Existing Rules Affected by this Order: Amending WAC 388-535-1065, 388-535-1084, 388-535-1090, 388-535-1100, 388-535-1261, 388-535-1266, 388-535-1267, 388-535-1269, 388-535-1271, and 388-535-1450.

Statutory Authority for Adoption: RCW 74.08.090.

Other Authority: Sections 201 and 209, chapter 564, Laws of 2009 (ESHB 1244).

Under RCW 34.05.350 the agency for good cause finds that in order to implement the requirements or reductions in appropriations enacted in any budget for fiscal years 2009, 2010, or 2011, which necessitates the need for the immediate adoption, amendment, or repeal of a rule, and that observing the time requirements of notice and opportunity to comment upon adoption of a permanent rule would be contrary to the fiscal needs or requirements of the agency.

Reasons for this Finding: This emergency rule filing is necessary to continue the current emergency rule adopted under WSR 10-14-049 to comply with sections 201 and 209 of the operating budget for fiscal years 2010 and 2011 with respect to dental services. To achieve further budget reductions upon order of the governor for the current fiscal year ending June 30, 2011, the medicaid purchasing administration anticipates making cuts to adult dental services effective January 1, 2011. A CR-101 was filed on October 6, 2010, as WSR 10-20-160 for the permanent rule. The department is currently preparing drafts for the permanent rule to share with providers for their input. Following this, the department plans to formally adopt the permanent 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 10, 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 10, Repealed 0.

Date Adopted: October 27, 2010.

Katherine I. Vasquez Rules Coordinator

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**Reviser's note:** The material contained in this filing exceeded the page-count limitations of WAC 1-21-040 for appearance in this issue of the Register. It will appear in the 10-23 issue of the Register.

### WSR 10-22-055 EMERGENCY RULES BUILDING CODE COUNCIL

[Filed October 28, 2010, 3:13 p.m., effective October 28, 2010, 3:13 p.m.]

Effective Date of Rule: Immediately.

Purpose: To delay the scheduled effective date of the permanent rule-making order filed as WSR 10-03-115 on January 20, 2010, and to amend WSR 10-13-113 filed on June 21, 2010, to delay the effective date of the 2009 Washington State Energy Code from October 29, 2010, to January 1, 2011.

Citation of Existing Rules Affected by this Order: Amending WAC 51-11-0101, 51-11-0105, 51-11-0201, 51-11-0302, 51-11-0303, 51-11-0401, 51-11-0402, 51-11-0501, 51-11-0502, 51-11-0503, 51-11-0504, 51-11-0505, 51-11-0525, 51-11-0527, 51-11-0530, 51-11-0540, 51-11-0541, 51-11-0601, 51-11-0602, 51-11-0603, 51-11-0604, 51-11-0625, 51-11-0701, 51-11-0800, 51-11-0900, 51-11-1001, 51-11-1004, 51-11-1005, 51-11-1006, 51-11-1007, 51-11-1008, 51-11-1009, 51-11-1120, 51-11-1131, 51-11-1132, 51-11-1133, 51-11-1141, 51-11-1310, 51-11-1311, 51-11-1312, 51-11-1313, 51-11-1314, 51-11-1322, 51-11-1323, 51-11-1331, 51-11-1332, 51-11-1334, 51-11-1402, 51-11-1410, 51-11-1411, 51-11-1412, 51-11-1413, 51-11-1414, 51-11-1416, 51-11-1421, 51-11-1423, 51-11-1431, 51-11-1432, 51-11-1433, 51-11-1435, 51-11-1436, 51-11-1437, 51-11-1438, 51-11-1439, 51-11-1440, 51-11-1454, 51-11-1510, 51-11-1512, 51-11-1513, 51-11-1515 [this WAC section does not exist], 51-11-1521, 51-11-1530, 51-11-1531, 51-11-1532, 51-11-99901, 51-11-99902, 51-11-99903[, and 51-11-99904]; and new WAC 51-11-1135, 51-11-1200, 51-11-1444, 51-11-1445, 51-11-1446, and 51-11-1460.

Statutory Authority for Adoption: RCW 19.27A.020, 19.27A.025, and 19.27A.045.

Other Authority: Chapters 19.27 and 34.05 RCW.

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 state building code council (council), based on the following good cause, finds that an emergency affecting the general welfare of the state of Washington exists. The council further finds that a continued delay in implementation of the 2009 edition of the Washington State Energy Code, revised chapter 51-11 WAC, is necessary for the public welfare and that observing the time requirements of notice and opportunity to comment would be contrary to the public interest.

The declaration of emergency affecting the general welfare of the citizens of the state of Washington is based on the following findings:

The Washington State Energy Code 2009 edition ("2009 Energy Code") as adopted by the council pursuant to chapter 34.05 RCW was originally set to become effective on July 1, 2010. A previous emergency rule and permanent rule extended the effective date to October 29, 2010.

The council undertook permanent rule making after filing of the previous emergency rule, and has now adopted a January 1, 2011, effective date for the 2009 Energy Code in a permanent rule. Since the previous emergency rule will expire on October 29, 2010, and the permanent rule will become effective, this emergency rule is needed to continue the delay of the effective date of the 2009 Washington State Energy Code, until the new permanent rule becomes effective on January 1, 2010.

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 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: October 15, 2010.

John C. Cochran Council Chair

## WSR 10-22-065 EMERGENCY RULES DEPARTMENT OF SOCIAL AND HEALTH SERVICES

(Aging and Disability Services Administration) [Filed October 29, 2010, 2:29 p.m., effective November 1, 2010]

Effective Date of Rule: November 1, 2010.

Purpose: Amending rules in chapters 388-71 and 388-106 WAC to implement Governor's Executive Order 10-04 to reduce current year spending by 6.287%. The law creates three classifications of personal care services. Participants will be eligible for either agency managed personal care services or participant managed personal care services based upon their assessed cognitive and decision making abilities. Eligible participants may also choose residential personal care services. The department may authorize exceptions based on the client's health and safety. These rules will not affect the amount, duration, or scope of the personal care services benefit to which the client may be entitled.

Citation of Existing Rules Affected by this Order: Amending WAC 388-71-0500, 388-71-0540, 388-71-0546, 388-106-0010, 388-106-0020, 388-106-0055, 388-106-0600, 388-106-1300, 388-106-1303, and 388-106-1445.

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Statutory Authority for Adoption: RCW 74.08.090, 74.09.520.

Other Authority: Governor's Executive Order 10-04.

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: State law authorizes and directs the governor to implement across-the-board reductions of allotments of appropriations to avoid a projected cash deficit. Governor's Executive Order 10-04 reduces current year spending by 6.287%, and the department is proposing these amendments to stay within the reduced appropriation.

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 0, Repealed 0.

Number of Sections Adopted in Order to Clarify, Streamline, or Reform Agency Procedures: New 2, Amended 10, 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 2, Amended 10, Repealed 0.

Date Adopted: October 27, 2010.

Katherine I. Vasquez Rules Coordinator

**Reviser's note:** The material contained in this filing exceeded the page-count limitations of WAC 1-21-040 for appearance in this issue of the Register. It will appear in the 10-23 issue of the Register.

## WSR 10-22-066 EMERGENCY RULES DEPARTMENT OF SOCIAL AND HEALTH SERVICES

(Aging and Disability Services Administration) [Filed October 29, 2010, 2:31 p.m., effective October 29, 2010, 2:31 p.m.]

Effective Date of Rule: Immediately.

Purpose: The department is amending WAC 388-106-0125 and 388-106-0130 to adjust in-home hours based on individualized CARE assessments related to:

- An elimination of the increase associated with incontinence and/or specialized diet for clients with informal support; and
- An increase that gives back some of the hours reduced July 1, 2009, to all in-home clients.

Citation of Existing Rules Affected by this Order: Amending WAC 388-106-0125 and 388-106-0130.

Statutory Authority for Adoption: RCW 74.08.090, 74.09.520.

Other Authority: Washington state 2009-2011 supplemental operating budget (ESSB 6444).

Under RCW 34.05.350 the agency for good cause finds that in order to implement the requirements or reductions in appropriations enacted in any budget for fiscal years 2009, 2010, or 2011, which necessitates the need for the immediate adoption, amendment, or repeal of a rule, and that observing the time requirements of notice and opportunity to comment upon adoption of a permanent rule would be contrary to the fiscal needs or requirements of the agency.

Reasons for this Finding: These adjustments are necessary to address the state's revenue shortfall as outlined in the 2009-2011 supplemental operating budget (ESSB 6444). This CR-103E continues emergency rules filed as WSR 10-14-055 while the department completes adoption of permanent rules. A CR-101 was filed as WSR 10-14-056, and the department is currently in the process of filing a CR-102 Proposed rule making.

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: October 26, 2010.

Katherine I. Vasquez Rules Coordinator

AMENDATORY SECTION (Amending WSR 10-11-050, filed 5/12/10, effective 6/12/10)

WAC 388-106-0125 If I am age twenty-one or older, how does CARE use criteria to place me in a classification group for in-home care? CARE uses the criteria of cognitive performance score as determined under WAC 388-106-0090, clinical complexity as determined under WAC 388-106-0095, mood/behavior and behavior point score as determined under WAC 388-106-0100, ADLS as determined under WAC 388-106-0105, and exceptional care as determined under WAC 388-106-0110 to place you into one of the following seventeen in-home groups. CARE classification is determined first by meeting criteria to be placed into a group, then you are further classified based on ADL score or behavior point score into a classification sub-group following a classification path of highest possible base hours to lowest qualifying base hours.

(1) If you meet the criteria for exceptional care, then CARE will place you in **Group E.** CARE then further classifies you into:

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- (a) **Group E High** with ((416)) 420 base hours if you have an ADL score of 26-28; or
- (b) **Group E Medium** with ((346)) 349 base hours if you have an ADL score of 22-25.
- (2) If you meet the criteria for clinical complexity and have cognitive performance score of 4-6 or you have cognitive performance score of 5-6, then you are classified in **Group D** regardless of your mood and behavior qualification or behavior points. CARE then further classifies you into:
- (a) **Group D High** with ((277)) 279 base hours if you have an ADL score of 25-28; or
- (b) **Group D Medium-High** with ((234)) 236 base hours if you have an ADL score of 18-24; or
- (c) **Group D Medium** with ((<del>185</del>)) <u>187</u> base hours if you have an ADL score of 13-17; or
- (d) **Group D Low** with ((138)) <u>139</u> base hours if you have an ADL score of 2-12.
- (3) If you meet the criteria for clinical complexity and have a CPS score of less than 4, then you are classified in **Group C** regardless of your mood and behavior qualification or behavior points. CARE then further classifies you into:
- (a) **Group C High** with ((<del>194</del>)) <u>196</u> base hours if you have an ADL score of 25-28; or
- (b) **Group C Medium-High** with ((1774)) 176 base hours if you have an ADL score of 18-24; or
- (c) **Group C Medium** with ((<del>132</del>)) <u>133</u> base hours if you have an ADL score of 9-17; or
- (d) **Group** C **Low** with ((87)) <u>88</u> base hours if you have an ADL score of 2-8.
- (4) If you meet the criteria for mood and behavior qualification and do not meet the classification for C, D, or E groups, then you are classified into **Group B.** CARE further classifies you into:
- (a) **Group B High** with ((1447)) <u>149</u> base hours if you have an ADL score of 15-28; or
- (b) **Group B Medium** with ((82)) 83 base hours if you have an ADL score of 5-14; or
- (c) **Group B Low** with ((47)) <u>48</u> base hours if you have an ADL score of 0-4; or
- (5) If you meet the criteria for behavior points and have a CPS score of greater than 2 and your ADL score is greater than 1, and do not meet the classification for C, D, or E

- groups, then you are classified in **Group B.** CARE further classifies you into:
- (a) **Group B High** with ((1447)) 149 base hours if you have a behavior point score 12 or greater; or
- (b) **Group B Medium-High** with ((101)) <u>102</u> base hours if you have a behavior point score greater than 6; or
- (c) **Group B Medium** with ((82)) 83 base hours if you have a behavior point score greater than 4; or
- (d) **Group B Low** with ((47)) <u>48</u> base hours if you have a behavior point score greater than 1.
- (6) If you are not clinically complex and your CPS score is less than 5 and you do not qualify under either mood and behavior criteria, then you are classified in **Group A.** CARE further classifies you into:
- (a) **Group A High** with ((74)) 72 base hours if you have an ADL score of 10-28; or
- (b) **Group A Medium** with ((56)) <u>57</u> base hours if you have an ADL score of 5-9; or
- (c) **Group A Low** with ((26)) 27 base hours if you have an ADL score of 0-4.

AMENDATORY SECTION (Amending WSR 08-23-011, filed 11/6/08, effective 12/7/08)

- WAC 388-106-0130 How does the department determine the number of hours I may receive for in-home care? (1) The department assigns a base number of hours to each classification group as described in WAC 388-106-0125.
- (2) The department will deduct from the base hours to account for informal supports, as defined in WAC 388-106-0010, or other paid services that meet some of an individual's need for personal care services, including adult day health, as follows:
- (a) The CARE tool determines the adjustment for informal supports by determining the amount of assistance available to meet your needs, assigns it a numeric percentage, and reduces the base hours assigned to the classification group by the numeric percentage. The department has assigned the following numeric values for the amount of assistance available for each ADL and IADL:

Meds	Self Performance	Status	Assistance Available	Value Percentage
Self administration of medications	Rules for all codes apply except independent is not counted	Unmet	N/A	1
		Met	N/A	0
		Decline	N/A	0
		Partially met	<1/4 time	.9
			1/4 to 1/2 time	.7
			1/2 to 3/4 time	.5
			>3/4 time	.3

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Unscheduled ADLs	Self Performance	Status	Assistance Available	Value Percentage
Bed mobility, transfer,	Rules apply for all codes except: Did not occur/client not able and Did not occur/no provider = 1; Did not occur/client declined and independent are not counted.	Unmet	N/A	1
walk in room, eating, toilet use		Met	N/A	0
		Decline	N/A	0
		Partially met	<1/4 time	.9
			1/4 to 1/2 time	.7
			1/2 to 3/4 time	.5
			>3/4 time	.3
			Assistance	Value
Scheduled ADLs	Self Performance	Status	Available	Percentage
Dressing,	Rules apply for all codes except: Did not	Unmet	N/A	1
personal hygiene,	occur/client not able and Did not	Met	N/A	0
bathing	occur/no provider = 1;	Decline	N/A	0
	Did not occur/client declined and independent are not counted.		<1/4 time	.75
	pendent are not counted.	Partially met	1/4 to 1/2 time	.55
		raitiany met	1/2 to 3/4 time	.35
			>3/4 time	.15
			Assistance	Value
IADLs	Self Performance	Status	Available	Percentage
Meal preparation,	Rules for all codes apply except independent is not counted.	Unmet	N/A	1
Ordinary housework, Essential shopping		Met	N/A	0
		Decline	N/A	0
		Partially met	<1/4 time	.3
			1/4 to 1/2 time	.2
			1/2 to 3/4 time	.1
			>3/4 time	.05
			Assistance	Value
IADLs	Self Performance	Status	Available	Percentage
Travel to medical	Rules for all codes apply except independent is not counted.	Unmet	N/A	1
		Met	N/A	0
		Decline	N/A	0
		Partially met	<1/4 time	.9
			1/4 to 1/2 time	.7
			1/2 to 3/4 time	.5
			>3/4 time	.3

#### Key:

- (b) To determine the amount of reduction for informal support, the value percentages are totaled and divided by the number of qualifying ADLs and IADLs needs. The result is value A. Value A is then subtracted from one. This is value B. Value B is divided by three. This is value C. Value A and Value C are summed. This is value D. Value D is multiplied by the "base hours" assigned to your classification group and the result is the number of in-home hours reduced for informal supports.
- (3) Also, the department will adjust in-home base hours when:
- (a) There is more than one client receiving ADSA-paid personal care services living in the same household, the status under subsection (2)(a) of this section must be met or partially met for the following IADLs:
  - (i) Meal preparation;
  - (ii) Housekeeping;
  - (iii) Shopping; and
  - (iv) Wood supply.
- (b) You are under the age of eighteen, your assessment will be coded according to age guidelines codified in WAC 388-106-0213.

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<sup>&</sup>gt; means greater than

<sup>&</sup>lt; means less than

- (4) ((In addition to any determination of unmet need in (2)(a) when you are not affected by (3) above, the department will score the status for meal preparation as unmet when you adhere to at least one of the following special diets:
  - (a) ADA (diabetes);
  - (b) Autism diet;
  - (c) Calorie reduction;
  - (d) Low sodium;
  - (e) Mechanically altered;
  - (f) Planned weight change program;
  - (g) Renal diet; or

- (h) Needs to receive nutrition through tube feeding or receives greater than twenty-five percent of calories through tube or parenteral feeding.
- (5) In addition to any determination of unmet need in (2)(a) when you are not affected by (3) above, the department will score the status for housework as unmet when you are incontinent of bladder or bowel, documented as:
  - (a) Incontinent all or most of the time:
  - (b) Frequently incontinent; or
  - (c) Occasionally incontinent.
- (6))) After deductions are made to your base hours, as described in subsections (2) and (3), the department may add on hours based on your living environment:

Condition	Status	Assistance Available	Add On Hours
Offsite laundry facilities, which means the client does not have facilities in own home and the caregiver is not available to perform any other personal or household tasks while laundry is done.	N/A	N/A	8
Client is >45 minutes from essential services (which	Unmet	N/A	5
means he/she lives more than 45 minutes one-way from	Met	N/A	0
a full-service market).	Partially met	<1/4 time	5
		between 1/4 to 1/2 time	4
		between 1/2 to 3/4 time	2
		>3/4 time	2
Wood supply used as sole source of heat.	Unmet	N/A	8
	Met	N/A	0
	Declines	N/A	0
	Partially met	<1/4 time	8
		between 1/4 to 1/2 time	6
		between 1/2 to 3/4 time	4
		>3/4 time	2

- ((<del>(7)</del>)) (5) In the case of New Freedom consumer directed services (NFCDS), the department determines hours as described in WAC 388-106-1445.
- (((8))) (6) The result of actions under subsections (2), (3), and (4)((, (5) and (6))) is the maximum number of hours that can be used to develop your plan of care. The department must take into account cost effectiveness, client health and safety, and program limits in determining how hours can be used to meet your identified needs. In the case of New Freedom consumer directed services (NFCDS), a New Freedom spending plan (NFSP) is developed in place of a plan of care.
- (((9))) (7) You and your case manager will work to determine what services you choose to receive if you are eligible. The hours may be used to authorize:
- (a) Personal care services from a home care agency provider and/or an individual provider.
- (b) Home delivered meals (i.e. a half hour from the available hours for each meal authorized).
- (c) Adult day care (i.e. a half hour from the available hours for each hour of day care authorized).
- (d) A home health aide if you are eligible per WAC 388-106-0300 or 388-106-0500.
- (e) A private duty nurse (PDN) if you are eligible per WAC 388-71-0910 and 388-71-0915 or WAC 388-551-3000

- (i.e. one hour from the available hours for each hour of PDN authorized).
- (f) The purchase of New Freedom consumer directed services (NFCDS).

# WSR 10-22-068 EMERGENCY RULES DEPARTMENT OF SOCIAL AND HEALTH SERVICES

(Aging and Disability Services Administration) [Filed October 29, 2010, 2:34 p.m., effective October 29, 2010, 2:34 p.m.]

Effective Date of Rule: Immediately.

Purpose: The department is filing a second emergency adoption because the permanent adoption of the rules will not be complete by the expiration date (October 28, 2010) of the initial emergency adoption. The department has filed the proposed rules on October 12, 2010, with the code reviser. The rules will be published on November 17, 2010, in WSR 10-20-171. A public hearing will occur on December 7, 2010. The legislature in ESSB 6872 simplified chapter 74.46 RCW by repealing numerous section[s] and granting the

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department the authority to incorporate the detail of the repealed sections in chapter 388-96 WAC.

The amendments or adoptions to chapter 388-96 WAC to implement ESSB 6872 include but are not limited to the following: (1) The effect of bed banking on rates; (2) financing allowance component rate allocation minimum facility occupancy of licensed beds, regardless of how many beds are set up or in use at eighty-five percent for essential community providers, ninety percent for small nonessential community providers, and at ninety-two percent for large nonessential community providers; (3) to increase the categories for exceptional care rates; and (4) adopt new rules for pay-for-performance supplemental rates.

The department will amend or adopt new rules to implement ESSB 6444, section 206 that include but are not limited to WAC 388-96-766(3) to implement no rate add-ons to nursing facility medicaid payment rates for capital improvements not requiring a certificate of need and a certificate of capital authorization for fiscal year 2011.

On September 2, 2009, in WSR 09-17-003, http://apps. leg.wa.gov/documents/laws/wsr/2009/17/09-17-003.htm, the department indicated specific sections of chapter 388-96 WAC that it would amend. Also, the department stated that all sections may be amended to clarify regulations by codifying current policies and practices and editing previous codifications for substance and form.

Citation of Existing Rules Affected by this Order: Repealing WAC 388-96-202, 388-96-740, 388-96-741, 388-96-742 and 388-96-749; and amending WAC 388-96-010, 388-96-108, 388-96-217, 388-96-218, 388-96-366, 388-96-384, 388-96-534, 388-96-535, 388-96-536, 388-96-542, 388-96-559, 388-96-561, 388-96-565, 388-96-585, 388-96-708, 388-96-709, 388-96-747, 388-96-748, 388-96-758, 388-96-759, 388-96-766, 388-96-776, 388-96-781, 388-96-782, 388-96-802, 388-96-803, 388-96-901, and 388-96-904.

Statutory Authority for Adoption: Chapter 74.46 RCW as amended by chapter 34, Laws of 2010, ESSB 6444 Biennial Appropriations Act and by chapter 37, Laws of 2010, ESSB 6872.

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; and that in order to implement the requirements or reductions in appropriations enacted in any budget for fiscal years 2009, 2010, or 2011, which necessitates the need for the immediate adoption, amendment, or repeal of a rule, and that observing the time requirements of notice and opportunity to comment upon adoption of a permanent rule would be contrary to the fiscal needs or requirements of the agency.

Reasons for this Finding: ESSB 6872, section 23 and ESSB 6444, section 958.

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 28, Amended 28, Repealed 5.

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: October 22, 2010.

Katherine I. Vasquez Rules Coordinator

**Reviser's note:** The material contained in this filing exceeded the page-count limitations of WAC 1-21-040 for appearance in this issue of the Register. It will appear in the 10-24 issue of the Register.

### WSR 10-22-069 EMERGENCY RULES DEPARTMENT OF SOCIAL AND HEALTH SERVICES

(Aging and Disability Services Administration)
[Filed October 29, 2010, 2:35 p.m., effective October 29, 2010, 2:35 p.m.]

Effective Date of Rule: Immediately.

Purpose: The department is adding new WAC 388-71-06020 through 388-71-06420. As a result of the 2009-2011 supplemental operating budget (ESSB 6444), the home care quality authority is no longer funded, and the home care referral registry program has moved to the aging and disability services administration's home and community services division effective July 1, 2010.

Statutory Authority for Adoption: RCW 74.08.090, 74.09.520.

Other Authority: Washington state 2009-2011 supplemental operating budget (ESSB 6444).

Under RCW 34.05.350 the agency for good cause finds that in order to implement the requirements or reductions in appropriations enacted in any budget for fiscal years 2009, 2010, or 2011, which necessitates the need for the immediate adoption, amendment, or repeal of a rule, and that observing the time requirements of notice and opportunity to comment upon adoption of a permanent rule would be contrary to the fiscal needs or requirements of the agency.

Reasons for this Finding: These amendments are necessary to address the state's revenue shortfall as outlined in the 2009-2011 supplemental operating budget (ESSB 6444). The home care quality authority is no longer funded, and the home care referral registry moved to the home and community services division effective July 1, 2010. This CR-103E continues emergency rules filed as WSR 10-14-051 while the department completes adoption of permanent rules. A CR-101 was filed as WSR 10-14-052, and the department is currently in the process of filing a CR-102 Proposed rule making.

Number of Sections Adopted in Order to Comply with Federal Statute: New 23, Amended 0, Repealed 0; Federal Rules or Standards: New 0, Amended 0, Repealed 0; or

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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 23, Amended 0, Repealed 0.

Date Adopted: October 26, 2010.

Katherine I. Vasquez Rules Coordinator

#### Referral registry

#### **NEW SECTION**

WAC 388-71-06020 What is the purpose of WAC 388-71-06020 through 388-71-06420? The purpose of this chapter is to ensure compliance by the department with the provisions of RCW 74.39.250. The department is authorized to adopt rules under the provisions of the Administrative Procedure Act, chapter 34.05 RCW.

#### **NEW SECTION**

WAC 388-71-06040 What definitions apply to WAC 388-71-06020 through 388-71-06420? The following definitions apply to this chapter:

- "AAA" refers to the local area agency on aging.
- "ALJ" refers to administrative law judge.
- "Consumer/employer" refers to an adult or child with functional or developmental disabilities who qualifies for and uses personal care or respite care paid for through medicaid or state-only funds.
- "Consumer representative" refers to an individual who is acting on behalf of the consumer/employer.
- "Department" means the department of social and health services.
- "DSHS" refers to the department of social and health services.
- "Emergency provider" means an individual provider who is employed as a back-up for a provider who did not show up or who was unable to work due to unexpected circumstances.
  - "Employer" refers to the consumer.
  - "HCRR" refers to the home care referral registry.
- "Home care referral registry operations" refers to the activities carried out at the local level to recruit and register individual providers or prospective individual providers for the referral registry and assist consumers to utilize the referral registry to find qualified individual providers.
- "Individual provider" means a person, regardless of relationship, including a personal aide working for a consumer under self-directed care, who has a contract with the department of social and health services to provide personal

care or respite care services to adults or children with functional or developmental disabilities and is reimbursed for those services through medicaid or state-only funding.

"IP" refers to an individual provider.

"Malfeasance" means any unlawful act committed by the provider, whether in the course of employment or otherwise.

"Mandatory reporter" is an employee of DSHS; law enforcement officer; social worker; professional school personnel; individual provider; an employee of a facility; an operator of a facility; an employee of a social service, welfare, mental health, adult day health, adult day care, home health, home care, or hospice agency; county coroner or medical examiner; Christian science practitioner; or health care provider subject to chapter 18.130 RCW.

"Misfeasance" means performance of a workplace duty in an improper manner; including events which jeopardize the health and safety of persons, unresolved patter of performance, issues related to truth or dishonesty, including failure to report a criminal conviction.

"OAH" refers to the office of administrative hearings.

"Prospective individual provider" refers to someone who is seeking employment with a consumer/employer.

"Provider" means an individual provider.

"Referral registry" is a data base that is designed to assist consumers with finding individual providers and to assist individual providers to find employment.

"Respite provider" means an individual provider who is employed on a prearranged short-term basis to fill in for a routine caregiver.

"Routine provider" means an individual provider who is employed on a regularly scheduled basis.

#### **NEW SECTION**

WAC 388-71-06060 What is the purpose of the referral registry? The purpose of the referral registry was to increase consumer/employer choice while providing assistance in finding individual providers and prospective individual providers. In addition, the referral registry:

- (1) Takes into account the consumer/employer needs and preferences when identifying potential individual providers;
- (2) Provides for reasonable standards of accountability providers and prospective individual providers listed through the registry;
- (3) Is voluntary for individual providers and prospective individual providers and consumers/employers;
- (4) Promotes job opportunities for individual providers and prospective individual providers;
- (5) Provides access to the data base for consumer/ employers who want to query a referral independently; and
- (6) Increases a consumer/employer's choice of individual providers and prospective individual providers via an established pool of available individual providers and prospective individual providers on the registry.

#### **NEW SECTION**

WAC 388-71-06080 Who is eligible to request a referral from the referral registry? The following people are eligible to request a referral from the referral registry:

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- (1) Consumer/employers who are adults or children with functional or developmental disabilities who qualify for and use personal care or respite care paid for through medicaid or state-only funds.
- (2) People who are authorized to request a referral on behalf of a consumer including family members, area agency on aging case managers, department social workers and/or a consumer representative.

#### **NEW SECTION**

- WAC 388-71-06100 What is the difference between an individual provider and a prospective individual provider? The difference between an individual provider and a prospective individual provider is
- (1) An individual provider is someone who has signed a department contract.
- (2) A prospective individual provider is someone who is seeking employment with a consumer/employer and who has not yet signed a DSHS contract.

#### **NEW SECTION**

- WAC 388-71-06120 What qualifies an individual provider or prospective individual provider to be on the referral registry? In order for an individual provider or prospective individual provider to be qualified to be on the referral registry, the individual provider or prospective individual provider must:
- (1) Prior to January 1, 2012 satisfactorily complete a Washington state patrol background check and not be convicted of a disqualifying crime or negative action based on the applicable department list of disqualifying crimes and negative actions; and
- (2) Complete an FBI fingerprint-based background check if the person has lived in the state of Washington less than three consecutive years immediately before the background check. An individual provider or prospective individual provider that has lived in Washington state less than three consecutive years may be included on the referral registry for a one hundred twenty-day provisional period as allowed by law or program rules when:
- (a) A fingerprint-based background check is pending; and
- (b) The individual provider or prospective individual provider is not disqualified based on the immediate result of the Washington state patrol background check.
- (3) Not be listed on any long-term care abuse and neglect registry used by the department;
  - (4) Be eighteen years of age or older;
- (5) Provide a valid Washington state driver's license or other valid picture identification;
- (6) Have a Social Security card or proof of authorization to work in the United States as required on the employment verification form; and
- (7) Comply with requirements listed in WAC 388-71-06180 and other applicable requirements in chapter 388-71 WAC
- (8) Effective January 1, 2012, be screened through the department's fingerprint-based background check, as required by RCW 74.39A.055.

#### **NEW SECTION**

- WAC 388-71-06130 What information will be considered cause for denying an individual provider or prospective individual provider placement on the referral registry? An individual provider or prospective individual provider will be denied placement on the referral registry when:
- (1) A background check that reveals a disqualifying crime or negative action listed on an applicable department list of disqualifying crimes and/or negative actions;
- (2) He or she is listed on any state abuse or neglect registry;
- (3) He or she is subject to a current and valid protective order that was issued in the state of Washington barring or restricting contact with children, vulnerable adults or persons with disabilities;
- (4) The department individual provider contract is denied; or
  - (5) He or she is found ineligible per WAC 388-71-0540.

#### **NEW SECTION**

- WAC 388-71-06135 What information may be considered cause for denying an individual provider or prospective individual provider placement on the referral registry? The following information may be considered cause for denying an individual provider or prospective individual provider placement on the referral registry:
- (1) He or she failed to disclose pending charges, criminal convictions, or negative actions on background authorization form:
- (2) The department has a reasonable, good faith belief that he or she is unable to meet the care needs of consumers;
- (3) The background check reveals an offense or pattern of offenses, not listed on the applicable list of disqualifying crimes, that the department determines may put consumers at risk; or
  - (4) Information found in WAC 388-71-0543.

#### **NEW SECTION**

- WAC 388-71-06140 How does an individual provider or prospective individual provider apply to be on the referral registry? In order for an individual provider or prospective individual provider to apply to be on the registry, he or she must:
- (1) Contact their local home care referral registry operations:
  - (2) Request and complete an application packet; and
- (3) Meet the qualifications specified in WAC 388-71-06120.

#### **NEW SECTION**

WAC 388-71-06160 Does an individual provider or prospective individual provider have any ongoing responsibilities in order to stay on the referral registry? (1) In order for an individual provider or prospective individual provider to stay on the registry, he or she must:

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- (a) Contact the referral registry office once a month to verify that the information in the system is accurate and up-to-date; and
- (b) Successfully complete the criminal history background check process every twelve months, described in WAC 388-71-06130 and 388-71-0513.
- (2) Failure to comply with ongoing responsibilities will result in placing the individual provider or prospective individual provider in an "inactive" status. The provider will not be referred to a consumer/employer when in "inactive" status.

#### **NEW SECTION**

WAC 388-71-06180 Are there any training requirements for being on the referral registry? In order for an individual provider or prospective individual provider to be listed on the referral registry, he or she must complete the "Becoming a Professional IP" training prior to being referred to a consumer, unless the person has already worked as an individual provider for more than three months under DSHS contract. All other mandatory training requirements for long-term care workers per chapter 388-71 WAC are applicable.

#### **NEW SECTION**

WAC 388-71-06200 Will an individual provider or prospective individual provider be removed from the referral registry? An individual provider or prospective individual provider will be removed from the referral registry when he or she:

- (1) Fails to meet the qualifications identified in WAC 388-71-06120 and 388-71-06180;
- (2) Committed misfeasance in the performance of his or her duties as an individual provider;
- (3) Committed malfeasance in the performance of his or her duties as an individual provider;
- (4) Requests that their name be removed from the registry;
- (5) Has his or her individual provider contract with the department terminated for cause;
- (6) Has a cause for denial, as listed in WAC 388-71-06130, exists; or
- (7) Fails to meet qualifications found in WAC 388-71-0510 and 388-71-0540.

#### **NEW SECTION**

WAC 388-71-06220 What is the procedure for removing an individual provider or prospective individual provider from the referral registry? The procedure for removing an individual provider or prospective individual provider from the referral registry is as follows:

The department and/or its designee, will review all complaints and disqualification information received and:

- (1) For those complaints that fall under the legal jurisdiction of law enforcement or adult protective services (APS) or child protective services (CPS), an immediate referral will be made to the appropriate agency.
- (a) The department may initiate an emergency proceeding to inactivate the individual provider or prospective individual provider on the registry pending the investigation.

- (b) If APS, CPS, and/or law enforcement declines the referral, the complaint will proceed to assessment, recommendation and decision.
- (c) If APS, CPS, and/or law enforcement accepts the complaint, then action beyond the emergency adjudicative process per RCW 34.05.479 will be stayed pending APS, CPS, and/or law enforcement action.
- (2) For those complaints not forwarded to APS, CPS, or law enforcement, the department will conduct an internal assessment.
- (a) Upon assessment, a decision will be made and notification will be sent, in writing to the individual provider or prospective individual provider.
- (b) The individual provider or prospective individual provider has the right to appeal an adverse decision.
- (c) The appeal must be sent in writing to the office of administrative hearings (OAH) as designated on the formal notice within twenty-eight days of the date the formal notice was mailed by the department.
- (d) OAH will schedule the hearing and notify interested parties.
- (e) An administrative law judge (ALJ) from OAH will act as presiding officer for the adjudicative proceeding as provided in RCW 34.05.425 (1)(c).
  - (f) The ALJ will render an initial decision.
- (g) The initial decision will be reviewed and final agency action will be taken by the department board of appeals, either adopting, modifying, or reversing the initial decision.
- (h) The final order is the final department action and will be provided to all interested parties and to the individual provider or prospective individual provider along with information regarding the right to seek judicial review in superior court when applicable.
- (i) The final order will include, or incorporate by reference to the initial order, all matters required by RCW 34.05.461(3).

#### **NEW SECTION**

WAC 388-71-06240 What is the procedure for the denial of an individual provider or prospective individual provider's application to be on the referral registry? Upon receipt of an individual provider or prospective individual provider's application to be on the referral registry, the department will utilize the following procedure to determine whether the individual provider or prospective individual provider meets the minimum qualifications and whether he or she will be able to appropriately meet the care needs of consumers:

- (1) An internal assessment will be conducted, a decision will be made and notification will be sent, in writing to the individual provider or prospective individual provider.
- (2) The individual provider or prospective individual provider has the right to appeal an adverse decision.
- (3) The appeal must be sent in writing to the office of administrative hearings (OAH) as designated on the formal notice within twenty-eight days of the date the formal notice was mailed by DSHS.
- (4) OAH will schedule the hearing and notify interested parties.

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- (5) An administrative law judge from OAH will act as presiding officer for the adjudicative proceeding as provided in RCW 34.05.425 (1)(c).
  - (6) The ALJ will render an initial decision.
- (7) The initial decision will be reviewed and final department action will be taken by the department board of appeals, either adopting, modifying, or reversing the initial decision.
- (8) The final order is the final department action and will be provided to all interested parties and to the individual provider or prospective individual providers along with information regarding the right to seek judicial review in superior court when applicable.
- (9) The final order will include, or incorporate by reference to the initial order, all matters required by RCW 34.05.-461(3).

#### **NEW SECTION**

WAC 388-71-06260 Who must be notified if a complaint is received about an individual provider? If, in the course of carrying out its duties, the department or its designee, receives a complaint regarding the services being provided by an individual provider, the department, or its designee, must notify the relevant area agency on aging case manager or DSHS social worker regarding such concerns per RCW 74.39A.250 (1)(h).

#### **NEW SECTION**

WAC 388-71-06280 Are referral registry staff considered mandatory reporters? Any department staff, or subcontracted staff working for the referral registry are considered mandatory reporters.

#### **NEW SECTION**

WAC 388-71-06300 What is reasonable cause for mandatory reporting? RCW 74.34.035 outlines reasonable cause for mandatory reporting.

#### **NEW SECTION**

WAC 388-71-06320 Does an individual provider or prospective individual provider have the right to appeal being removed from the referral registry? The individual provider or prospective individual provider or the consumer/employer, to whom the individual provider is providing services, has the right to appeal when he or she is being removed from the referral registry, as provided in RCW 74.39A.250 (1)(e) and WAC 388-71-06240.

A letter will be sent notifying the individual provider or prospective individual provider that he or she is being removed from the registry and will include information pertaining to the appeal and hearing process.

#### **NEW SECTION**

WAC 388-71-06340 How does a consumer/employer apply to use the referral registry services? In order to use the referral registry, a consumer/employer or consumer representative must complete the registration process. The reg-

istration process conducted by the local home care referral registry operations must confirm that the consumer/employer is qualified to receive personal care or respite care paid for through medicaid or state-only funds.

#### **NEW SECTION**

WAC 388-71-06360 How does a consumer/employer obtain a list of names from the referral registry? In order for a consumer/employer or consumer representative to obtain a referral list of names, he or she must complete and submit a request application to the local referral registry. The completed application may indicate the days and times an individual provider is needed, the personal care tasks that need to be performed, and any preferences the consumer/employer may have. Upon completion of the application, a registry coordinator will conduct a query that will generate a list of names that best match the consumer/employer's specific criteria. The list will be given to the consumer/employer via mail, phone, fax, or email, depending on the consumer/employer's preference, within a reasonable time.

Upon successful submission of a request application, a consumer/employer or consumer representative may request a user name and password to access the registry independently to generate a list of names.

#### **NEW SECTION**

WAC 388-71-06380 Who hires an individual provider or prospective individual provider? It is the consumer/employer or consumer representative's responsibility to interview, screen, hire, supervise, and terminate an individual provider or prospective individual provider.

#### **NEW SECTION**

WAC 388-71-06400 Does a consumer/employer that wants his or her individual provider to be paid through medicaid or public funding from DSHS need to gain approval from his/her case manager, social worker or nurse? A consumer/employer that wants his/her individual provider to be paid through medicaid or public funding from the department must be approved by his/her case manager, social worker or nurse. Pursuant to WAC 388-71-0540 through 388-71-0551, DSHS or the AAA may deny payment to the client's choice of an individual provider or prospective individual provider when:

- (1) The individual provider or prospective individual does not meet the requirements to contract with DSHS; or
- (2) The case manager has a reasonable, good faith belief that the person will be unable to appropriately meet the consumer/employer needs.

#### **NEW SECTION**

WAC 388-71-06420 How can a consumer/employer use the referral registry to get an individual provider in an emergency or as a critical personal care back-up? In order to obtain an emergency or critical personal care back-up referral, a consumer/employer must complete an application with the referral registry office. Registry applications

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can be obtained by contacting the local referral registry. Although a consumer/employer must complete the application process, he/she is not required to have previously used the registry prior to requesting a back-up referral.

## WSR 10-22-071 EMERGENCY RULES DEPARTMENT OF FISH AND WILDLIFE

[Order 10-288—Filed October 29, 2010, 3:34 p.m., effective November 5, 2010, 12:01 p.m.]

Effective Date of Rule: November 5, 2010, 12:01 p.m. Purpose: Amend personal use fishing rules.

Citation of Existing Rules Affected by this Order: Repealing WAC 220-56-36000J; and amending WAC 220-56-360.

Statutory Authority for Adoption: RCW 77.12.047 and 77.04.020.

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: Survey results show that adequate clams are available for harvest in Razor Clam Areas 1, 2 and those portions of Razor Clam Area 3 opened for harvest. Washington department of health has certified clams from these beaches to be safe for human consumption. There is insufficient time to adopt 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: October 29, 2010.

Philip Anderson Director

#### **NEW SECTION**

WAC 220-56-36000J Razor clams—Areas and seasons. Notwithstanding the provisions of WAC 220-56-360, it is unlawful to dig for or possess razor clams taken for personal use from any beach in Razor Clam Areas 1, 2, or 3, except as provided for in this section:

- 1. Effective 12:01 p.m. November 5 through 11:59 p.m. November 6, 2010, razor clam digging is allowed in Razor Clam Area 1. Digging is allowed from 12:01 p.m. to 11:59 p.m. each day only.
- 2. Effective 12:01 p.m. November 5 through 11:59 p.m. November 8, 2010, razor clam digging is allowed in Razor Clam Area 2. Digging is allowed from 12:01 p.m. to 11:59 p.m. each day only.
- 3. Effective 12:01 p.m. November 5 through 11:59 p.m. November 6, 2010, razor clam digging is allowed in that portion of Razor Clam Area 3 that is between the Grays Harbor North Jetty and the southern boundary of the Quinault Indian Nation (Grays Harbor County) and that portion of Razor Clam Area 3 that is between Olympic National Park South Beach Campground access road (Kalaloch area, Jefferson County) and Browns Point (Kalaloch area, Jefferson County). Digging is allowed from 12:01 p.m. to 11:59 p.m. each day only.
- 4. It is unlawful to dig for razor clams at any time in Long Beach, Twin Harbors Beach or Copalis Beach Clam sanctuaries defined in WAC 220-56-372.

#### REPEALER

The following section of the Washington Administrative Code is repealed effective 12:01 a.m. November 9, 2010:

WAC 220-56-36000J Razor clams—Areas and seasons.

#### WSR 10-22-072 EMERGENCY RULES DEPARTMENT OF FISH AND WILDLIFE

[Order 10-289—Filed October 29, 2010, 3:34 p.m., effective November 1, 2010]

Effective Date of Rule: November 1, 2010.

Purpose: Amend personal use fishing rules.

Citation of Existing Rules Affected by this Order: Amending WAC 232-28-619.

Statutory Authority for Adoption: RCW 77.12.047 and 77.04.020.

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: As of October 22, only seventy-five hatchery coho have returned to the Clear Creek salmon hatchery. Approximately seven hundred adults are needed to meet the program goal. There is insufficient time to adopt 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.

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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 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 29, 2010.

Philip Anderson Director

#### **NEW SECTION**

WAC 232-28-61900Y Exceptions to statewide rules—Nisqually River. Notwithstanding the provisions of WAC 232-28-619, effective 12:01 a.m. November 1, 2010, until further notice, it is unlawful to retain coho salmon caught in those waters of the Nisqually River from the mouth to military tank crossing bridge (located one mile upstream of the mouth of Muck Creek).

### WSR 10-22-097 EMERGENCY RULES DEPARTMENT OF LICENSING

[Filed November 2, 2010, 10:14 a.m., effective November 2, 2010, 10:14 a.m.]

Effective Date of Rule: Immediately.

Purpose: To require professional boxing, martial arts and wrestling promoters to provide an ambulance or paramedical unit to be equipped with transport and resuscitation capabilities.

Citation of Existing Rules Affected by this Order: Amending WAC 36-12-360 and 36-13-110.

Statutory Authority for Adoption: RCW 67.08.017, 43.24.023.

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: Boxing, martial arts, and wrestling participants are at serious risk of being injured during an event, including death. Currently RCW 67.08.160 requires a paramedical unit or ambulance to be on site at the event location. However, there is no requirement that they have to be equipped with transport and resuscitation capabilities. In a recent martial arts event a promoter provided an ambulance with only one attendant to drive and no attendant to provide medical care while in transport. The intent of this law was to have an ambulance or paramedical unit on site so that if a participant was seriously injured they would be able to receive immediate medical attention while in transport to the hospi-

tal. This amendment will clarify the law's intent to ensure the safety of the participant.

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 2, Repealed 0.

Number of Sections Adopted in Order to Clarify, Streamline, or Reform Agency Procedures: New 0, Amended 2, 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 2, 2010.

Walt Fahrer Rule[s] Coordinator

AMENDATORY SECTION (Amending WSR 02-03-069, filed 1/11/02, effective 2/11/02)

WAC 36-12-360 Promoters. (1) Promoters shall not release the names of boxing contestants in an event to the media or otherwise publicize a contest unless a boxer/promoter contract has been signed and the contest approved by the department.

- (2) Promoters shall not schedule an event intermission that exceeds twenty minutes.
- (3) Promoters shall dispense drinks only in plastic or paper cups.
- (4) Promoters shall not schedule less than twenty-six rounds of boxing without approval of the department.
- (5) Advance notices for all boxing shows must be in the office of the department seven days prior to the holding of any boxing show. In addition to the regular scheduled boxers the advance notice must show the names of boxers engaged by the promoter for an emergency bout.
- (6) Changes in announced or advertised programs for any contest must be approved prior to the contest by the department. Notice of such change or substitution must also be given to the press, conspicuously posted at the box office, and announced from the ring before the opening contest. If any ticket holders desire a refund, such refund shall be made at the box office prior to the start of the first contest.
- (7) The promoter of an event shall contract with each boxer for a contest. Original contracts shall be filed with the department at least five days prior to the event. The contract shall be on a form supplied by the department and contain at least the following:
  - (a) The weight of the boxer at weigh-in;
  - (b) The amount of the purse to be paid for the contest;
  - (c) The date and location of the contest;
- (d) Any other payment or consideration provided to the boxer;

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- (e) List of all fees, charges and expenses including training expenses that will be assessed to the boxer or deducted from the boxer's purse;
- (f) Any reduction in a boxer's purse contrary to a previous agreement between the promoter and the boxer; and
- (g) The amount of any compensation or consideration that a promoter has contracted to receive from a match.
- (8) If a boxer/promoter contract is renegotiated, the promoter shall provide the department with the contract at least two hours prior to an event's scheduled start time.
- (9) If the information from the contract in subsection (7)(e), (f) and (g) of this section is discloseable under Washington state public disclosure law, the promoter may instead provide the information to the Association of Boxing Commissions instead of including the information in the boxer/promoter contract.
- (10) A promoter for an event shall not be a manager for a boxer who is contracted for ten rounds or more of boxing at that event or have direct or indirect financial interest in a boxer in the event.
- (11) The promoter of an event shall provide payments for the boxers' purses and event official's fee in the form of checks or money orders to the department prior to an event. The department may allow other forms of payment if arranged in advance. The department shall pay the boxers and officials immediately after the event, but not later than seventy-two hours from the conclusion of the event.
- (12) Promoters shall provide seats for event officials and department representatives at ringside for each event.
- (13) Promoters shall provide an ambulance or paramedical unit with transport and resuscitation capabilities, with a minimum of two attendants, to be present at the event location at all times during the event.

### AMENDATORY SECTION (Amending WSR 02-20-094, filed 10/1/02, effective 1/1/03)

- WAC 36-13-110 Miscellaneous provisions. (1) Dangerous conduct; punishment. The referee shall not permit physically dangerous conduct or tactics by any participant. Any participant who fails to discontinue such tactics, after being warned by the referee or a department official shall be disqualified and subject to disciplinary action.
- (2) Wrestling participants or other licensees shall not engage in the practice known as "juicing." "Juicing" is the practice of using a razor blade or similar contrivance, or any other means to draw blood from oneself, one's opponent, or from any other participant of the wrestling exhibition or show. The referee shall immediately terminate any match in which blood from a participant appears from "juicing," and the participants shall cease the wrestling match and return to the dressing room. Should an accidental cut to a wrestling participant occur, the match may continue but should be concluded as soon as possible at the discretion of the referee.
- (3) Duties of licensees. It shall be the duty of the promoter, his/her agents, employees, and the participants in any wrestling show or exhibition to maintain peace, order, and decency in the conduct of any show or exhibition. There shall be no abuse of a department official at any time. Foul and profane language by participants is prohibited.

- (4) Responsibility of promoter.
- (a) Each promoter shall be directly responsible to the department for the conduct of its employees and any violation of the laws, rules, or regulations of the department by any employee of a promoter shall be deemed to be a violation by the promoter.
- (b) Promoters are responsible for any violations of the law or department rules by their participants.
- (c) Promoters shall provide an ambulance or paramedical unit with transport and resuscitation capabilities, with a minimum of two attendants, to be present at the event location at all times during the event.
- (5) Postponement or cancellation. A small advance sale of tickets shall not be regarded as a legitimate reason for a postponement or cancellation. Indoor wrestling shows or exhibitions shall not be canceled for any reason except with the approval of the department.
- (6) Discrimination. Discrimination against any participant in regard to sex, race, color, creed or national origin shall be referred to the human rights commission.
  - (7) Appeals.
- (a) Licensees may appeal any suspension or revocation to the department in the manner provided in chapter 34.05 RCW.
- (b) Such appeals must be received in the department office within twenty days from the date of the notice sent by the department.

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