WSR 16-18-094 PROPOSED RULES DEPARTMENT OF SOCIAL AND HEALTH SERVICES

(Aging and Long-Term Support Administration) [Filed September 7, 2016, 11:15 a.m.]

Supplemental Notice to WSR 16-10-060.

Preproposal statement of inquiry was filed as WSR 15-15-125.

Title of Rule and Other Identifying Information: The department is proposing to create WAC 388-97-1090 Direct care hours and amend WAC 388-97-0001 Definitions and 388-97-1080 Nursing services.

The department held a public hearing on June 21, 2016. Comments were received and changes were made. This supplemental CR-102 reflects those changes and other edits.

Hearing Location(s): Office Building 2, DSHS Head-quarters, 1115 Washington, Olympia, WA 98504 (public parking at 11th and Jefferson. A map is available at https://www.dshs.wa.gov/sesa/rules-and-policies-assistance-unit/driving-directions-office-bldg-2), on October 25, 2016, at 10:00 a.m.

Date of Intended Adoption: Not earlier than October 26, 2016.

Submit Written Comments to: DSHS Rules Coordinator, P.O. Box 45850, Olympia, WA 98504, e-mail DSHSRPAU RulesCoordinator@dshs.wa.gov, fax (360) 664-6185, by 5:00 p.m., October 25, 2016.

Assistance for Persons with Disabilities: Contact Jeff Kildahl, DSHS rules consultant, by October 11, 2016, phone (360) 664-6092, TTY (360) 664-6178, or e-mail KildaJA@dshs.wa.gov.

Purpose of the Proposal and Its Anticipated Effects, Including Any Changes in Existing Rules: The department is amending these rules to assure compliance with requirements from recently passed legislation SB [SSB] 5600 and SHB 2678 (requirements originally passed through SHB 1274 and revised in SHB 2678 based on the outcome of a stakeholder workgroup).

Reasons Supporting Proposal: This amendment will align the rules with the recent changes to the statue [statute] in regards to the definitions related to vulnerable adults and staffing ratios in nursing homes.

Statutory Authority for Adoption: Chapters 18.51, 74.42 RCW.

Statute Being Implemented: Chapters 74.34, 74.42, 74.46 RCW.

Rule is not necessitated by federal law, federal or state court decision.

Name of Proponent: Department of social and health services, governmental.

Name of Agency Personnel Responsible for Drafting: Amy Abbott, P.O. Box 45600, Olympia, WA 98513, (360) 725-2327; Implementation: Candace Goehring, P.O. Box 45600, Olympia, WA 98513, (360) 725-2401; and Enforcement: Bett Schlemmer, P.O. Box 45600, Olympia, WA 98513, (360) 725-2404.

No small business economic impact statement has been prepared under chapter 19.85 RCW. Under RCW 19.85.025 (3), a small business economic impact statement is not

required for rules adopting or incorporating, by reference without material change, Washington state statutes or federal statutes or regulations. This rule change is related to a change in chapter 74.42 RCW.

A cost-benefit analysis is not required under RCW 34.05.328. Under RCW 34.05.328 (5)(b)(iii), a cost-benefit analysis is not required for rules adopting or incorporating, by reference without material change, Washington state statutes or federal statutes or regulations. This rule change is related to a change in chapter 74.42 RCW.

September 6, 2016 Katherine I. Vasquez Rules Coordinator

AMENDATORY SECTION (Amending WSR 14-14-027, filed 6/24/14, effective 7/25/14)

WAC 388-97-0001 Definitions. "Abandonment" means action or inaction by an individual or entity with a duty of care for a vulnerable adult that leaves the vulnerable individual without the means or ability to obtain necessary food, clothing, shelter, or health care.

"Abuse" means the willful action or inaction that inflicts injury, unreasonable confinement, intimidation, or punishment of a vulnerable adult. In instances of abuse of a vulnerable adult who is unable to express or demonstrate physical harm, pain or mental anguish, the abuse is presumed to cause physical harm, pain, or mental anguish. Abuse includes sexual abuse, mental abuse, physical abuse, ((and)) personal exploitation of a vulnerable adult, and improper use of restraint against a vulnerable adult which have the following meanings:

- (1) "Mental abuse" means ((any willful action or inaction of mental or verbal abuse. Mental abuse includes, but is not limited to, coercion, harassment, inappropriately isolating a resident from family, friends, or regular activity, and verbal assault that includes ridiculing, intimidating,)) a willful verbal or nonverbal action that threatens, humiliates, harasses, coerces, intimidates, isolates, unreasonably confines, or punishes a vulnerable adult. Mental abuse may include ridiculing, yelling, or swearing.
- (2) "Physical abuse" means the willful action of inflicting bodily injury or physical mistreatment. Physical abuse includes, but is not limited to, striking with or without an object, slapping, pinching, choking, kicking, shoving, or prodding((, or restraints including chemical restraints, unless the restraint is consistent with licensing requirements)).
- (3) "Sexual abuse" means any form of nonconsensual sexual ((eontact)) conduct, including, but not limited to, unwanted or inappropriate touching, rape, sodomy, sexual coercion, sexually explicit photographing, and sexual harassment. Sexual ((eontact)) conduct may include interactions that do not involve touching, including but not limited to sending a resident sexually explicit messages, or cuing or encouraging a resident to perform sexual acts. Sexual abuse includes any sexual ((eontact)) conduct between a staff person and a resident, whether or not it is consensual.
- (4) "Personal exploitation" means an act of forcing, compelling, or exerting undue influence over a ((resident)) vulnerable adult to

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act in a way that is inconsistent with relevant past behavior, or causing the ((resident)) vulnerable adult to perform services for the benefit of another.

- (5) "Improper use of restraint" means the inappropriate use of chemical, physical, or mechanical restraints for convenience or discipline or in a manner that:
- (a) Is inconsistent with federal or state licensing or certification requirements for facilities, hospitals, or programs authorized under chapter 71A.12 RCW;
 - (b) Is not medically authorized; or
 - (c) Otherwise constitutes abuse under this section.
- "Administrative hearing" is a formal hearing proceeding before a state administrative law judge that gives:
- (1) A licensee an opportunity to be heard in disputes about licensing actions, including the imposition of remedies, taken by the department; or
- (2) An individual an opportunity to appeal a finding of abandonment, abuse, neglect, financial exploitation of a resident, or misappropriation of a resident's funds.
- "Administrative law judge (ALJ)" means an impartial decision-maker who presides over an administrative hearing. ALJs are employed by the office of administrative hearings (OAH), which is a separate state agency. ALJs are not DSHS employees or DSHS representatives.
- "Administrator" means a nursing home administrator, licensed under chapter 18.52 RCW, who must be in active administrative charge of the nursing home, as that term is defined in the board of nursing home administrator's regulations
- "Advanced registered nurse practitioner (ARNP)" means an individual who is licensed to practice as an advanced registered nurse practitioner under chapter 18.79 RCW.
- "Applicant" means an individual, partnership, corporation, or other legal entity seeking a license to operate a nursing home.
- "ASHRAE" means the American Society of Heating, Refrigerating, and Air Conditioning Engineers, Inc.
- "Attending physician" means the doctor responsible for a particular individual's total medical care.
 - "Berm" means a bank of earth piled against a wall.
- "Chemical restraint" means ((a psychopharmacologic drug that is used for discipline or convenience and is not required to treat the resident's medical symptoms)) the administration of any drug to manage a vulnerable adult's behavior in a way that reduces the safety risk to the vulnerable adult or others, has the temporary effect of restricting the vulnerable adult's freedom of movement, and is not standard treatment for the vulnerable adult's medical or psychiatric condition.
- "Civil adjudication proceeding" means judicial or administrative adjudicative proceeding that results in a finding of, or upholds an agency finding of, domestic violence, abuse, sexual abuse, neglect, abandonment, violation of a professional licensing standard regarding a child or vulnerable adult, or exploitation or financial exploitation of a child or vulnerable adult under any provision of law, including but not limited to chapter 13.34, 26.44, or 74.34 RCW, or rules adopted under chapters 18.51 and 74.42 RCW. "Civil adjudication proceeding" also includes judicial or administrative

findings that become final due to the failure of the alleged perpetrator to timely exercise a legal right to administratively challenge such findings.

- "Civil fine" is a civil monetary penalty assessed against a nursing home as authorized by chapters 18.51 and 74.42 RCW. There are two types of civil fines, "per day" and "per instance."
- (1) "**Per day fine**" means a fine imposed for each day that a nursing home is out of compliance with a specific requirement. Per day fines are assessed in accordance with WAC 388-97-4580(1); and
- (2) "Per instance fine" means a fine imposed for the occurrence of a deficiency.
- "Condition on a license" means that the department has imposed certain requirements on a license and the licensee cannot operate the nursing home unless the requirements are observed.
- "Consent" means express written consent granted after the vulnerable adult or his or her legal representative has been fully informed of the nature of the services to be offered and that the receipt of services is voluntary.
- "Commuting distance radius" means the one-way travel time between any two points traveling on the generally fastest route without any impediments such as traffic, road work, or road closure.
- "**Deficiency**" is a nursing home's failed practice, action or inaction that violates any or all of the following:
- (1) Requirements of chapters 18.51 or 74.42 RCW, or the requirements of this chapter; and
- (2) In the case of a medicare and medicaid contractor, participation requirements under Title XVIII and XIX of the Social Security Act and federal medicare and medicaid regulations.
- "Deficiency citation" or "cited deficiency" means written documentation by the department that describes a nursing home's deficiency(ies); the requirement that the deficiency(ies) violates; and the reasons for the determination of noncompliance.
- "Deficient facility practice" or "failed facility practice" means the nursing home action(s), error(s), or lack of action(s) that provide the basis for the deficiency.
- "Dementia care" means a therapeutic modality or modalities designed specifically for the care of persons with dementia.
- "Denial of payment for new admissions" is an action imposed on a nursing home (facility) by the department that prohibits payment for new medicaid admissions to the nursing home after a specified date. Nursing homes certified to provide medicare and medicaid services may also be subjected to a denial of payment for new admissions by the federal Centers for Medicare and Medicaid Services.
- "Department" means the state department of social and health services (DSHS).
- "Department on-site monitoring" means an optional remedy of on-site visits to a nursing home by department staff according to department guidelines for the purpose of monitoring resident care or services or both.
- "Dietitian" means a qualified dietitian. A qualified dietitian is one who is registered by the American Dietetic Association or certified by the state of Washington.

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"Direct care staff" are those individuals who, through interpersonal contact with residents or resident care management, provide care and services to allow residents to attain or maintain the highest practicable physical, mental, and psychosocial well-being. Direct care staff does not include individuals whose primary duty is to maintain the long term care facility's physical environment, such as housekeeping.

"Directly supervising" means that the individual responsible for providing oversight to staff is on the premises and quickly and easily available to provide necessary assessments and other direct care of residents.

"Disclosure statement" means a signed statement by an individual in accordance with the requirements under RCW 43.43.834. The statement should include a disclosure of whether or not the individual has been convicted of certain crimes or has been found by any court, state licensing board, disciplinary board, or protection proceeding to have neglected, sexually abused, financially exploited, or physically abused any minor or adult individual.

"Drug" means a substance:

- (1) Recognized as a drug in the official *United States Pharmacopoeia*, *Official Homeopathic Pharmacopoeia of the United States*, *Official National Formulary*, or any supplement to any of them; or
- (2) Intended for use in the diagnosis, cure, mitigation, treatment, or prevention of disease.
- "Drug facility" means a room or area designed and equipped for drug storage and the preparation of drugs for administration.
- "Emergency closure" is an order by the department to immediately close a nursing home.
- "Emergency transfer" means immediate transfer of residents from a nursing home to safe settings.
- "Entity" means any type of firm, partnership, corporation, company, association, or joint stock association.
- <u>"Essential community provider"</u> means a nursing home, which is the only nursing home within a commuting distance radius of at least forty minutes duration, traveling by automobile.
- "Financial exploitation" means the illegal or improper use, control over, or withholding of the property, income, resources, or trust funds of the vulnerable adult by any person or entity for any person or entity's profit or advantage other than the vulnerable adult's profit or advantage. Some examples of financial exploitation are given in RCW 74.34.020 (((6)))(7).
- "Geriatric behavioral health worker" means a person with a bachelor's or master's degree in social work, who has received specialized training devoted to mental illness and treatment of older adults.
- "Habilitative services" means the planned interventions and procedures which constitute a continuing and comprehensive effort to teach an individual previously undeveloped skills.
- "Highest practicable physical, mental, and psychosocial well-being" means providing each resident with the necessary individualized care and services to assist the resident to achieve or maintain the highest possible health, functional and independence level in accordance with the resident's comprehensive assessment and plan of care. Care and ser-

vices provided by the nursing home must be consistent with all requirements in this chapter, chapters 74.42 and 18.51 RCW, and the resident's informed choices. For medicaid and medicare residents, care and services must also be consistent with Title XVIII and XIX of the Social Security Act and federal medicare and medicaid regulations.

"Informal department review" is a dispute resolution process that provides an opportunity for the licensee or administrator to informally present information to a department representative about disputed, cited deficiencies. Refer to WAC 388-97-4420.

"Inspection" or "survey" means the process by which department staff evaluates the nursing home licensee's compliance with applicable statutes and regulations.

"Intermediate care facility for individuals with intellectual disabilities (ICF/IID)" means an institution certified under chapter 42 C.F.R., Part 483, Subpart I, and licensed under chapter 18.51 RCW.

"Large nonessential community providers" means nonessential community providers that have more than sixty licensed nursing home beds, even if some of those beds are not set up or are not in use.

"License revocation" is an action taken by the department to cancel a nursing home license in accordance with RCW 18.51.060 and WAC 388-97-4220.

"License suspension" is an action taken by the department to temporarily revoke a nursing home license in accordance with RCW 18.51.060 and this chapter.

"Licensee" means an individual, partnership, corporation, or other legal entity licensed to operate a nursing home.

"Licensed practical nurse" means an individual licensed to practice ((as a licensed)) practical nursing under chapter 18.79 $RCW((\frac{1}{2}))$.

"Mandated reporter" as used in this chapter means any employee of a nursing home, any health care provider subject to chapter 18.130 RCW, the Uniform Disciplinary Act, and any licensee or operator of a nursing home. Under RCW 74.34.020, mandated reporters also include any employee of the department of social and health services, law enforcement officers, social workers, professional school personnel, individual providers, employees and licensees of assisted living ((facility)) facilities, adult family homes, soldiers' homes, residential habilitation centers, or any other facility licensed by the department, employees of social service, welfare, mental health, adult day health, adult day care, home health, home care, or hospice agencies, county coroners or medical examiners, or Christian Science practitioners.

"Mechanical restraint" means any device attached or adjacent to the vulnerable adult's body that he or she cannot easily remove that restricts freedom of movement or normal access to his or her body. "Mechanical restraint" does not include the use of devices, materials, or equipment that are:

- (1) Medically authorized, as required; and
- (2) Used in a manner that is consistent with federal or state licensing or certification requirements for facilities.
- "Misappropriation of resident property" means the deliberate misplacement, exploitation, or wrongful, temporary or permanent use of a resident's belongings or money.
- "NFPA" means National Fire Protection Association, Inc.

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"Neglect":

- (1) In a nursing home licensed under chapter 18.51 RCW, neglect means:
- (([(a)])) (a) A pattern of conduct or inaction by a person or entity with a duty of care that fails to provide the goods and services that maintain physical or mental health of a vulnerable adult, or that fails to avoid or prevent physical or mental harm or pain to a vulnerable adult; or
- (b) An act or omission by a person or entity with a duty of care that demonstrates a serious disregard of consequences of such a magnitude as to constitute a clear and present danger to the vulnerable adult's health, welfare, or safety, including but not limited to conduct prohibited under RCW 9A.42.-100.
- (2) In a skilled nursing facility or nursing facility, neglect also means a failure to provide a resident with the goods and services necessary to avoid physical harm, mental anguish, or mental illness.
- "Noncompliance" means a state of being out of compliance with state and/or federal requirements for nursing homes/facilities.
- "Nonessential community provider" means a nursing home located within a commuting distance radius of less than forty minutes duration by automobile from another nursing home.
- "Nursing assistant" means a nursing assistant as defined under RCW 18.88A.020 or successor laws.
- "Nursing facility (NF)" or "medicaid-certified nursing facility" means a nursing home, or any portion of a hospital, veterans' home, or residential habilitation center, that is certified to provide nursing services to medicaid recipients under Section 1919(a) of the federal Social Security Act. All beds in a nursing facility are certified to provide medicaid services, even though one or more of the beds are also certified to provide medicare skilled nursing facility services.
- "Nursing home" means any facility licensed to operate under chapter 18.51 RCW.
- "Officer" means an individual serving as an officer of a corporation.

"Owner of five percent or more of the assets of a nursing home" means:

- (1) The individual, and if applicable, the individual's spouse, who operates, or is applying to operate, the nursing home as a sole proprietorship;
- (2) In the case of a corporation, the owner of at least five percent of the shares or capital stock of the corporation; or
- (3) In the case of other types of business entities, the owner of a beneficial interest in at least five percent of the capital assets of an entity.
- "Partner" means an individual in a partnership owning or operating a nursing home.
- "Permanent restraining order" means a restraining order or order of protection issued either following a hearing, or by stipulation of the parties. A "permanent" order may be in force for a specific time period (for example, one year), after which it expires.
- "Person" means any individual, firm, partnership, corporation, company, association or joint stock association.

- "Pharmacist" means an individual licensed by the Washington state board of pharmacy under chapter 18.64 RCW.
- "Pharmacy" means a place licensed under chapter 18.64 RCW where the practice of pharmacy is conducted.
- "Physical restraint" ((means any manual method or physical or mechanical device, material, or equipment attached or adjacent to the resident's body that the resident cannot remove easily, and which restricts freedom of movement or access to the resident's body)) means the application of physical force without the use of any device for the purpose of restraining the free movement of a vulnerable adult's body. "Physical restraint" does not include briefly holding without undue force a vulnerable adult in order to calm or comfort him or her, or holding a vulnerable adult's hand to safely escort him or her from one area to another.
- "Physician's assistant (PA)" means a physician's assistant as defined under chapter 18.57A or 18.71A RCW or successor laws.
- "Plan of correction" is a nursing home's written response to cited deficiencies that explains how it will correct the deficiencies and how it will prevent their reoccurrence.
- "Reasonable accommodation" and "reasonably accommodate" has the meaning given in federal and state antidiscrimination laws and regulations. For the purpose of this chapter:
- (1) Reasonable accommodation means that the nursing home must:
- (a) Not impose admission criteria that excludes individuals unless the criteria is necessary for the provision of nursing home services;
- (b) Make reasonable modification to its policies, practices or procedures if the modifications are necessary to accommodate the needs of the resident;
 - (c) Provide additional aids and services to the resident.
 - (2) Reasonable accommodations are not required if:
- (a) The resident or individual applying for admission presents a significant risk to the health or safety of others that cannot be eliminated by the reasonable accommodation;
- (b) The reasonable accommodations would fundamentally alter the nature of the services provided by the nursing home: or
- (c) The reasonable accommodations would cause an undue burden, meaning a significant financial or administrative burden.
- "Receivership" is established by a court action and results in the removal of a nursing home's current licensee and the appointment of a substitute licensee to temporarily operate the nursing home.
- "Recurring deficiency" means a deficiency that was cited by the department, corrected by the nursing home, and then cited again within fifteen months of the initial deficiency citation.
- "Registered nurse" means an individual licensed to practice as a registered nurse under chapter 18.79 RCW.
- "Rehabilitative services" means the planned interventions and procedures which constitute a continuing and comprehensive effort to restore an individual to the individual's former functional and environmental status, or alternatively, to maintain or maximize remaining function.

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"Resident" generally means an individual residing in a nursing home. Except as specified elsewhere in this chapter, for decision-making purposes, the term "resident" includes the resident's surrogate decision maker acting under state law. The term resident excludes outpatients and individuals receiving adult day or night care, or respite care.

"Resident care unit" means a functionally separate unit including resident rooms, toilets, bathing facilities, and basic service facilities.

"Respiratory isolation" is a technique or techniques instituted to prevent the transmission of pathogenic organisms by means of droplets and droplet nuclei coughed, sneezed, or breathed into the environment.

"Siphon jet clinic service sink" means a plumbing fixture of adequate size and proper design for waste disposal with siphon jet or similar action sufficient to flush solid matter of at least two and one-eighth inches in diameter.

"Skilled nursing facility (SNF)" or "medicare-certified skilled nursing facility" means a nursing home, a portion of a nursing home, or a long-term care wing or unit of a hospital that has been certified to provide nursing services to medicare recipients under Section 1819(a) of the federal Social Security Act.

"Small nonessential community providers" means nonessential community providers that have sixty or fewer nursing home licensed beds, even if some of those beds are not set up or are not in use.

"Social/therapeutic leave" means leave which is for the resident's social, emotional, or psychological well-being; it does not include medical leave.

"Staff work station" means a location at which nursing and other staff perform charting and related activities throughout the day.

"Stop placement" or "stop placement order" is an action taken by the department prohibiting nursing home admissions, readmissions, and transfers of patients into the nursing home from the outside.

"Substantial compliance" means the nursing home has no deficiencies higher than severity level 1 as described in WAC 388-97-4500, or for medicaid certified facility, no deficiencies higher than a scope and severity "C."

"Surrogate decision maker" means a resident representative or representatives as outlined in WAC 388-97-0240, and as authorized by RCW 7.70.065.

"Survey" means the same as "inspection" as defined in this section.

"Temporary manager" means an individual or entity appointed by the department to oversee the operation of the nursing home to ensure the health and safety of its residents, pending correction of deficiencies or closure of the facility.

"Temporary restraining order" means restraining order or order of protection that expired without a hearing, was dismissed following an initial hearing, or was dismissed by stipulation of the parties before an initial hearing.

"Termination" means an action taken by:

- (1) The department, or the nursing home, to cancel a nursing home's medicaid certification and contract; or
- (2) The department of health and human services Centers for Medicare and Medicaid Services, or the nursing home, to

cancel a nursing home's provider agreement to provide services to medicaid or medicare recipients, or both.

"Toilet room" means a room containing at least one toilet fixture.

"Uncorrected deficiency" is a deficiency that has been cited by the department and that is not corrected by the licensee by the time the department does a revisit.

"Violation" means the same as "deficiency" as defined in this section.

"Volunteer" means an individual who is a regularly scheduled individual not receiving payment for services and having unsupervised access to a nursing home resident.

"Vulnerable adult" includes a person:

- (1) Sixty years of age or older who has the functional, mental, or physical inability to care for himself or herself; $((\frac{6\pi}{2}))$
- (2) Found incapacitated under chapter 11.88 RCW; ((or))
- (3) Who has a developmental disability as defined under RCW 71A.10.020; ((or))
- (4) Admitted to any facility((, including any assisted living facility)); ((or))
- (5) Receiving services from home health, hospice, or home care agencies licensed or required to be licensed under chapter 70.127 RCW; ((or))
 - (6) Receiving services from an individual provider; or
- (7) ((With a functional disability who lives in his or her own home, who is directing and supervising a paid personal aide to perform a health care task as authorized by RCW)) Who self directs his or her own care and receives services from a personal aide under chapter 74.39((.050)) RCW.

"Whistle blower" means a resident, employee of a nursing home, or any person licensed under Title 18 RCW, who in good faith reports alleged abandonment, abuse, financial exploitation, or neglect to the department, the department of health or to a law enforcement agency.

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 08-20-062, filed 9/24/08, effective 11/1/08)

WAC 388-97-1080 Nursing services. (1) The nursing home must ensure that a sufficient number of qualified nursing personnel are available on a twenty-four hour basis seven days per week to provide nursing and related services to attain or maintain the highest practicable physical, mental and psychosocial well-being of each resident as determined by resident assessments and individual plans of care.

- (2) The nursing home must:
- (a) Designate a registered nurse or licensed practical nurse to serve as charge nurse($(\frac{1}{2})$) who is accountable for nursing services on each ((tour of duty)) shift; and
- (b) Have a full time director of nursing service who is a registered nurse.
 - (3) ((The nursing home must have:

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- (a) A registered nurse on duty directly supervising resident care a minimum of sixteen hours per day, seven days per week; and
- (b) A registered nurse or licensed practical nurse on duty directly supervising resident care the remaining eight hours per day, seven days per week. "Directly supervising" means the supervising individual is on the premises and is quickly and easily available to provide necessary assessments and other direct care of residents; and oversight of supervised staff.)) Large nonessential community providers must have a registered nurse on duty directly supervising resident care twenty-four hours per day, seven days per week.
- (4) The department may permit limited exceptions to subsection (3) of this section if the facility can demonstrate good faith effort to hire a registered nurse for the last eight hours of required coverage per day. The department may not grant exceptions for coverage that are less than sixteen hours per day. When considering an exception, the department may consider the following:
 - (a) Wages and benefits offered by the facility; and
- (b) The availability of registered nurses in the facility's geographical area.
- (5) The department may grant a one-year exception that may be renewable for up to three consecutive years.
- (6) If a registered nurse is not on-site and readily available to complete full assessments during a shift, the department may limit the admission of new residents based on the resident's medical conditions or complexity during this period only for the particular shift that a registered nurse is not on-site or readily available.
- (7) If the department grants an exception for a facility, the department must include this information in its nursing home locator.
- (8) Essential community providers and small nonessential community providers must have a registered nurse on duty who directly supervises resident care a minimum of sixteen hours per day, seven days per week, and a registered nurse or a licensed practical nurse on duty who directly supervises resident care the remaining eight hours per day, seven days per week.
- (9) The nursing home must ensure that staff respond to ((each)) resident((!s)) requests for assistance ((in a manner which promptly meets the quality of life and quality of eare needs of all the residents)) in a manner that promptly meets the resident's quality of life and quality of care needs.
- (((5))) (10) The director of nursing services is responsible for:
 - (a) Coordinating the plan of care for each resident;
- (b) Ensuring that registered nurses and licensed practical nurses comply with chapter 18.79 RCW; and
- (c) Ensuring that the nursing care provided is based on the nursing process in accordance with nationally recognized and accepted standards of professional nursing practice.

NEW SECTION

WAC 388-97-1090 Direct care hours (1) Each nursing facility must provide a minimum of 3.4 hours of direct care per resident day (HRD). Direct care means the staffing domain identified and defined in the center for medicare and

- medicaid services' five star quality rating system and as reported through the center for Medicare and Medicaid services' payroll-based journal. Compliance with the minimum staffing standard must be measured using the center for Medicare and Medicaid services' payroll based journal and nursing facility census and payroll data.
- (2) On a quarterly basis the department will use the center for Medicare and Medicaid services' payroll based journal to determine compliance with the minimum staffing standard.
- (3) Payroll based journal data must be submitted after the end of each calendar quarter and filed electronically.
- (4) The department will presume that all hours worked by direct care employees at the facility have been spent providing direct care.
- (5) The department may use census and payroll data from facilities to perform enforcement audits.
- (6) The department must monitor facility census information, reported staff hours, and payroll data to determine whether HRD figures are relatively constant throughout a quarter or are being increased at the end of the quarter through unusual spending on direct care.
- (7) A facility may use the hours of geriatric behavioral health workers as defined under RCW 74.42.010 to meet this section's direct care minimum staffing requirements.
- (8) A nursing facility that fails to meet the minimum staffing requirement of 3.4 hours and of direct care per resident day for any quarter is subject to a fine. The department will determine the amount of the fine as follows:
- (a) The fine must be based on the total cost the facility would have incurred had it complied with the 3.4 HRD requirement;
- (b) The department will use a formula that calculates a fine based on the cost of certified nurse aid wages and benefits for the missing staff hours;
- (c) If the facility believes that the department's application of the standard in subsection (8)(b) of this section is inequitable, it may explain its position to the department and request consideration of an alternative method of calculating the fine; and
- (d) The fine will be one and a half times the additional amount it would have cost the facility to provide direct care at the 3.4 HRD standard for a facility's first violation and two times the additional amount for each subsequent violation by the facility. After a facility has not violated the 3.4 HRD requirement for three years the department will reset the facility's status and treat any subsequent violation as an initial violation.
- (9) If a non-compliant facility believes that it made a good-faith effort to meet the minimum staffing requirement and asks that the penalty not be imposed, the department may in its sole discretion waive the penalty.
- (10) If the department waives a facility's fine under subsection (9) of this section, its noncompliance with the 3.4 HRD requirement must not count as a violation for determining whether a future violation is a first violation or a subsequent violation under subsection (8)(d) of this section and must not count as a violation for the purposes of resetting a facility's status under section (8)(d).

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- (11) The amount of money the facility would have been required to spend to reach 3.4 HRD must be treated as a direct care cost for the year in which the facility staffing was deficient for settlement purposes. The portion of the fine representing the additional one-half or one times that amount is a penalty, and will not be added to the actual costs of the facility in the settlement process.
- (12) The department will monitor compliance with the 3.4 HRD minimum staffing requirement for the quarter beginning July 1, 2016, but will not impose any penalties on facilities that do not comply during that quarter. The department instead will notify non-complying facilities what their penalty would otherwise have been, and will require those facilities to submit a written plan for correcting the deficiency. The department will begin imposing fines for the quarter beginning October 1, 2016. Noncompliance with the 3.4 HRD requirement during the quarter beginning July 1, 2016 must not count as a first violation for fine calculation purposes under subsection (8)(d) of this section.
- (13) The facility must pay penalties under WAC 388-97-1090(8) by check. The department will deposit penalty checks into the nursing facility quality enhancement account in the custody of the state treasurer. The department's secretary, or the secretary's designee, may authorize expenditures from the nursing facility quality enhancement account. Such expenditures may only be for: technical assistance to nursing facilities, specialized training for nursing facilities, or an increase to the quality enhancement component of the daily medicaid rate provided by RCW 74.46.581.
- (14) The department may grant a limited exception to the 3.4 HRD staffing requirements for facilities demonstrating a good faith effort to hire and retain staff.
- (15) To determine initial facility eligibility for exception consideration, the department must send surveys to facilities anticipated to be below, at, or slightly above the 3.4 HRD requirement.
- (16) These surveys report the staffing of a facility from October through December 2015, January through March 2016, and April through June 2016. These surveys must measure the HRD in a manner as similar as possible to the centers for Medicare and Medicaid services' payroll-based journal.
- (17) In the event the center for Medicare and Medicaid services' payroll-based journal is not available, the department may use any data source that is reasonably consistent with data metrics used by the payroll-based journal to measure direct care being provided by a nursing home. To gather data similar to the data gathered by the payroll-based journal, the department may survey facilities. The metrics will be used to determine whether the nursing home has complied with the 3.4 HRD requirement.

WSR 16-19-013 WITHDRAWL OF PROPOSED RULES GAMBLING COMMISSION

[Filed September 8, 2016, 4:21 p.m.]

Please withdraw WSR 16-09-044 filed on April 15, 2016.

Staff made changes between proposal one and proposal two, and added a small business economic impact statement. The two proposals were not connected and there should have been a supplemental notice instead of another original filing.

> Michelle Rancour Acting Rules Coordinator

WSR 16-19-028 WITHDRAWL OF PROPOSED RULES DEPARTMENT OF REVENUE

(By the Code Reviser's Office) [Filed September 13, 2016, 12:05 p.m.]

WAC 458-18-210, proposed by the department of revenue in WSR 16-06-067, appearing in issue 16-06 of the Washington State Register, which was distributed on March 16, 2016, is withdrawn by the office of the code reviser under RCW 34.05.335(3), since the proposal was not adopted within the one hundred eighty day period allowed by the statute.

Kerry S. Radcliff, Editor Washington State Register

WSR 16-19-029 WITHDRAWL OF PROPOSED RULES DEPARTMENT OF REVENUE

(By the Code Reviser's Office) [Filed September 13, 2016, 12:06 p.m.]

WAC 458-53-095, 458-53-105 and 458-53-135, proposed by the department of revenue in WSR 16-06-110, appearing in issue 16-06 of the Washington State Register, which was distributed on March 16, 2016, is withdrawn by the office of the code reviser under RCW 34.05.335(3), since the proposal was not adopted within the one hundred eighty day period allowed by the statute.

Kerry S. Radcliff, Editor Washington State Register

WSR 16-19-032 proposed rules HEALTH CARE AUTHORITY

(Washington Apple Health) [Filed September 13, 2016, 3:13 p.m.]

Original Notice.

Preproposal statement of inquiry was filed as WSR 16-13-009.

Title of Rule and Other Identifying Information: WAC 182-543-0500 DME, CRT, P&O, Medical supplies—General, 182-543-2000 DME, CRT, P&O, Medical supplies—Eligible providers and provider requirements, 182-543-5000 DME, CRT, P&O, Medical supplies—Covered—Prosthetics/orthotics, and 182-545-200 Outpatient rehabilitation.

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Hearing Location(s): Health Care Authority (HCA), Cherry Street Plaza Building, Sue Crystal Conference Room 106A, 626 8th Avenue, Olympia, WA 98504 (metered public parking is available street side around building. A map is available at http://www.hca.wa.gov/documents/directions_to_csp.pdf or directions can be obtained by calling (360) 725-1000), on October 25, 2016, at 10:00 a.m.

Date of Intended Adoption: Not sooner than October 26, 2016.

Submit Written Comments to: HCA Rules Coordinator, P.O. Box 45504, Olympia, WA 98504-5504, delivery 626 8th Avenue, Olympia, WA 98504, e-mail arc@hca.wa.gov, fax (360) 586-9727, by 5:00 p.m. on October 25, 2016.

Assistance for Persons with Disabilities: Contact Amber Lougheed by October 21, 2016, e-mail amber.lougheed@hca.wa.gov, (360) 725-1349, or TTY (800) 848-5429 or 711.

Purpose of the Proposal and Its Anticipated Effects, Including Any Changes in Existing Rules: The agency is amending these rules to comply with new federal rules under 42 C.F.R. Part 440 requiring that medical supplies, equipment and supplies be prescribed by physicians and other allowed nonphysician practitioners, and that the agency inform clients of their right to appeal an adverse agency action. The agency is also amending these rules to add occupational therapists to the list of eligible prosthetic and orthotics providers.

Reasons Supporting Proposal: See Purpose above.

Statutory Authority for Adoption: RCW 41.05.021, 41.05.160.

Statute Being Implemented: RCW 41.05.021, 41.05.160, 42 C.F.R. Part 440.

Rule is necessary because of federal law, [no further information supplied by agency].

Name of Proponent: HCA, governmental.

Name of Agency Personnel Responsible for Drafting: Chantelle Diaz, P.O. Box 42716, Olympia, WA 98504-2716, (360) 725-1842; Implementation and Enforcement: Erin Mayo and Jean Gowen, P.O. Box 45506, Olympia, WA 98504-5506, (360) 725-1729.

No small business economic impact statement has been prepared under chapter 19.85 RCW. Under RCW 19.85.025 (3), the agency is not required to prepare a small business economic impact statement for amendments made to comply with 42 C.F.R. Part 440 (effective July 1, 2016). If these rules are not adopted, the state cannot claim a federal match for certain home health services, resulting in lost funding for the agency. For the addition of occupational therapists to the list of eligible prosthetic and orthotics providers, the agency has determined that the proposed change does not impose a disproportionate cost impact on small businesses or nonprofits.

A cost-benefit analysis is not required under RCW 34.05.328. RCW 34.05.328 does not apply to HCA rules unless requested by the joint administrative rules review committee or applied voluntarily.

September 13, 2016 Wendy Barcus Rules Coordinator AMENDATORY SECTION (Amending WSR 14-08-035, filed 3/25/14, effective 4/25/14)

WAC 182-543-0500 DME and related supplies, complex rehabilitation technology, prosthetics, orthotics, medical supplies and related services—General. (1) The federal government considers durable medical equipment (DME) and related supplies, complex rehabilitation technology (CRT), prosthetics, orthotics, and medical supplies to be optional services under the medicaid program, except when prescribed as an integral part of an approved plan of treatment under the home health program or required under the early and periodic screening, diagnosis and treatment (EPSDT) program. The medicaid agency may reduce or eliminate coverage for optional services, consistent with legislative appropriations.

- (2) The agency covers the DME and related supplies, CRT, prosthetics, orthotics, and related services including modifications, accessories, and repairs, and medical supplies listed in this chapter, according to agency rules and subject to the limitations and requirements in this chapter.
- (3) The agency pays for DME and related supplies, CRT, prosthetics, orthotics, and related services including modifications, accessories, and repairs, and medical supplies when they are:
 - (a) Covered;
- (b) Within the scope of the client's medical program (see WAC 182-501-0060 and 182-501-0065);
- (c) Medically necessary, as defined in WAC 182-500-0070:
- (d) Prescribed by a physician((, advanced registered nurse practitioner (ARNP), naturopathic physicians, or physician assistant certified (PAC))) as defined in WAC 182-500-0085, and within the scope of ((his or her)) the provider's licensure, except for dual-eligible ((medicare/medicaid clients when medicare is the primary payer and the agency is being billed for a co-pay and/or deductible only)) clients whose deductible and coinsurance the agency pays under WAC 182-502-0110;
- (e) Authorized, as required within this chapter, chapters 182-501 and 182-502 WAC, and the agency's published billing instructions ((and provider notices));
- (f) Billed according to this chapter, chapters 182-501 and 182-502 WAC, and the agency's published billing instructions ((and provider notices)); and
- (g) Provided and used within accepted medical or physical medicine community standards of practice.
- (4) The agency requires prior authorization (PA) for covered DME and related supplies, CRT, prosthetics, orthotics, medical supplies, and related services when the clinical criteria set forth in this chapter are not met, including the criteria associated with the expedited prior authorization (EPA) process.
- (a) The agency evaluates ((requests requiring prior authorization)) PA requests on a case-by-case basis to determine medical necessity, according to the process found in WAC 182-501-0165.
- (b) Refer to WAC 182-543-7000, 182-543-7100, and 182-543-7300 for specific details regarding authorization.
- (5) The agency bases its determination about which DME and related supplies, CRT, prosthetics, orthotics, med-

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ical supplies, and related services require ((prior authorization (PA) or expedited prior authorization (EPA))) PA or EPA on utilization criteria (see WAC 182-543-7100 for PA and WAC 182-543-7300 for EPA). The agency considers all of the following when establishing utilization criteria:

- (a) Cost;
- (b) The potential for utilization abuse;
- (c) A narrow therapeutic indication; and
- (d) Safety.
- (6) The agency evaluates a request for any item listed as noncovered in this chapter under ((the provisions of)) WAC 182-501-0160. When early and periodic screening, diagnosis and treatment (EPSDT) applies, the agency evaluates a noncovered service, equipment, or supply according to the process in WAC 182-501-0165 to determine if it is medically necessary, safe, effective, and not experimental (see WAC 182-543-0100 for EPSDT rules).
- (7) The agency may terminate a provider's participation with the agency ((aecording to)) under WAC 182-502-0030 and 182-502-0040.
- (8) The agency evaluates a request for a service that is in a covered category, but has been determined to be experimental or investigational under ((the provisions of)) WAC 182-501-0165.
- (9) If a client disagrees with an agency decision under this section, the client may request an administrative hearing under chapter 182-526 WAC.

AMENDATORY SECTION (Amending WSR 14-08-035, filed 3/25/14, effective 4/25/14)

WAC 182-543-2000 DME and related supplies, complex rehabilitation technology, prosthetics, orthotics, medical supplies and related services—Eligible providers and provider requirements. (1) The medicaid agency pays qualified providers for durable medical equipment (DME) and related supplies, complex rehabilitation technology (CRT), prosthetics, orthotics, medical supplies, repairs, and related services on a fee-for-service basis as follows:

- (a) DME providers who are enrolled with medicare for DME and related repair services;
- (b) Qualified CRT suppliers who are enrolled with medicare for DME and related repair services;
- (c) Medical equipment dealers who are enrolled with medicare, pharmacies who are enrolled with medicare, and home health agencies under their national provider ((indicator)) identifier (NPI) for medical supplies;
- (d) Prosthetics and orthotics providers who are licensed by the Washington state department of health in prosthetics and orthotics. Medical equipment dealers and pharmacies that do not require state licensure to provide selected prosthetics and orthotics may be paid for those selected prosthetics and orthotics only as long as the medical equipment dealers and pharmacies meet the medicare enrollment requirement;
- (e) Occupational therapists providing orthotics who are licensed by the Washington state department of health in occupational therapy;
- (f) Physicians who provide medical equipment and supplies in the office. The agency may pay separately for medi-

- cal supplies, subject to the provisions in the agency's resource-based relative value scale fee schedule; and
- $((\frac{f}{g}))$ (g) Out-of-state ((orthotics and)) prosthetics and orthotics providers who meet their state regulations.
- (2) Providers and suppliers of DME and related supplies, CRT, prosthetics, orthotics, medical supplies and related items must:
- (a) Meet the general provider requirements in chapter 182-502 WAC;
- (b) Be a physician as defined in WAC 182-500-0085, or a nonphysician practitioner as defined in WAC 182-500-0075;
- (c) Have the proper business license and be certified, licensed ((and/or)) and bonded if required, to perform the services billed to the agency;
 - (((e))) (d) Have a valid prescription for the DME;
 - (i) To be valid, a prescription must:
- (A) Be written on the agency's Prescription Form (HCA 13-794). The agency's electronic forms are available online at: http://www.hca.wa.gov/medicaid/forms/Pages/index.aspx;
- (B) Be written by a physician((, advanced registered nurse practitioner (ARNP), naturopathic physician, or physician's assistant certified (PAC))) as defined in WAC 182-500-0085;
- (C) Be written, signed (including the prescriber's credentials), and dated by the prescriber on the same day and before delivery of the supply, equipment, or device. Prescriptions must not be back-dated;
- (D) Be no older than one year from the date the prescriber signs the prescription; and
- (E) State the specific item or service requested, diagnosis, estimated length of need (weeks, months, or years), and quantity.
- (ii) For dual_eligible ((medicare/medicaid)) clients when medicare is the primary payer and the agency is being billed for ((the co-pay and/or deductible only)) only the copay, only the deductible, or both, subsection (2)(a) of this section does not apply.
 - (((d))) <u>(e)</u> Provide instructions for use of equipment;
- (((e) Furnish)) (f) Provide only new equipment to clients ((that)), which include((s)) full manufacturer and dealer warranties. See WAC 182-543-2250(3);
- (((f) Furnish)) (g) Provide documentation of proof of delivery, upon agency request (see WAC 182-543-2200); and
- $((\frac{g}))$ (h) Bill the agency using only the allowed procedure codes listed in the agency's published DME and related supplies, prosthetics and orthotics, medical supplies and related items billing instructions.

AMENDATORY SECTION (Amending WSR 14-08-035, filed 3/25/14, effective 4/25/14)

WAC 182-543-5000 Covered—Prosthetics/orthotics.

- (1) The agency covers, without prior authorization (PA), the following prosthetics and orthotics, with stated limitations:
- (a) Thoracic-hip-knee-ankle orthosis (THKAO) standing frame One every five years.

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- (b) Preparatory, above knee "PTB" type socket, non-alignable system, pylon, no cover, SACH foot plaster socket, molded to model One per lifetime, per limb.
- (c) Preparatory, below knee "PTB" type socket, non-alignable system, pylon, no cover, SACH foot thermoplastic or equal, direct formed One per lifetime, per limb.
- (d) Socket replacement, below the knee, molded to patient model One per twelve-month period, per limb.
- (e) Socket replacement, above the knee/knee disarticulation, including attachment plate, molded to patient model One per twelve-month period, per limb.
- (f) All other prosthetics and orthotics are limited to one per twelve-month period per limb.
- (2) The agency pays only licensed prosthetic and orthotic providers to supply prosthetics and orthotics. This <u>licensure</u> requirement does not apply to the following:
- (a) ((Selected prosthetics and orthotics that do not require specialized skills to provide; and)) Providers who are not required to have specialized skills to provide select orthotics, but meet DME and pharmacy provider licensure requirements;
- (b) Occupational therapists providing orthotics who are licensed by the Washington state department of health in occupational therapy; and
- (c) Out-of-state providers, who must meet the licensure requirements of that state.
- (3) The agency pays only for prosthetics or orthotics that are listed as such by the Centers for Medicare and Medicaid Services (CMS), that meet the definition of prosthetic or orthotic ((as defined)) in WAC 182-543-1000 and are prescribed ((per)) under WAC 182-543-1100 and 182-543-1200.
- (4) The agency pays for repair or modification of a client's current prosthesis. To receive payment, all of the following must be met:
 - (a) All warranties are expired;
- (b) The cost of the repair or modification is less than fifty percent of the cost of a new prosthesis and the provider has submitted supporting documentation; and
- (c) The repair ((is warranted)) must have a warranty for a minimum of ninety days.
- (5) ((The agency requires the client to take responsibility)) Clients are responsible for routine maintenance of ((a)) their prosthetic or orthotic. If ((the)) a client does not have the physical or mental ability to perform ((the)) this task, ((the agency requires)) the client's caregiver ((to be responsible)) is responsible for routine maintenance of the prosthetic or orthotic. The agency requires ((prior authorization)) PA for extensive maintenance to a prosthetic or orthotic.
- (6) For prosthetics dispensed for ((purely)) cosmetic reasons only, see WAC 182-543-6000((, Noncovered-DME)) DME and related supplies, medical supplies and related services—Noncovered.

AMENDATORY SECTION (Amending WSR 16-03-042, filed 1/14/16, effective 2/14/16)

WAC 182-545-200 Outpatient rehabilitation (occupational therapy, physical therapy, and speech therapy). (1) The following health professionals may enroll with the agency((, as defined in WAC 182-500-0010,)) to provide out-

patient rehabilitation (which includes occupational therapy, physical therapy, and speech therapy) within their scope of practice to eligible ((persons)) clients:

- (a) A physiatrist;
- (b) A licensed occupational therapist;
- (c) A licensed occupational therapy assistant (OTA) supervised by a licensed occupational therapist;
 - (d) A licensed physical therapist;
- (e) A physical therapist assistant supervised by a licensed physical therapist;
- (f) A speech-language pathologist who has been granted a certificate of clinical competence by the American Speech, Hearing and Language Association;
- (g) A speech-language pathologist who has completed the equivalent educational and work experience necessary for such a certificate; and
- (h) A licensed optometrist to provide vision occupational therapy only.
- (2) ((Persons)) Clients covered by one of the Washington apple health programs listed in the table in WAC 182-501-0060 or receiving home health care services as described in chapter 182-551 WAC (subchapter II) are eligible to receive outpatient rehabilitation as described in this chapter.
- (3) ((Persons who are)) <u>Clients</u> enrolled in an agency-contracted managed care organization (MCO) must arrange for outpatient rehabilitation directly through ((his or her)) their agency-contracted MCO.
- (4) The agency pays for outpatient rehabilitation when the services are:
 - (a) Covered;
 - (b) Medically necessary;
- (c) Within the scope of the eligible person's medical care program;
 - (d) Ordered by:
- (i) A physician((, physician assistant (PA), or an advanced registered nurse practitioner (ARNP))) as defined in WAC 182-500-0085; or
- (ii) An optometrist, if the ordered services are for occupational therapy only.
- (e) Within currently accepted standards of evidence-based medical practice;
- (f) Authorized, as required within this chapter, chapters 182-501 and 182-502 WAC, and the agency's published billing instructions ((and provider notices));
- (g) Begun within thirty calendar days of the date ordered;
- (h) Provided by one of the health professionals listed in subsection (1) of this section;
- (i) Billed according to this chapter, chapters 182-501 and 182-502 WAC, and the agency's published billing instructions ((and provider notices)); and
 - (j) Provided as part of an outpatient treatment program:
 - (i) In an office or outpatient hospital setting;
- (ii) In the home, by a home health agency as described in chapter 182-551 WAC;
- (iii) In a neurodevelopmental center, as described in WAC 182-545-900; or
- (iv) For children with disabilities, age two or younger, in natural environments including the home and community set-

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ting in which children without disabilities participate, to the maximum extent appropriate to the needs of the child.

- (5) For eligible ((persons,)) <u>clients age</u> twenty ((years of age)) and younger, the agency covers unlimited outpatient rehabilitation.
- (6) For ((persons)) clients age twenty-one ((years of age)) and older, the agency covers a limited outpatient rehabilitation benefit.
- (7) Outpatient rehabilitation services for ((persons)) <u>clients age</u> twenty-one ((years of age)) and older must:
- (a) Restore, improve, or maintain the person's level of function that has been lost due to medically documented injury or illness; and
- (b) Include an on-going management plan for the ((person and/or the person's)) client or the client's caregiver to support timely discharge and continued progress.
- (8) For eligible ((adults,)) <u>clients age</u> twenty-one ((years of age)) and older, the agency limits coverage of outpatient rehabilitation as follows:
 - (a) Occupational therapy, per person, per year:
 - (i) Without authorization:
 - (A) One occupational therapy evaluation;
- (B) One occupational therapy reevaluation at time of discharge; and
- (C) Twenty-four units of occupational therapy, (((+)) which ((+) is approximately six hours(+).
- (ii) With expedited prior authorization, up to twenty-four additional units of occupational therapy may be available to continue treatment initiated under the original twenty-four units when the criteria below is met:
- (A) To continue treatment of the original qualifying condition: and
- (B) The ((person's)) <u>client's</u> diagnosis is any of the following:
 - (I) Acute, open, or chronic nonhealing wounds;
- (II) Brain injury, which occurred within the past twenty-four months, with residual cognitive ((and/or)) or functional deficits:
 - (III) Burns Second or third degree only;
- (IV) Cerebral vascular accident, which occurred within the past twenty-four months, with residual cognitive ((and/or)) or functional deficits;
 - (V) Lymphedema;
- (VI) Major joint surgery Partial or total replacement only;
- (VII) Muscular-skeletal disorders such as complex fractures ((which)) that required surgical intervention, or ((surgeries)) surgery involving spine or extremities (e.g., arm, hand, shoulder, leg, foot, knee, or hip);
- (VIII) Neuromuscular disorders ((which)) that are affecting function (e.g., amyotrophic lateral sclerosis (ALS), active infective polyneuritis (Guillain-Barre));
 - (IX) Reflex sympathetic dystrophy;
- (X) Swallowing deficits due to injury or surgery to face, head, or neck;
- (XI) Spinal cord injury ((which)) that occurred within the past twenty-four months, resulting in paraplegia or quadriplegia; or

- (XII) As part of a botulinum toxin injection protocol when botulinum toxin has been prior authorized by the agency.
 - (b) Physical therapy, per person, per year:
 - (i) Without authorization:
 - (A) One physical therapy evaluation;
- (B) One physical therapy reevaluation at time of discharge; and
- (C) Twenty-four units of physical therapy, $((\frac{\cdot}{\cdot}))$ which $(\frac{\cdot}{\cdot})$ is approximately six hours $(\frac{\cdot}{\cdot})$.
- (ii) With expedited prior authorization, up to twenty-four additional units of physical therapy may be available to continue treatment initiated under the original twenty-four units when the criteria below is met:
- (A) To continue treatment of the original qualifying condition; and
 - (B) The person's diagnosis is any of the following:
 - (I) Acute, open, or chronic nonhealing wounds;
- (II) Brain injury, which occurred within the past twentyfour months, with residual functional deficits;
 - (III) Burns Second ((and/or)) or third degree only;
- (IV) Cerebral vascular accident, which occurred within the past twenty-four months, with residual functional deficits;
 - (V) Lymphedema;
- (VI) Major joint surgery Partial or total replacement only;
- (VII) Muscular-skeletal disorders such as complex fractures ((which)) that required surgical intervention, or ((surgeries)) surgery involving spine or extremities (e.g., arm, hand, shoulder, leg, foot, knee, or hip);
- (VIII) Neuromuscular disorders ((which)) that are affecting function (e.g., amyotrophic lateral sclerosis (ALS), active infective polyneuritis (Guillain-Barre));
 - (IX) Reflex sympathetic dystrophy;
- (X) Spinal cord injury, which occurred within the past twenty-four months, resulting in paraplegia or quadriplegia; or
- (XI) As part of a botulinum toxin injection protocol when botulinum toxin has been prior ((approved)) authorized by the agency.
 - (c) Speech therapy, per person, per year:
 - (i) Without authorization:
 - (A) One speech language pathology evaluation;
- (B) One speech language pathology reevaluation at the time of discharge; and
- (C) Six units of speech therapy, $((\frac{\cdot}{\cdot}))$ which $(\frac{\cdot}{\cdot})$ is approximately six hours $(\frac{\cdot}{\cdot})$.
- (ii) With expedited prior authorization, up to six additional units of speech therapy may be available to continue treatment initiated under the original six units when the criteria below is met:
- (A) To continue treatment of the original qualifying condition; and
 - (B) The person's diagnosis is any of the following:
- (I) Brain injury, which occurred within the past twenty-four months, with residual cognitive ((and/or)) or functional deficits;
- (II) Burns of internal organs such as nasal oral mucosa or upper airway;

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- (III) Burns of the face, head, and neck Second or third degree only;
- (IV) Cerebral vascular accident, which occurred within the past twenty-four months, with residual functional deficits:
- (V) Muscular-skeletal disorders such as complex fractures ((which)) that require surgical intervention or surgery involving the vault, base of the skull, face, cervical column, larynx, or trachea;
- (VI) Neuromuscular disorders ((which)) that are affecting function (e.g., amyotrophic lateral sclerosis (ALS), active infection polyneuritis (Guillain-Barre));
- (VII) Speech deficit due to injury or surgery to face, head, or neck;
- (VIII) Speech deficit ((which)) that requires a speech generating device;
- (IX) Swallowing deficit due to injury or surgery to face, head, or neck; or
- (X) As part of a botulinum toxin injection protocol when botulinum toxin has been prior ((approved)) authorized by the agency.
- (d) Durable medical equipment (DME) needs assessments, two per person, per year.
- (e) Orthotics management and training of upper ((and/or)) or lower extremities, or both, two program units, per person, per day.
- (f) ((Orthotic/prosthetic)) Orthotic or prosthetic use, two program units, per person, per year.
- (g) Muscle testing, one procedure, per person, per day. Muscle testing procedures cannot be billed in combination with each other. These procedures can be billed alone or with other physical and occupational therapy procedures.
- (h) Wheelchair needs assessment, one per person, per year.
 - (9) For the purposes of this chapter:
- (a) Each fifteen minutes of timed procedure code equals one unit; and
- (b) Each nontimed procedure code equals one unit, regardless of how long the procedure takes.
 - (10) For expedited prior authorization (EPA):
 - (a) A provider must establish that:
- (i) The person's condition meets the clinically appropriate EPA criteria outlined in this section; and
- (ii) The services are expected to result in a reasonable improvement in the person's condition and achieve the person's therapeutic individual goal within sixty calendar days of initial treatment;
- (b) The appropriate EPA number must be used when the provider bills the agency;
- (c) Upon request, a provider must provide documentation to the agency showing how the person's condition met the criteria for EPA; and
- (d) A provider may request expedited prior authorization once per year, per person, per each therapy type.
- (11) The agency evaluates ((a request for outpatient rehabilitation that is in excess of the limitations or restrictions, according to)) limitation extension (LE) requests under WAC 182-501-0169. ((Prior authorization may be requested)) Providers may submit LE requests for additional units when:

- (a) The criteria for an expedited prior authorization does not apply;
- (b) The number of available units under the EPA have been used and services are requested beyond the limits; or
- (c) A new qualifying condition arises after the initial six visits are used.
- (12) Duplicate services for outpatient rehabilitation are not allowed for the same person when both providers are performing the same or similar procedure(s).
- (13) The agency does not pay separately for outpatient rehabilitation that are included as part of the reimbursement for other treatment programs. This includes, but is not limited to, hospital inpatient and nursing facility services.
- (14) The agency does not reimburse a health care professional for outpatient rehabilitation performed in an outpatient hospital setting when the health care professional is not employed by the hospital. The hospital must bill the agency for the services.

WSR 16-19-033 PROPOSED RULES HEALTH CARE AUTHORITY

(Washington Apple Health) [Filed September 13, 2016, 3:13 p.m.]

Original Notice.

Preproposal statement of inquiry was filed as WSR 16-11-094.

Title of Rule and Other Identifying Information: Home health services, WAC 182-551-2000 General, 182-551-2010 Definitions, 182-551-2020 Eligible persons, 182-551-2030 Skilled services—Requirements, 182-551-2100 Covered skilled nursing services, 182-551-2110 Covered specialized therapy, 182-551-2120 Covered aide services, 182-551-2125 Delivered through telemedicine, 182-551-2130 Noncovered services, 182-551-2200 Eligible providers, 182-551-2210 Provider requirements, 182-551-2220 Provider payments, and 182-500-0075 Medical assistance definitions—N.

Hearing Location(s): Health Care Authority (HCA), Cherry Street Plaza Building, Sue Crystal Conference Room 106A, 626 8th Avenue, Olympia, WA 98504 (metered public parking is available street side around building. A map is available at http://www.hca.wa.gov/documents/directions_to_csp.pdf or directions can be obtained by calling (360) 725-1000), on October 25, 2016, at 10:00 a.m.

Date of Intended Adoption: Not sooner than October 26, 2016.

Submit Written Comments to: HCA Rules Coordinator, P.O. Box 45504, Olympia, WA 98504-5504, delivery 626 8th Avenue, Olympia, WA 98504, e-mail arc@hca.wa.gov, fax (360) 586-9727, by 5:00 p.m. on October 25, 2016.

Assistance for Persons with Disabilities: Contact Amber Lougheed by October 21, 2016, e-mail amber.lougheed@hca.wa.gov, (360) 725-1349, or TTY (800) 848-5429 or 711.

Purpose of the Proposal and Its Anticipated Effects, Including Any Changes in Existing Rules: The agency is amending these rules to comply with new federal regulations under 42 C.F.R. 440 requiring that physicians document the

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occurrence of a face-to-face encounter (including through the use of telemedicine) within reasonable time frames when ordering home health services for medicaid eligible clients. The agency is also aligning these rules with the new final federal rules to clarify that home health services are not restricted to clients who are homebound or to services furnished solely in the home.

Reasons Supporting Proposal: See Purpose above.

Statutory Authority for Adoption: RCW 41.05.021, 41.05.160.

Statute Being Implemented: RCW 41.05.021, 41.05.160. Rule is necessary because of federal law, amendment to 42 C.F.R. Section 440.70 (effective July 1, 2016).

Name of Proponent: HCA, governmental.

Name of Agency Personnel Responsible for Drafting: Melinda Froud, P.O. Box 42716, Olympia, WA 98504-2716, (360) 725-1408; Implementation and Enforcement: Nancy Hite, P.O. Box 45506, Olympia, WA 98504-5506, (360) 725-1611.

No small business economic impact statement has been prepared under chapter 19.85 RCW. The agency is not required to prepare a small business economic impact statement under RCW 19.85.025(3), as this rule making is for the sole purpose of complying with an amendment to 42 C.F.R. Section 440.70 (effective July 1, 2016). If these rules are not adopted, the state cannot claim a federal match for certain home health services, resulting in lost funding for the agency.

A cost-benefit analysis is not required under RCW 34.05.328. RCW 34.05.328 does not apply to HCA rules unless requested by the joint administrative rules review committee or applied voluntarily.

September 13, 2016 Wendy Barcus Rules Coordinator

<u>AMENDATORY SECTION</u> (Amending WSR 13-19-037, filed 9/11/13, effective 10/12/13)

WAC 182-500-0075 Medical assistance definitions—N. "National correct coding initiative (NCCI)" is a national standard for the accurate and consistent description of medical goods and services using procedural codes. The standard is based on coding conventions defined in the American Medical Association's Current Procedural Terminology (CPT®) manual, current standards of medical and surgical coding practice, input from specialty societies, and analysis of current coding practices. The Centers for Medicare and Medicaid Services (CMS) maintain NCCI policy. Information can be found at: http://www.cms.hhs.gov/National CorrectCodInitEd/.

"National provider indicator (NPI)" is a federal system for uniquely identifying all providers of health care services, supplies, and equipment.

"NCCI edit" is a software step used to determine if a claim is billing for a service that is not in accordance with federal and state statutes, federal and state regulations, agency or the agency's designee's fee schedules, billing instructions, and other publications. The agency or the agency's designee has the final decision whether the NCCI edits allow automated payment for services that were not

billed in accordance with governing law, NCCI standards or agency or agency's designee policy.

"Nonapplying spouse" see "spouse" in WAC 182-500-0100.

"Nonbilling provider" is a health care professional enrolled with the agency only as an ordering, referring, prescribing provider for the Washington medicaid program and who is not otherwise enrolled as a medicaid provider with the agency.

"Noncovered service" see "covered service" in WAC 182-500-0020.

"Nonphysician practitioner" means a nurse practitioner or clinical nurse specialist, certified nurse midwife, or a physician assistant who works in collaboration with an ordering physician.

"Nursing facility" see "institution" in WAC 182-500-0050.

"Nursing facility long-term care services" are services in a nursing facility when a person does not meet the criteria for rehabilitation. Most long-term care assists people with support services. (Also called custodial care.)

"Nursing facility rehabilitative services" are the planned interventions and procedures which constitute a continuing and comprehensive effort to restore a person to the person's former functional and environmental status, or alternatively, to maintain or maximize remaining function.

AMENDATORY SECTION (Amending WSR 16-03-035, filed 1/12/16, effective 2/12/16)

WAC 182-551-2000 ((Home health services—))General. The purpose of the medicaid agency's home health program is to reduce the costs of health care services by providing equally effective, less restrictive quality care to the client in ((the elient's residence)) a setting where the client's normal life activities take place, subject to the restrictions and limitations in subchapter II.

Home health skilled services are provided for acute, intermittent, short-term, and intensive courses of treatment. See chapters 182-514 and 388-71 WAC for programs administered to clients who need chronic, long-term maintenance care

AMENDATORY SECTION (Amending WSR 16-03-035, filed 1/12/16, effective 2/12/16)

WAC 182-551-2010 ((Home health services—))Definitions. The following definitions and abbreviations and those found in chapter 182-500 WAC apply to subchapter II:

"Acute care" means care provided by a home health agency for clients who are not medically stable or have not attained a satisfactory level of rehabilitation. These clients require frequent intervention by a registered nurse or licensed therapist.

"Brief skilled nursing visit" means a registered nurse, or a licensed practical nurse under the supervision of a registered nurse, performs only one of the following activities during a visit to a client:

- (a) An injection;
- (b) Blood draw; or
- (c) Placement of medications in containers.

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"Chronic care" means long-term care for medically stable clients.

"Full skilled nursing visit" means a registered nurse, or a licensed practical nurse under the supervision of a registered nurse, performs one or more of the following activities during a visit to a client:

- (a) Observation;
- (b) Assessment;
- (c) Treatment;
- (d) Teaching;
- (e) Training;
- (f) Management; and
- (g) Evaluation.

"Home health agency" means an agency or organization certified under medicare to provide comprehensive health care on an intermittent or part-time basis to a patient in a setting where the patient's normal life activities take place ((of residence)).

"Home health aide" means a person registered or certified as a nursing assistant under chapter 18.88 RCW who, under the direction and supervision of a registered nurse or licensed therapist, assists in the delivery of nursing or therapy related activities, or both.

"Home health aide services" means services provided by a home health aide only when a client has an acute, intermittent, short-term need for the services of a registered nurse, physical therapist, occupational therapist, or speech therapist who is employed by or under contract with a home health agency. These services are provided under the supervision of the previously identified authorized practitioners and include, but are not limited to, ambulation and exercise, assistance with self-administered medications, reporting changes in a client's condition and needs, and completing appropriate records.

"Home health skilled services" means skilled health care (nursing, specialized therapy, and home health aide) services provided ((in the elient's residence)) on an intermittent or part-time basis by a medicare-certified home health agency with a current provider number in a setting where the client's normal life activities take place. See also WAC 182-551-2000.

"Long-term care" is a generic term referring to various programs and services, including services provided in home and community settings, administered directly or through contract by the department of social and health services' (DSHS) division of developmental disabilities (DDD) or aging and long-term support administration (ALTSA) through home and community services (HCS).

"Plan of care (POC)" (also known as "plan of treatment (POT)") means a written plan of care that is established and periodically reviewed and signed by both an ordering ((licensed practitioner)) physician and a home health agency provider. The plan describes the home health care to be provided ((at the client's residence)) in a setting where the client's normal life activities take place. See WAC 182-551-2210.

(("Residence" means a client's home or place of living. (See WAC 182-551-2030 (2)(g)(ii) for clients in residential facilities whose home health services are not covered through the medicaid agency's home health program.)))

"Review period" means the three-month period the medicaid agency assigns to a home health agency, based on the address of the agency's main office, during which the medicaid agency reviews all claims submitted by that home health agency.

"Specialized therapy" means skilled therapy services provided to clients that include:

- (a) Physical;
- (b) Occupational; or
- (c) Speech/audiology services.

(See WAC 182-551-2110.)

"Telemedicine" - For the purposes of WAC 182-551-2000 through 182-551-2220, means the use of telemonitoring to enhance the delivery of certain home health skilled nursing services through:

- (a) The collection and transmission of clinical data between a patient at a distant location and the home health provider through electronic processing technologies. Objective clinical data that may be transmitted includes, but is not limited to, weight, blood pressure, pulse, respirations, blood glucose, and pulse oximetry; or
- (b) The provision of certain education related to health care services using audio, video, or data communication instead of a face-to-face visit.

AMENDATORY SECTION (Amending WSR 14-07-042, filed 3/12/14, effective 4/12/14)

WAC 182-551-2020 ((Home health services—))Eligible persons. (1) Persons in the Washington apple health (((WAH))) fee-for-service programs listed in the table in WAC 182-501-0060 are eligible to receive home health services subject to the limitations described in this chapter. Persons enrolled in an agency-contracted managed care organization (MCO) receive all home health services through their designated plan.

- (2) The agency does not cover home health services under the home health program for persons in the ((CNP-emergency)) categorically needy-emergency medical only and ((LCP-MNP-emergency)) medically needy-emergency medical only programs. The agency or its designee evaluates a request for home health skilled nursing visits on a case-by-case basis under the provisions of WAC 182-501-0165, and may cover up to two skilled nursing visits within the eligibility enrollment period if the following criteria are met:
- (a) The person requires hospital care due to an emergency medical condition as described in WAC 182-500-0030; and
- (b) The agency or its designee authorizes up to two skilled nursing visits for follow-up care related to the emergent medical condition.

AMENDATORY SECTION (Amending WSR 16-03-035, filed 1/12/16, effective 2/12/16)

WAC 182-551-2030 ((Home health)) Skilled services—Requirements. (1) The medicaid agency reimburses for covered home health skilled services provided to eligible clients, subject to the restrictions or limitations in this section and other applicable published WAC.

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- (2) Home health skilled services provided to eligible clients must:
- (a) Meet the definition of "acute care" in WAC 182-551-2010.
- (b) Provide for the treatment of an illness, injury, or disability.
- (c) Be medically necessary as defined in WAC 182-500-0070.
- (d) Be reasonable, based on the community standard of care, in amount, duration, and frequency.
- (e) Be the result of a client's face-to-face encounter with the ordering physician or a nonphysician practitioner, as defined in WAC 182-500-0075, within ninety days before or within thirty days after the start of services.
- (i) The face-to-face encounter may be conducted by the ordering physician or a nonphysician practitioner, as defined in WAC 182-500-0075, who is working in collaboration with the ordering physician;
- (ii) Nonphysician practitioners performing the face-toface encounter must communicate the clinical findings to the ordering physician and document the clinical findings in the client's record;
- (iii) The ordering physician responsible for ordering the services must:
- (A) Document the face-to-face encounter, including justification that the services are related to the primary reason for home health; and
- (B) Indicate the practitioner who conducted the encounter, if not the ordering physician, along with the date of the encounter.
- (iv) The face-to-face encounter may occur through telemedicine.
- (f) Be provided under a plan of care (POC), as defined in WAC 182-551-2010 and described in WAC 182-551-2210. Any statement in the POC must be supported by documentation in the client's medical records.
- (((f))) (g) Be used to prevent placement in a more restrictive setting. In addition, the client's medical records must justify the medical ((reason(s))) reason or reasons that the services should be provided ((in)) and why instructing the client would be most effectively done in a setting where the client's ((residence)) normal life activities take place instead of at an ordering ((lieensed practitioner's)) physician's office, clinic, or other outpatient setting. ((This includes justification for services for a client's medical condition that requires teaching that would be most effectively accomplished in the client's home on a short-term basis.
- (g))) (h) Be provided in a setting where the client's ((residence)) normal life activities take place.
- (i) The medicaid agency does not reimburse for services ((if)) provided at ((the workplace, school, child day care)) a hospital, adult day care, skilled nursing facility, intermediate care facility for individuals with intellectual disabilities, or any other place ((that is not the client's place of residence)) contracted with the state and paid by another program for inpatient services that includes room and board.
- (ii) Clients in residential facilities contracted with the state and paid by other programs, such as home and community programs to provide limited skilled nursing services, are not eligible for medicaid agency-funded, limited skilled nurs-

ing services unless the services are prior authorized under WAC 182-501-0165.

- $((\frac{h}{h}))$ (i) Be provided by:
- (i) A home health agency that is Title XVIII (medicare)-certified;
- (ii) A registered nurse (RN) prior authorized by the medicaid agency when no home health agency exists in the area ((a client resides)) where the client's normal life activities take place: or
- (iii) An RN authorized by the medicaid agency when the RN cannot contract with a medicare-certified home health agency.
- (3) Homebound status is not required for an eligible client to receive home health services.

AMENDATORY SECTION (Amending WSR 16-03-035, filed 1/12/16, effective 2/12/16)

- WAC 182-551-2100 ((Home health services—))Covered skilled nursing services. (1) The medicaid agency covers home health acute care skilled nursing services listed in this section when furnished by a qualified provider. The medicaid agency evaluates a request for covered services that are subject to limitations or restrictions, and approves the services beyond those limitations or restrictions when medically necessary, under the standard for covered services in WAC 182-501-0165.
- (2) The medicaid agency covers the following home health acute care skilled nursing services, subject to the limitations in this section:
- (a) Full skilled nursing services that require the skills of a registered nurse or a licensed practical nurse under the supervision of a registered nurse, if the services involve one or more of the following:
 - (i) Observation;
 - (ii) Assessment;
 - (iii) Treatment;
 - (iv) Teaching;
 - (v) Training;
 - (vi) Management; and
 - (vii) Evaluation.
- (b) A brief skilled nursing visit if only one of the following activities is performed during the visit:
 - (i) An injection;
 - (ii) Blood draw; or
- (iii) Placement of medications in containers (e.g., envelopes, cups, medisets).
 - (c) Home infusion therapy only if the client:
- (i) Is willing and capable of learning and managing the client's infusion care; or
- (ii) Has a volunteer caregiver willing and capable of learning and managing the client's infusion care.
- (d) Infant phototherapy for an infant diagnosed with hyperbilirubinemia:
- (i) When provided by a medicaid agency-approved infant phototherapy agency; and
 - (ii) For up to five skilled nursing visits per infant.
 - (e) Limited high-risk obstetrical services:

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- (i) For a medical diagnosis that complicates pregnancy and may result in a poor outcome for the mother, unborn, or newborn;
 - (ii) For up to three home health visits per pregnancy if:
- (A) Enrollment in or referral to the following providers of first steps has been verified:
 - (I) Maternity support services (MSS); or
 - (II) Maternity case management (MCM); and
- (B) The visits are provided by a registered nurse who has either:
 - (I) National perinatal certification; or
- (II) A minimum of one year of labor, delivery, and postpartum experience at a hospital within the last five years.
- (3) The medicaid agency limits skilled nursing visits provided to eligible clients to two per day.

AMENDATORY SECTION (Amending WSR 16-04-026, filed 1/25/16, effective 3/1/16)

WAC 182-551-2110 ((Home health services—))Covered specialized therapy. The medicaid agency covers outpatient rehabilitation and habilitative services ((in an in-home setting by a home health agency)) by a home health agency in a setting where the client's normal life activities take place. Outpatient rehabilitation and habilitative services are described in chapter 182-545 WAC. Specialized therapy is defined in WAC 182-551-2010.

AMENDATORY SECTION (Amending WSR 16-03-035, filed 1/12/16, effective 2/12/16)

WAC 182-551-2120 ((Home health services—))Covered aide services. (1) The medicaid agency pays for one home health aide visit, per client per day.

- (2) The medicaid agency reimburses for home health aide services, as defined in WAC 182-551-2010, only when the services are provided under the supervision of, and in conjunction with, practitioners who provide:
 - (a) Skilled nursing services; or
 - (b) Specialized therapy services.
- (3) The medicaid agency covers home health aide services only when a registered nurse or licensed therapist visits the ((elient's residence)) client at least once every fourteen days to monitor or supervise home health aide services, with or without the presence of the home health aide, in a setting where the client's normal life activities take place.

AMENDATORY SECTION (Amending WSR 16-03-035, filed 1/12/16, effective 2/12/16)

WAC 182-551-2125 ((Home health services))Delivered through telemedicine. (1) The medicaid agency covers the delivery of home health services through telemedicine for clients who have been diagnosed with an unstable condition who may be at risk for hospitalization or a more costly level of care. The client must have a ((diagnosis(es))) diagnosis or diagnoses where there is a high risk of sudden change in clinical status which could compromise health outcomes.

(2) The medicaid agency pays for one telemedicine interaction, per eligible client, per day, based on the ordering

- ((licensed practitioner's)) physician's home health plan of care.
- (3) To receive payment for the delivery of home health services through telemedicine, the services must involve:
- (a) An assessment, problem identification, and evaluation which includes:
- (i) Assessment and monitoring of clinical data including, but not limited to, vital signs, pain levels and other biometric measures specified in the plan of care. Also includes assessment of response to previous changes in the plan of care; and
- (ii) Detection of condition changes based on the telemedicine encounter that may indicate the need for a change in the plan of care; and
- (b) Implementation of a management plan through one or more of the following:
- (i) Teaching regarding medication management as appropriate based on the telemedicine findings for that encounter;
- (ii) Teaching regarding other interventions as appropriate to both the patient and the caregiver;
- (iii) Management and evaluation of the plan of care including changes in visit frequency or addition of other skilled services;
- (iv) Coordination of care with the ordering ((licensed practitioner)) physician regarding telemedicine findings;
- (v) Coordination and referral to other medical providers as needed; and
 - (vi) Referral to the emergency room as needed.
- (4) The medicaid agency does not require prior authorization for the delivery of home health services through telemedicine.
- (5) The medicaid agency does not pay for the purchase, rental, or repair of telemedicine equipment.

AMENDATORY SECTION (Amending WSR 16-03-035, filed 1/12/16, effective 2/12/16)

WAC 182-551-2130 ((Home health services—))Non-covered services. (1) The medicaid agency does not cover the following home health services under the home health program, unless otherwise specified:

- (a) Chronic long-term care skilled nursing visits or specialized therapy visits for a medically stable client when a long-term care skilled nursing plan or specialized therapy plan is in place through the department of social and health services' aging and ((disability services)) long-term support administration (((ADSA))) (ALTSA).
- (i) The medicaid agency considers requests for interim chronic long-term care skilled nursing services or specialized therapy services for a client while the client is waiting for ((ADSA)) ALTSA to implement a long-term care skilled nursing plan or specialized therapy plan; and
- (ii) On a case-by-case basis, the medicaid agency may authorize long-term care skilled nursing visits or specialized therapy visits for a client for a limited time until a long-term care skilled nursing plan or specialized therapy plan is in place. Any services authorized are subject to the restrictions and limitations in this section and other applicable published WAC.

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- (b) Social work services.
- (c) Psychiatric skilled nursing services.
- (d) Pre- and postnatal skilled nursing services, except as listed under WAC 182-551-2100 (2)(e).
 - (e) Well-baby follow-up care.
- (f) Services performed in hospitals, correctional facilities, skilled nursing facilities, or a residential facility with skilled nursing services available.
- (g) Home health aide services that are not provided in conjunction with skilled nursing or specialized therapy services.
- (h) Health care for a medically stable client (e.g., one who does not have an acute episode, a disease exacerbation, or treatment change).
- (i) Home health specialized therapies and home health aide visits for clients in the following programs:
- (i) ((CNP)) <u>Categorically needy</u> Emergency medical only; and
- (ii) ((LCP-MNP)) <u>Medically needy</u> Emergency medical only.
- (j) Skilled nursing visits for a client when a home health agency cannot safely meet the medical needs of that client within home health services program limitations (e.g., for a client to receive infusion therapy services, the caregiver must be willing and capable of managing the client's care).
- (k) More than one of the same type of specialized therapy ((and/or)) and home health aide visit per day.
- (l) The medicaid agency does not reimburse for duplicate services for any specialized therapy for the same client when both providers are performing the same or similar ((procedure(s))) procedure or procedures.
- (m) Home health visits made without a written ((licensed practitioner's)) physician's order, unless the verbal order is:
 - (i) Documented before the visit; and
- (ii) The document is signed by the ordering ((licensed practitioner)) physician within forty-five days of the order being given.
- (2) The medicaid agency does not cover additional administrative costs billed above the visit rate (these costs are included in the visit rate and will not be paid separately).
- (3) The medicaid agency evaluates a request for any service that is listed as noncovered under WAC 182-501-0160.

AMENDATORY SECTION (Amending WSR 16-03-035, filed 1/12/16, effective 2/12/16)

WAC 182-551-2200 ((Home health services—))Eligible providers. The following may contract with the medicaid agency to provide home health services through the home health program, subject to the restrictions or limitations in this section and other applicable published WAC:

- (1) A home health agency that:
- (a) Is Title XVIII (medicare)-certified;
- (b) Is department of health (DOH) licensed as a home health agency;
- (c) Submits a completed, signed core provider agreement to the medicaid agency; and
 - (d) Is assigned a provider number.
 - (2) A registered nurse (RN) who:

- (a) Is prior authorized by the medicaid agency to provide intermittent nursing services when no home health agency exists in the area ((a elient resides)) where the client's normal life activities take place;
- (b) Cannot contract with a medicare-certified home health agency;
- (c) Submits a completed, signed core provider agreement to the medicaid agency; and
 - (d) Is assigned a provider number.

AMENDATORY SECTION (Amending WSR 16-03-035, filed 1/12/16, effective 2/12/16)

WAC 182-551-2210 ((Home health services—))Provider requirements. For any delivered home health service to be payable, the medicaid agency requires home health providers to develop and implement an individualized plan of care (POC) for the client.

- (1) The POC must:
- (a) Be documented in writing and be located in the client's home health medical record;
- (b) Be developed, supervised, and signed by a licensed registered nurse or licensed therapist;
- (c) Reflect the ordering ((licensed practitioner's)) <u>physician's</u> orders and client's current health status;
 - (d) Contain specific goals and treatment plans;
- (e) Be reviewed and revised by an ordering ((licensed practitioner)) physician at least every sixty calendar days, signed by the ordering ((licensed practitioner)) physician within forty-five days of the verbal order, and returned to the home health agency's file; and
- (f) Be available to medicaid agency staff or its designated contractor(s) on request.
- (2) The provider must include all the following in the POC:
- (a) The client's name, date of birth, and address (to include name of residential care facility, if applicable);
- (b) The primary diagnosis (the diagnosis that is most related to the reason the client qualifies for home health services) or the diagnosis that is the reason for the visit frequency;
- (c) All secondary medical diagnoses, including ((date(s))) date or dates of onset or exacerbation;
 - (d) The prognosis;
- (e) The ((type(s))) type or types of equipment required, including telemedicine as appropriate;
- (f) A description of each planned service and goals related to the services provided;
 - (g) Specific procedures and modalities;
 - (h) A description of the client's mental status;
 - (i) A description of the client's rehabilitation potential;
 - (j) A list of permitted activities;
- (k) A list of safety measures taken on behalf of the client; and
 - (l) A list of medications which indicates:
 - (i) Any new prescription; and
- (ii) Which medications are changed for dosage or route of administration.
 - (3) The provider must include in or attach to the POC:

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- (a) A description of the client's functional limits and the effects:
- (b) Documentation that justifies why the medical services should be provided in ((the client's residence)) a setting where the client's life activities take place instead of an ordering ((licensed practitioner's)) physician's office, clinic, or other outpatient setting;
 - (c) Significant clinical findings;
 - (d) Dates of recent hospitalization;
- (e) Notification to the department of social and health services (DSHS) case manager of admittance;
- (f) A discharge plan, including notification to the DSHS case manager of the planned discharge date and client disposition at time of discharge; and
- (g) Order for the delivery of home health services through telemedicine, as appropriate.
- (4) The individual client medical record must comply with community standards of practice, and must include documentation of:
 - (a) Visit notes for every billed visit;
- (b) Supervisory visits for home health aide services as described in WAC 182-551-2120(3);
- (c) All medications administered and treatments provided:
- (d) All ((licensed practitioner's)) physician's orders, new orders, and change orders, with notation that the order was received before treatment;
- (e) Signed ((licensed practitioner's)) <u>physician's</u> new orders and change orders;
- (f) Home health aide services as indicated by a registered nurse or licensed therapist in a home health aide care plan;
- (g) Interdisciplinary and multidisciplinary team communications;
 - (h) Inter-agency and intra-agency referrals;
 - (i) Medical tests and results;
 - (j) Pertinent medical history; and
- (k) Notations and charting with signature and title of writer
- (5) The provider must document at least the following in the client's medical record:
 - (a) Skilled interventions per the POC;
 - (b) Client response to the POC;
 - (c) Any clinical change in client status;
- (d) Follow-up interventions specific to a change in status with significant clinical findings;
- (e) Any communications with the attending ordering ((licensed practitioner)) physician; and
 - (f) Telemedicine findings, as appropriate.
- (6) The provider must include the following documentation in the client's visit notes when appropriate:
- (a) Any teaching, assessment, management, evaluation, client compliance, and client response;
- (b) Weekly documentation of wound care, size (dimensions), drainage, color, odor, and identification of potential complications and interventions provided;
- (c) If a client's wound is not healing, the client's ordering ((licensed practitioner)) physician has been notified, the client's wound management program has been appropriately altered and, if possible, the client has been referred to a wound care specialist; and

(d) The client's physical system assessment as identified in the POC.

AMENDATORY SECTION (Amending WSR 16-03-035, filed 1/12/16, effective 2/12/16)

WAC 182-551-2220 ((Home health services—))Provider payments. (1) To be reimbursed, the home health provider must bill the medicaid agency according to the conditions of payment under WAC 182-502-0150 and other issuances.

- (2) Payment to home health providers is:
- (a) A set rate per visit for each discipline provided to a client:
- (b) Based on the county location of the providing home health agency; and
 - (c) Updated by general vendor rate changes.
- (3) For clients eligible for both medicaid and medicare, the medicaid agency may pay for services described in this chapter only when medicare does not cover those services. The maximum payment for each service is medicaid's maximum payment.
- (4) Providers must submit documentation to the medicaid agency during the home health agency's review period. Documentation includes, but is not limited to, the requirements listed in WAC 182-551-2210.
- (5) After the medicaid agency receives the documentation, the medicaid agency's medical director or designee reviews the client's medical records for program compliance and quality of care.
- (6) The medicaid agency may take back or deny payment for any insufficiently documented home health care service when the ((department's)) medicaid agency's medical director or designee determines that:
- (a) The service did not meet the conditions described in WAC 182-550-2030; or
- (b) The service was not in compliance with program policy.
- (7) Covered home health services for clients enrolled in a Healthy Options managed care plan are paid for by that plan.

WSR 16-19-038 proposed rules DEPARTMENT OF HEALTH

[Filed September 14, 2016, 10:13 a.m.]

Original Notice.

Preproposal statement of inquiry was filed as WSR 13-15-005.

Title of Rule and Other Identifying Information: Chapter 246-310 WAC, Certificate of need (CoN), the department of health (department) is proposing revision of current criteria, standards, and need methodology for kidney disease treatment centers rules.

Hearing Location(s): Town Center 2, Room 145, 111 Israel Road S.E., Tumwater, WA 98501, on October 25, 2016, at 10:30 a.m.

Date of Intended Adoption: November 1, 2016.

Proposed [18]

Submit Written Comments to: Katherine Hoffman, P.O. Box 47852, Olympia, WA 98504-7852, e-mail https://fortress.wa.gov/doh/policyreview, fax (360) 236-2979, by October 25, 2016.

Assistance for Persons with Disabilities: Contact Katherine Hoffman by October 20, 2016, TTY (800) 833-6388 or 711.

Purpose of the Proposal and Its Anticipated Effects, Including Any Changes in Existing Rules: The proposed changes repeal WAC 246-310-280, 246-310-282, 246-310-284, 246-310-286, 246-310-287, 246-310-288 and 246-310-289, and establish new sections WAC 246-310-800 through 246-310-833. The proposed revisions provide substantive guidance regarding the kidney disease treatment center application review process by describing and clarifying existing methodology for predicting future need for kidney dialysis treatment centers. The proposed changes will establish consistent, timely, and efficient decision making by the department, and will result in an increase to patient access to affordable, quality health care.

Reasons Supporting Proposal: The current kidney dialysis rules went into effect in January 2007, and require modernization. These proposed revisions are necessary to remain current and in alignment with national industry standards, guidelines, best practices, and demographic shifts. The proposed rules also increase department decision-making transparency, efficiency, and consistency while reducing applicant burden. The proposed rules support the statutory goals of chapter 70.38 RCW by making sure that patients have access to affordable, quality healthcare.

Statutory Authority for Adoption: RCW 70.38.135. Statute Being Implemented: RCW 70.38.115.

Rule is not necessitated by federal law, federal or state court decision.

Name of Proponent: Washington state department of health, governmental.

Name of Agency Personnel Responsible for Drafting, Implementation, and Enforcement: Katherine Hoffman, 111 Israel Road S.E., Tumwater, WA 98501, (360) 236-2979.

No small business economic impact statement has been prepared under chapter 19.85 RCW. The proposed rule would not impose more than minor costs on businesses in an industry.

A cost-benefit analysis is required under RCW 34.05.328. A preliminary cost-benefit analysis may be obtained by contacting Katherine Hoffman, P.O. Box 47852, 111 Israel Road S.E., phone (360) 236-2979, fax (360) 236-2321, e-mail katherine.hoffman@doh.wa.gov.

September 12, 2016 John Wiesman, DrPH, MPH Secretary

NEW SECTION

WAC 246-310-800 Kidney disease treatment centers—Definitions. The definitions in this section apply to WAC 246-310-800 through 246-310-833, unless the context clearly indicates otherwise:

(1) "Affiliate" or "affiliated" means:

- (a) Having at least a ten percent but less than one hundred percent ownership in a kidney dialysis facility;
- (b) Having at least a ten percent but less than one hundred percent financial interest in a kidney dialysis facility; or
- (c) Three years or more operational management responsibilities for a kidney dialysis facility.
- (2) "Base year" means the most recent calendar year for which December 31 data is available as of the first day of the application submission period from the *Northwest Renal Network's Modality Report*.
- (3) "Capital expenditures," as defined by *Generally Accepted Accounting Principles* (GAAP), means expenditures made to acquire tangible long-lived assets. Long-lived assets represent property and equipment used in a company's operations that have an estimated useful life greater than one year. Acquired long-lived assets are recorded at acquisition cost and include all costs incurred necessary to bring the asset to working order. Capital expenditure includes:
- (a) A force account expenditure or acquisition (i.e., an expenditure for a construction project undertaken by a facility as its own contractor).
- (b) The costs of any site planning services (architect or other site planning consultant) including, but not limited to, studies, surveys, designs, plans, working drawings, specifications, and other activities (including applicant staff payroll and employee benefit costs, consulting and other services which, under GAAP or Financial Accounting Standards Board (FASB) may be chargeable as an operating or nonoperating expense).
 - (c) Construction cost of shelled space.
- (d) Building owner tenant improvements including, but not limited to: Asbestos removal, paving, concrete, contractor's general conditions, contractor's overhead and profit, electrical, heating, ventilation and air conditioning systems (HVAC), plumbing, flooring, rough and finish carpentry and millwork and associated labor and materials, and utility fees.
 - (e) Donations of equipment or facilities to a facility.
- (f) Capital expenditures do not include routine repairs and maintenance costs that do not add to the utility of useful life of the asset.
- (4) "Concurrent review" means the process by which applications competing to provide services in the same planning area are reviewed simultaneously by the department.
- (5) "Dialysis facility report (DFR)" means the kidney dialysis facility reports produced annually for Centers for Medicare and Medicaid Services (CMS). The DFR is provided to individual dialysis facilities and contains summary data on each facility compiled from multiple sources. The DFR provides patient characteristics, treatment patterns, transplantation rates, hospitalization rates, and mortality rates to local and national averages.
- (6) "Dialysis facility compare (DFC) report" means the kidney dialysis facility compare quarterly report that is produced by CMS and posted on the medicare DFC web site. This report provides information about statistically measurable practice patterns in kidney disease treatment facilities including, but not limited to, mortality, hospitalization, late shifts, and availability of home training.

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- (7) "End-of-year data" means data contained in the fourth quarter modality report or successor report from the Northwest Renal Network.
- (8) "End-of-year in-center patients" means the number of in-center hemodialysis (HD) and self-dialysis training patients receiving in-center kidney dialysis at the end of the calendar year based on end-of-year data.
- (9) "Exempt isolation station" means one certificate of need approved certified station per facility dedicated to patients requiring medically necessary isolation. This station may not be used for nonisolation treatments. This one approved station is included in the kidney dialysis facility's total CMS certified station count. However, for purposes of certificate of need, this one isolation station is not included in the facility's station count for projecting future station need or in calculating existing station use. Providers may operate more than one isolation station, but only one is excluded from the facility's station count for purposes of projecting future station need and in calculating existing station use.
- (10) "Kidney disease treatment center" or "kidney dialysis facility" means any place, institution, building or agency or a distinct part thereof equipped and operated to provide services, including outpatient dialysis, to persons who have end-stage renal disease (ESRD). In no case will all stations at a given kidney disease treatment center or kidney dialysis facility be designated as self-dialysis training stations. For purposes of these rules, kidney disease treatment center and kidney dialysis facility have the same meaning.
- (11) "Maximum treatment floor area square footage" means the sum of (a), (b), (c), and (d) of this subsection:
- (a) One hundred fifty square feet multiplied for each general use in-center station and each nonisolation station;
- (b) Two hundred square feet multiplied for each isolation station and each permanent bed station;
- (c) Three hundred square feet for future expansion of two in-center treatment stations; and
- (d) Other treatment floor space is seventy-five percent of the sum of (a), (b), and (c) of this subsection.

As of the effective date of these rules, maximum treatment floor area square footage identified in a successful application cannot be used for future station expansion, except as provided in (c) of this subsection. For example, the applicant may use the maximum allowable treatment floor area square footage. The number of stations may include one isolation station, one permanent bed, eight general use incenter stations, two future expansion stations, and maximum other treatment floor space. In this example, the total maximum treatment floor area square footage in this example would equal three thousand three hundred twenty-five square feet.

- (12) "Operational" means the date when the kidney dialysis facility provides its first dialysis treatment in newly approved certificate of need stations, including relocated stations.
- (13) "Patients per station" means the reported number of in-center patients at the kidney dialysis facility divided by counted certificate of need approved stations. The results are not rounded up. For example, 4.49 is not rounded to 4.5.
- (14) "Permanent bed" means a bed that would commonly be used in a health care setting.

- (15) "Planning area" or "service area" means an individual geographic area designated by the department for which kidney dialysis station need projections are calculated. For purposes of kidney dialysis projects, planning area and service area have the same meaning, and each county is considered a separate planning area, except for the planning subareas identified for King, Snohomish, Pierce, and Spokane counties. If the United States Postal Service (USPS) changes zip codes in the defined planning areas, the department will update areas to reflect the revisions to the zip codes to be included in the certificate of need definitions, analyses and decisions. Post office boxes are not included.
- (a) King County is divided by zip code into twelve planning areas as follows:

KING ONE	KING TWO	KING THREE		
98028 Kenmore	98101 Business District	98070 Vashon		
98103 Green Lake	98102 Eastlake	98106 White Center/West Seattle		
98105 Laurelhurst	98104 Business District	98116 Alki/West Seattle		
98107 Ballard	98108 Georgetown	98126 West Seattle		
98115 View Ridge/Wedgwood	98109 Queen Anne	98136 West Seattle		
98117 Crown Hill	98112 Madison/Capi- tol Hill	98146 West Seattle		
98125 Lake City	98118 Columbia City	98168 Riverton		
98133 Northgate	98119 Queen Anne			
98155 Shoreline/Lake Forest Park	98121 Denny Regrade			
98177 Richmond Beach	98122 Madrona			
98195 University of Washington	98134 Harbour Island			
	98144 Mt. Baker/Rain- ier Valley			
	98199 Magnolia			

KING FOUR	KING FIVE	KING SIX
98148 SeaTac	98003 Federal Way	98011 Bothell
98158 SeaTac	98023 Federal Way	98033 Kirkland
98166 Burien/Nor- mandy Park		98034 Kirkland
98188 Tuk- wila/SeaTac		98052 Redmond
98198 Des Moines		98053 Redmond
		98072 Woodinville
		98077 Woodinville

KING SEVEN	KING EIGHT	KING NINE
98004 Bellevue	98014 Carnation	98055 Renton
98005 Bellevue	98019 Duvall	98056 Renton
98006 Bellevue	98024 Fall City	98057 Renton
98007 Bellevue	98045 North Bend	98058 Renton
98008 Bellevue	98065 Snoqualmie	98059 Renton
98039 Medina	98027 Issaquah	98178 Skyway
98040 Mercer Island	98029 Issaquah	
	98074 Sammamish	

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KING SEVEN	KING EIGHT	KING NINE
	98075 Sammamish	

KING TEN	KING ELEVEN	KING TWELVE
98030 Kent	98001 Auburn	98022 Enumclaw
98031 Kent	98002 Auburn	
98032 Kent	98010 Black Diamond	
98038 Maple Valley	98047 Pacific	
98042 Kent	98092 Auburn	
98051 Ravensdale		

(b) Pierce County is divided into five planning areas as follows:

PIERCE ONE	PIERCE TWO	PIERCE THREE	
98354 Milton	98304 Ashford	98329 Gig Harbor	
98371 Puyallup	98323 Carbonade	98332 Gig Harbor	
98372 Puyallup	98328 Eatonville	98333 Fox Island	
98373 Puyallup	98330 Elbe	98335 Gig Harbor	
98374 Puyallup	98360 Orting	98349 Lakebay	
98375 Puyallup	98338 Graham	98351 Longbranch	
98390 Sumner	98321 Buckley	98394 Vaughn	
98391 Bonney Lake			

PIERCE FOUR	PIERCE FIVE
98402 Tacoma	98303 Anderson Island
98403 Tacoma	98327 DuPont
98404 Tacoma	98387 Spanaway
98405 Tacoma	98388 Steilacoom
98406 Tacoma	98430 Tacoma
98407 Ruston	98433 Tacoma
98408 Tacoma	98438 Tacoma
98409 Lakewood	98439 Lakewood
98416 Tacoma	98444 Parkland
98418 Tacoma	98445 Parkland
98421 Tacoma	98446 Parkland
98422 Tacoma	98447 Tacoma
98424 Fife	98467 University Place
98443 Tacoma	98498 Lakewood
98465 Tacoma	98499 Lakewood
98466 Fircrest	98580 Roy

(c) Snohomish County is divided into three planning areas as follows:

SNOHOMISH ONE	SNOHOMISH TWO	SNOHOMISH THREE
98223 Arlington	98201 Everett	98012 Mill Creek/Bothell
98241 Darrington	98203 Everett	98020 Edmonds/Woodway
98252 Granite Falls	98204 Everett	98021 Bothell
98271 Tulalip Reservation/ Marysville	98205 Everett	98026 Edmonds
98282 Camano Island	98208 Everett	98036 Lynnwood/Brier

SNOHOMISH ONE	SNOHOMISH TWO	SNOHOMISH THREE		
98292 Stanwood	98251 Gold Bar	98037 Lynnwood		
	98224 Baring	98043 Mountlake Terrace		
	98258 Lake Stevens	98087 Lynnwood		
	98270 Marysville	98296 Snohomish		
	98272 Monroe			
	98275 Mukilteo			
	98288 Skykomish			
	98290 Snohomish			
	98294 Sultan			

(d) Spokane County is divided into two planning areas as follows:

SPOKANE ONE	SPOKANE TWO
99001 Airway Heights	99003 Chattaroy
99004 Cheney	99005 Colbert
99011 Fairchild Air Force Base	99006 Deer Park
99012 Fairfield	99009 Elk
99016 Greenacres	99021 Mead
99018 Latah	99025 Newman Lake
99019 Liberty Lake	99026 Nine Mile Falls
99022 Medical Lake	99027 Otis Orchards
99023 Mica	99205 Spokane
99030 Rockford	99207 Spokane
99031 Spangle	99208 Spokane
99036 Valleyford	99217 Spokane
99037 Veradale	99218 Spokane
99201 Spokane	99251 Spokane
99202 Spokane	
99203 Spokane	
99204 Spokane	
99206 Spokane Valley	
99212 Spokane Valley	
99216 Spokane/Spokane Valley	
99223 Spokane	
99224 Spokane	

- (16) "Projection year" means the fifth calendar year after the base year. For example, reviews using 2015 end-of-year data as the base year will use 2020 as the projection year.
- (17) "QIP" means the end-stage renal disease (ESRD) quality incentive program (QIP) administered by the Centers for Medicare and Medicaid Services (CMS). The QIP measures kidney dialysis facility performance based on outcomes assessed through specific performance and quality measures that are combined to create a total performance score (TPS). The QIP and TPS are updated annually and are publically available on the CMS DFC web site.
- (18) "Quintile" means any of five groups into which a population can be divided according to the distribution of values of a particular variable.
- (19) "Resident in-center patients" means in-center hemodialysis (HD) patients who reside within the planning area. If

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more than fifty percent of a kidney dialysis facility's patients reside outside Washington state, these out-of-state patients would be considered resident in-center patients.

- (20) "Shelled space" means space that is constructed to meet future needs; it is a space enclosed by a building shell but otherwise unfinished inside unless the space designated for future needs is part of an existing, finished building prior to an applicant's proposed project. In that case, there is no requirement to degrade the space. The shelled space may include:
- (a) Electrical and plumbing that will support future needs;
 - (b) Insulation;
- (c) Sheet rock that is taped or other similar wall coverings that are otherwise unfinished; and
 - (d) Heating, ventilation, and air conditioning.
- (21) "Training services" means services provided by a kidney dialysis facility to train patients for home dialysis. Home training spaces are not used to provide in-center dialysis treatments. Spaces used for training are not included in the facility's station count for projecting future station need or in calculating existing stations use. Stations previously designated as "training stations" may be used as in-center dialysis stations and will continue to be included in the facility's current station count for projecting future station need or in calculating existing station use. For the purpose of awarding the point for home training in the superiority criteria section (WAC 246-310-823), training services include the following:
 - (a) Home peritoneal dialysis (HPD); and
 - (b) Home hemodialysis (HHD).

NEW SECTION

WAC 246-310-803 Kidney disease treatment facilities—Data reporting requirements. (1) Between the first working day of February and the last working day of February of each year, each provider will electronically submit the following data elements for each of its kidney dialysis facilities in the state of Washington and each out-of-state kidney dialysis facility that might be used in an application review during the next year (an out-of-state kidney dialysis facility may be used as one of the three closest facilities for a future project during the next year):

- (a) Cost report data for the most recent calendar or fiscal year reporting period for which data is available reported to the Centers for Medicare and Medicaid Services (CMS) that is used to calculate net revenue per treatment; and
- (b) Data reported to providers by CMS for the most recent calendar or fiscal year reporting period for which data is available to identify the percentage of nursing home patients and the average number of comorbid conditions.
- (2) A provider's failure to submit complete data elements identified in subsection (1)(a) and (b) of this section in the format identified by the department for a facility by the deadline in subsection (1) of this section or whose data for a facility is not complete on the DFC report or QIP report (medicare web site) will result in automatic rejection of concurrent review applications for that provider until the following year's data report deadline unless an exemption is granted pursuant to subsection (3) of this section. Corrections to the

DFC report, as noted in WAC 246-310-827(7) do not require the filing on an exemption.

- (3) A provider may request an exemption from subsection (2) of this section in writing by the first working day in March. The exemption request must demonstrate that reasonable efforts were made to timely submit the required data elements in subsection (1)(a) and (b) of this section. An exemption request based on missing data in the DFC report or QIP report should demonstrate the absence of data is not the result of failure to report to medicare. The department has sole discretion to grant these exemptions. The department will review all submitted exemption requests and respond with a decision by the first working day in April.
- (4) Within ten working days, providers must report to the department the date that kidney dialysis stations first became operational for the following:
 - (a) New kidney dialysis facility;
- (b) Stations added to an existing kidney dialysis facility; or
 - (c) Relocated stations of a kidney dialysis facility.
- (5) The department will confirm it has received the required data in subsections (1) and (4) of this section as well as any exemption requests in subsection (3) of this section via e-mail within ten working days of receipt.
- (6) The department will publish on its web site the date that the stations in subsection (4) of this section became operational.

NEW SECTION

WAC 246-310-806 Kidney disease treatment facilities—Concurrent review cycle. The department will review kidney dialysis facility applications using the concurrent review cycles described in this section. There are four concurrent review cycles each year.

(1) Applicants must submit applications for review according to the following table:

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		Application Submission Period		Department Action	Application Review Period		Period	
Concurrent Review Cycle	Letters of Intent Due	Receipt of Initial Appli- cation	End of Screening Period	Applicant Response	Beginning of Review	Public Com- ment Period (includes pub- lic hearing if requested)	Rebuttal Period	Exparte Period
Special Circumstances 1	First working day of April of each year.	First working day of May of each year.	May 15 or the first working day thereafter.	June 15 or the first working day thereafter.	June 22 or the first working day thereafter.	30-Day Public comment period (including public hearing). Begins June 23 or the first working day thereafter.	7-Day Rebuttal period. Applicant and affected party response to public comment.	15-Day Exparte period. Department evaluation and decision.
Nonspecial Circumstance Cycle 1	First working day of May of each year.	First working day of June of each year.	Last working day of June .	Last working day of July .	August 5 or the first working day thereafter.	30-Day Public comment period (including public hearing). Begins August 6 or the first working day thereafter.	30-Day Rebuttal period. Applicant and affected party response to public comment.	75-Day Exparte period. Department evaluation and decision.
Special Circumstances 2	First working day of October of each year.	First working day of Novem- ber of each year.	November 15 or the first working day thereafter.	December 15 or the first working day thereafter.	December 22 or the first working day thereafter.	30-Day Public comment period (including public hearing). Begins December 23 or the first working day thereafter.	7-Day Rebuttal period. Applicant and affected party response to public comment.	15-Day Exparte period. Department evaluation and decision.
Nonspecial Circumstances Cycle 2	First working day of November of each year.	First working day of Decem- ber of each year.	Last working day of December .	Last working day of January.	February 5 or the first working day thereafter.	30-Day Public comment period (including public hearing). Begins February 6 or the first working day thereafter.	30-Day Rebuttal period. Applicant and affected party response to public com- ment.	75-Day Exparte period. Department evaluation and decision.

- (2) The department should complete a nonspecial circumstance concurrent review cycle within nine months, which begins the first day after letters of intent are due for that particular review cycle. The department should complete the regular review process within six months, which begins the first day after the letters of intent are due for that particular review cycle.
- (3) The department will notify applicants fifteen days prior to the scheduled decision date if it is unable to meet the decision deadline on the applications. In that event, the department will establish and commit to a new decision date.
- (4) When two or more applications are submitted for the same planning area, the department will first evaluate each application independently for meeting the applicable stan-
- dards described in WAC 246-310-210, 246-310-220, 246-310-230, and 246-310-240. If two or more applications independently meet those four standards, the department will apply the superiority criteria in WAC 246-310-827 to determine the superior application under WAC 246-310-240(1).
- (5) An applicant receiving points for the purposes of the superiority criteria under WAC 246-310-827 (3)(e), (f), or (g) may only apply for station need in one planning area per review cycle.
- (6) An applicant receiving points for purposes of the superiority criteria under WAC 246-310-827 (3)(e), (f), or (g) must operate the newly awarded stations for a period of time long enough to have a full year of data reporting medicare

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cost report worksheets and a full year of data reporting the kidney dialysis facility report prior to any future applications.

- (7) The department will not accept new nonspecial circumstance applications for a planning area if there are any nonspecial circumstance applications for which the certificate of need program has not made a decision in that planning area filed under a previous concurrent review cycle. This restriction does not apply if the department has not made a decision on the pending applications within the review timelines of nine months for a concurrent review and six months for a regular review. This restriction also does not apply to special circumstance applications.
- (8) The department may convert the review of a nonspecial circumstance application that was initially submitted under a concurrent review cycle to a regular review process if the department determines that the nonspecial circumstance application does not compete with another nonspecial circumstance application.

NEW SECTION

- WAC 246-310-809 One-time exempt isolation station reconciliation. (1) The department will identify each certificate of need approved kidney dialysis facility and the total number of certificate of need approved stations as of the effective date of these rules.
- (2) The department will make a one-time administrative station adjustment to each kidney dialysis facility to add one station as an approved exempt isolation station for those facilities that were approved prior to the effective date of these rules.
- (3) The department will notify each kidney dialysis facility of its adjusted certificate of need approved station count.

NEW SECTION

- WAC 246-310-812 Kidney disease treatment facilities—Methodology. A kidney dialysis facility that provides hemodialysis or peritoneal dialysis, training, or backup must meet the following standards in addition to applicable review criteria in WAC 246-310-210, 246-310-220, 246-310-230, and 246-310-240.
- (1) Applications for new stations may only address projected station need in the planning area in which the facility is to be located.
- (a) If there is no existing facility in an adjacent planning area, the application may also address the projected station need in that planning area.
- (b) Station need projections must be calculated separately for each planning area within the application.
- (2) Data used to project station need must be the most recent five-year resident end-of-year in-center patient data available from the Northwest Renal Network as of the first day of the application submission period, concluding with the base year at the time of application.
- (3) Projected station need must be based on 4.8 resident in-center patients per station (4.8 planning area) for all planning areas except Adams, Columbia, Douglas, Ferry, Garfield, Jefferson, Kittitas, Klickitat, Lincoln, Okanogan, Pacific, Pend Oreille, San Juan, Skamania, Stevens, Wahkiakum, and Whitman counties. The projected station need for

- these exception planning areas must be based on 3.2 resident in-center patients per station (3.2 planning area).
- (4) The number of dialysis stations projected as needed in a planning area will be determined by using the following methodology:
- (a) Determine the type of regression analysis to be used to project resident in-center station need by calculating the annual growth rate in the planning area using the end-of-year number of resident in-center patients for each of the previous six consecutive years, concluding with the base year.
- (i) If the planning area has experienced less than six percent growth in any of the previous five annual changes calculations, use linear regression to project station need; or
- (ii) If the planning area has experienced six percent or greater growth in each of the previous five annual changes, use nonlinear (exponential) regression to project station need.
- (b) Project the number of resident in-center patients in the projection year using the regression type determined in (a) of this subsection. When performing the regression analysis use the previous five consecutive years of end-of-year data concluding with the base year. For example, if the base year is 2015, use end-of-year data for 2011 through 2015 to perform the regression analysis.
- (c) Determine the number of dialysis stations needed to serve resident in-center patients in the planning area in the projection year by dividing the result of (b) of this subsection by the appropriate resident in-center patient per station number from subsection (3) of this section. In order to assure access, fractional numbers are rounded up to the nearest whole number. For example, 5.1 would be rounded to 6.0. Rounding to a whole number is only allowed for determining the number of stations needed.
- (d) To determine the net station need for a planning area, subtract the number calculated in (c) of this subsection from the total number of certificate of need approved stations located in the planning area. This number does not include the one department recognized exempt isolation station defined in WAC 246-310-800(9). For example, a kidney dialysis facility that is certificate of need approved and certified for eleven stations would subtract the one exempt isolation station and use ten stations for the methodology calculations.
- (5) Before the department approves new in-center kidney dialysis stations in a 4.8 planning area, all certificate of need counted stations at each facility in the planning area must be operating at 4.5 in-center patients per station. However, when a planning area has one or more facilities with stations not meeting the in-center patients per stations standard, the department will consider the 4.5 in-center patients per station standard met for those facilities when:
- (a) All stations for a facility have been in operation for at least three years; or
- (b) Certificate of need approved stations for a facility have not become operational within the timeline as represented in the approved application. For example, an applicant states the stations will be operational within eight months following the date of the certificate of need approval. The eight months would start from the date of an uncontested certificate of need approval. However, the department, at its sole discretion, may approve a one-time modification of the timeline for purposes of this subsection upon submission of docu-

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mentation that the applicant was prevented from meeting the initial timeline due to circumstances beyond its control.

Both resident and nonresident patients using the kidney dialysis facility are included in this calculation. Data used to make this calculation must be from the most recent quarterly modality report from the Northwest Renal Network as of the letter of intent submission date.

- (6) Before the department approves new in-center kidney dialysis stations in a 3.2 planning area, all certificate of need counted stations at each facility in the planning area must be operating at or above 3.2 in-center patients per station. However, when a planning area has facilities with stations not meeting the in-center patients per station standard, the department will consider the 3.2 in-center patients per station standard met for those facilities when:
- (a) All stations for a facility have been in operation for at least three years; or
- (b) Certificate of need approved stations for a facility have not become operational within the timeline as represented in the approved application. For example, an applicant states the stations will be operational within eight months following the date of the certificate of need approval. The eight months would start from the date of an uncontested certificate of need approval. However, the department, at its sole discretion, may approve a one-time modification of the timeline for the purposes of this subsection upon submission of documentation that the applicant was prevented from meeting the initial timeline due to circumstances beyond its control.

Both resident and nonresident patients using the kidney dialysis facility are included in this calculation. Data used to make this calculation must be from the most recent quarterly modality report from the Northwest Renal Network as of the letter of intent submission date.

- (7) When there are relocated stations within a planning area pursuant to WAC 246-310-830(3) and data is not available for the relocated stations, the department will use the station use rate from the previous location as reported on the last quarterly modality report from Northwest Renal Network.
- (8) If a provider, including any affiliates, submits multiple applications for projected need in a planning area, the department will use the following process:
- (a) Each application will be scored as an individual application to determine superiority.
- (b) The sum of the stations requested in the applications cannot exceed the projected need at the time of applications in the planning area.

NEW SECTION

- WAC 246-310-815 Kidney disease treatment facilities—Financial feasibility. (1) The kidney dialysis facility must demonstrate positive net income by the third full year of operation.
- (a) The calculation of net income is subtraction of all operating and nonoperating expenses, including appropriate allocated and overhead expenses, amortization and depreciation of capital expenditures from total revenue generated by the kidney dialysis facility.

- (b) Existing facilities. Revenue and expense projections for existing facilities must be based on that facility's current payor mix and current expenses.
 - (c) New facilities.
- (i) Revenue projections must be based on the net revenue per treatment of the applicant's three closest dialysis facilities.
- (ii) Known expenses must be used in the pro forma income statement. Known expenses may include, but are not limited to, rent, medical director agreement, and other types of contracted services.
- (iii) All other expenses not known must be based on the applicant's three closest dialysis facilities.
- (iv) If an applicant has no experience operating kidney dialysis facilities, the department will use its experience in determining the reasonableness of the pro forma financial statements provided in the application.
- (v) If an applicant has one or two kidney dialysis facilities, revenue projections and unknown expenses must be based on the applicant's operational facilities.
- (2) An applicant proposing to construct finished treatment floor area square footage that exceeds the maximum treatment floor area square footage defined in WAC 246-310-800(11) will be determined to have an unreasonable impact on costs and charges and the application will be denied. This does not preclude an applicant from constructing shelled space.

NEW SECTION

WAC 246-310-818 Special circumstances one- or two-station expansion—Eligibility criteria and application process. (1) The department will approve one or two additional special circumstance stations for an existing kidney dialysis facility (facility) if it meets the following criteria, regardless of whether the need methodology in WAC 246-310-812 projects a need for additional stations in the planning area:

- (a) For 4.8 planning areas, the facility has operated at or above an average of 5.0 patients per station for the most recent six consecutive month period preceding the date of application for which data is available. Data used to determine patients per station must be obtained from the Northwest Renal Network; or
- (b) For 3.2 planning areas, the facility has operated at or above an average of 3.5 patients per station for the most recent six consecutive month period preceding the date of application for which data is available. Data used to determine patients per station must be obtained from the Northwest Renal Network; and
- (c) The facility can accommodate one or two additional stations within its existing building, which may include shelled space. If renovation is needed to accommodate the additional station(s), renovation must be within the existing building.
- (2) The department may approve special circumstance station expansions even if other kidney dialysis facilities not owned or affiliated with the applicant in the planning area are below the minimum patients per station operating thresholds set by WAC 246-310-812 (5) or (6).

Proposed

- (3) A facility approved for two special circumstance stations under subsection (1) of this section is not eligible for further special circumstance expansions under this subsection until the department awards additional nonspecial circumstances kidney dialysis stations in the planning area.
- (4) As of the effective date of these rules, a facility that has relocated all or part of its stations may not request a special circumstance one- or two-station expansion until three years have lapsed from the date the stations become operational. The three-year prohibition applies to any new kidney dialysis facility or facilities whose station count is changed by the relocation of stations. The three-year prohibition will be retrospectively applied only to kidney dialysis facilities that were approved for partial or complete relocation after January 1, 2015.
- (5) For 4.8 planning areas, a facility is ineligible for a special circumstance one- or two-station expansion if the owner or affiliate has approved certificate of need stations in the planning area that have operated below an average of 4.5 patients per station for the most recent six consecutive month period preceding the date of application. Data used to calculate patients per station must be obtained from the Northwest Renal Network.
- (6) For 3.2 planning areas, a facility is ineligible for a special circumstance one- or two-station expansion if the owner or affiliate has approved certificate of need stations in the planning area that have operated below an average of 3.2 patients per station for the most recent six consecutive month period preceding the date of application. Data used to calculate patients per station must be obtained from the Northwest Renal Network.
- (7) For 4.8 planning areas, a special circumstance one- or two-station expansion will not be approved if, with the requested new station(s), the applicant's kidney dialysis facility would fall below a calculated 4.5 patients per station. Data used to make this calculation is the average patients per station from subsection (1)(a) of this section.
- (8) For 3.2 planning areas, a special circumstance one- or two-station expansion will not be approved if, with the requested new stations(s), the applicant's kidney dialysis facility would fall below a calculated 3.0 patient per station. Data used to make this calculation is the average patients per station from subsection (1)(b) of this section.
- (9) If a provider operates one or more kidney dialysis facilities within a planning area and applies for a special circumstance one- or two-station expansion in the planning area the department will not accept a letter of intent from that provider for additional stations to meet projected planning area need in the next nonspecial circumstance concurrent review cycle.
- (10) Station(s) approved under this section must be operational within six months of approval, otherwise the approval is revoked.
- (11) The department will provide a special circumstance one- or two-station expansion application form that incorporates the criteria for certificate of need approval. The application will not be approved unless the criteria are met.
- (12) Applicants must submit special circumstance oneor two-station expansion applications according to the schedule set forth in WAC 246-310-806(1).

(13) Special circumstance station applications will be treated as approved and will reduce net station need in the planning area when no nonspecial circumstance applications decisions are pending within the planning area. Special circumstance application approvals will not result in a reduction of net station need in the planning area when nonspecial circumstance application approvals decisions are pending within the planning area.

NEW SECTION

- WAC 246-310-821 Kidney disease treatment facilities—Standards for planning areas without an existing facility. (1) Columbia, Ferry, Garfield, Klickitat, Lincoln, Pend Oreille, San Juan, Skamania, Stevens, Wahkiakum, and Whitman counties do not have an existing kidney dialysis facility as of the effective date of these rules. The department will award the first project proposing to establish a facility in each of these planning areas as follows:
- (a) A minimum of four stations, provided the project meets applicable review criteria and standards; and
- (b) The facility must be projected to operate at 3.2 incenter patients per station by the third full year of operation. For purposes of this subsection, the applicant may supplement data obtained from the Northwest Renal Network with other documented demographic and utilization data to demonstrate station need.
- (2) Once a county no longer qualifies under subsection (1) of this section, the county remains a 3.2 in-center patient per station county. As of the effective date of these rules, Adams, Douglas, Jefferson, Kittitas, Okanogan, Pacific, and Stevens counties are also identified as 3.2 in-center patient per station counties.

NEW SECTION

- WAC 246-310-824 Kidney disease treatment centers—Exceptions. The department will not approve new stations in a planning area if the projections in WAC 246-310-812(4) show no net need, and will not approve more than the number of stations projected as needed unless:
- (1) The proposed project qualifies under WAC 246-310-818 for special circumstances one- or two-station expansions;
- (2) All other applicable review criteria and standards have been met; and
 - (3) One or more of the following have been met:
- (a) The department finds the additional stations are needed to be located reasonably close to the people they serve; or
- (b) Existing dialysis stations in the kidney dialysis facility requesting the exception are operating at 5.5 patients for a 4.8 planning area or, 3.7 patients per station for the 3.2 planning areas. Data used to make this calculation must be from the most recent quarterly modality report from the Northwest Renal Network as of the application submission date; or
- (c) The applicant documents a significant change in ESRD treatment practice has occurred, affecting dialysis station use in the planning area; and

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(4) The department finds that exceptional circumstances exist within the planning area and explains the approval of additional stations in writing.

NEW SECTION

- WAC 246-310-827 Kidney disease treatment facilities—Superiority criteria. For purposes of determining which of the competing applications should be approved, the criteria in this section will be used as the only means for comparing two or more applications to each other. No other criteria or measures will be used in comparing two or more applications to each other under any of the applicable subcriteria within WAC 246-310-210, 246-310-220, 246-310-230 or 246-310-240.
- (1) An application will be denied if it fails to meet any criteria under WAC 246-310-210, 246-310-220, 246-310-230, or 246-310-240 (2) or (3).
- (2) An application will be denied if the applicant has one or more kidney dialysis facilities in the planning area not meeting the 4.5 or 3.2 in-center patients per station standards required in WAC 246-310-812 (5) or (6) as of the most recent quarterly report from the Northwest Renal Network as of the date of the letter of intent.
- (3) When available, the applicant's closest existing Washington facilities (comparables) are determined as follows:
- (a) For existing kidney dialysis facilities proposing to expand, use data for the existing facility plus the next two closest Washington facilities (comparables) owned by or affiliated with the applicant as measured by a straight line. Straight lines will be calculated using "Google Maps" or equivalent mapping software (mileage calculated out to two decimal points, no rounding).
- (b) For new kidney dialysis facilities, use data for the next three closest facilities (comparables) owned by or affiliated with the applicant as measured by a straight line from the proposed new kidney dialysis facility location. Straight lines will be calculated using "Google Maps" or equivalent mapping software (mileage calculated out to two decimal points, no rounding).
- (c) The number of applications per concurrent review cycle that rely on the same three comparables is limited to two.
- (d) If complete medicare data is not available for any of the kidney dialysis facilities and a facility has been granted a department exemption in WAC 246-310-803(3), then that facility will not be used as a comparable and the next closest facility should be included as a comparable.
- (e) If the applicant currently does not own or is not affiliated with any kidney dialysis facility, the department will assign the following points:
- (i) The median quintile points for those superiority measures using quintiles (excluding net revenue per treatment);
 - (ii) Two points for standardized mortality ratio (SMR);
- (iii) Two points for standardized hospitalization ratio (SHR); and
- (iv) Any remaining points for other measures will be based on the representations made in the application.

- (f) If the applicant owns or is affiliated with one existing kidney dialysis facility in total, the department will assign the facility's actual points as follows:
- (i) The actual quintile points for those superiority measures using quintiles;
 - (ii) The actual points for SMR;
 - (iii) The actual points for SHR; and
- (iv) Any remaining points for other measures will be based on the representations made in the application.
- (g) If the applicant owns or is affiliated with two existing kidney dialysis facilities in total, the department will average the facility's scores as follows:
- (i) The average quintile points for those superiority measures using quintiles;
 - (ii) The average points for SMR;
 - (iii) The average points for SHR; and
- (iv) The average of the remaining points for other measures will be based on the representations made in the applications.
- (4) The following table identifies the data measures and the data sources:

Data Item	Source
Home peritoneal dialysis and home hemodialysis training (Yes or No)	DFC report
Shift beginning after 5:00 p.m.? (Yes or No)	DFC report
Nursing home residents percentage (quintile)	Dialysis facility report (DFR)
Average number of comorbidities claimed (quintile)	Dialysis facility report (DFR)
Standardized mortality ratio performance (SMR) (better than expected, as expected, worse than expected)	DFC report - 4 year
Standardized hospitalization ratio performance (SHR) (better than expected, as expected, worse than expected)	DFC report - 1 year
Medicare total performance score (quintile)	QIP report
Net revenue per treatment (quintile)	Department calculation from medicare cost report. Divide total revenue by total treatments.

- (5) The department will obtain the medicare QIP total performance scores (QIP Report) and the kidney dialysis facility compare reports (DFC Report) from the medicare web site on the first working day in February.
- (6) The department will determine the quintile scores and nonquintile scores. The department will calculate the quintile scores using the following process for each quintile measure:

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- (a) For all kidney dialysis facilities for which data is available, sort the facilities from most favorable to least favorable according to the identified data.
- (b) Use the percent rank formula using Excel to create the percentile ranking for each kidney dialysis facility in the data set. The array used in the formula is the data set of available facility data identified for that measure.
- (c) Assign quintile and nonquintile scores using the following methods:
- (i) Quintile measures. For nursing home resident percentage, number of comorbidities, and QIP total performance score measures, the department will determine the quintile scores using the following process:
- (A) Dialysis facilities with a percentile ranking of eighty percent or higher get five points.
- (B) Dialysis facilities with a percentile ranking less than eighty percent and greater than or equal to sixty percent get four points.
- (C) Dialysis facilities with a percentile ranking less than sixty percent and greater than or equal to forty percent get three points.
- (D) Dialysis facilities with a percentile ranking less than forty percent and greater than or equal to twenty percent get two points.
- (E) Dialysis facilities with a percentile ranking below twenty percent get one point.
- (ii) Quintile measure. For the net revenue per treatment measure, the department will determine the quintile scores using the following process:
- (A) Dialysis facilities with a percentile ranking of eighty percent or higher get one point.
- (B) Dialysis facilities with a percentile ranking less than eighty percent and greater than or equal to sixty percent get two points.
- (C) Dialysis facilities with a percentile ranking less than sixty percent and greater than or equal to forty percent get three points.
- (D) Dialysis facilities with a percentile ranking less than forty percent and greater than or equal to twenty percent get four points.
- (E) Dialysis facilities with a percentile ranking below twenty percent get five points.
- (F) Hospitals that do not have a cost report may submit net revenue per treatment actuals from the previous year. Hospitals must also submit a signed attestation stating the net revenue per treatment data is accurate.
- (iii) Nonquintile measures. The department will determine the nonquintile scores using the following process:
- (A) Dialysis facilities that offer training services are given one point.
- (B) Dialysis facilities that offer a shift that begins after 5 p.m. are given one point.
- (C) The department will determine SMR points for dialysis facilities as follows:
 - (I) "Better than expected" get four points.
 - (II) "As expected" get two points.
 - (III) "Worse than expected" get 0 points.
- (D) The department will determine SHR points for dialysis facilities as follows:
 - (I) "Better than expected" get four points.

- (II) "As expected" get two points.
- (III) "Worse than expected" get 0 points.
- (E) The department will assign two points for an "as expected" score for dialysis facilities missing only SMR data from the DFC report, provided the facility was granted an exception under WAC 246-310-803(3).
- (7) The department will publish the data set including resulting scores and quintiles for all kidney dialysis facilities for review no later than the first working day in April. The data set, including resulting scores and quintiles, will remain open for review and any person may propose the correction of data to the department until the last working day in April. Correction of data may be proposed as follows:
- (a) Training services (HPD and HHD): The department will accept a copy of a medicare certification for training services (HPD and HHD) as evidence that a kidney dialysis facility provides these services, regardless of what is represented in the DFC report.
- (b) Data related to a shift beginning after 5 p.m.: The department will accept an attestation that a facility either operates a shift beginning after 5 p.m. or will operate that shift if there is a need, regardless of what is represented in the DFC report.
- (c) The department will publish the final data set, including resulting scores and quintiles, no later than March 15th or the first working day thereafter.
- (8) The department will do the following analysis in order to determine the superior application:
- (a) Create the comparable kidney dialysis facility set for each application per subsection (3) of this section.
- (b) Determine the individual measure scores for each application by taking the simple average of the comparable scores for each measure.
- (c) Determine the total score in the following manner according to the table below:

Data Items:	Calculation of Points	Score
Home training	The average score of comparable facilities rounded up to two decimal places.	
Shift beginning after 5 p.m.	The average score of comparable facilities rounded up to two decimal places.	
Nursing home residents	Average quintile score of comparable facilities rounded up to two decimal places.	
Average number of comorbid conditions	Average quintile score of comparable facilities multiplied by 1.25 and rounded up to two decimal places.	

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Data Items:	Calculation of Points	Score
Standardized mortality ratio	Average score of comparable facilities rounded up to two decimal places.	
Standardized hospitalization ratio	Average score of comparable facilities rounded up to two decimal places.	
QIP total performance score	Average quintile score of comparable facilities multiplied by 2.0 and rounded up to two decimal places.	
Net revenue per treat- ment	Average quintile score of comparable facilities rounded down to two decimal places.	
Total score	Sum each of these individual average scores to arrive at total score.	

- (9) The application with the highest total score will be the superior alternative for the purpose of meeting WAC 246-310-240(1).
- (10) After applying the superiority criterion in this section, if applications are tied, the department will use the following process to determine the superior alternative:
- (a) An applicant that was assigned points under subsection (3)(e) of this section in the superiority analysis will be considered the superior alternative; if no applicant was assigned points under subsection (3)(e) of this section, apply (b) of this subsection:
- (b) The applicant with the highest average QIP total performance score will be considered the superior alternative;
- (c) If applications have the same average QIP total performance score, the applicant with the lowest average net revenue per treatment will be considered the superior alternative

NEW SECTION

- WAC 246-310-830 Kidney disease treatment facilities—Relocation of facilities. (1) When an existing facility proposes to relocate any of its stations to another planning area, a new health care facility is considered to be established under WAC 246-310-020 (1)(a).
- (2) When an existing kidney dialysis facility proposes to relocate a portion but not all of its stations within the same planning area, a new health care facility is considered to be established under WAC 246-310-020 (1)(a).
- (3) When an existing kidney dialysis facility proposes to relocate a portion but not all of its stations to an existing facility, it will be considered a station addition under WAC 246-310-020 (1)(e).

- (4) When an entire existing kidney dialysis facility proposes to relocate all of its stations within the same planning area, a new health care facility is not considered to be established under WAC 246-310-020 (1)(a) if:
- (a) The existing kidney dialysis facility ceases operation after the relocation;
- (b) No new stations are added to the replacement kidney dialysis facility. The maximum treatment floor area square footage as defined in WAC 246-310-800 (11)(a) is limited to the number of certificate of need stations that were approved at the existing facility;
- (c) There is no break in service between the closure of the existing kidney dialysis facility and the operation of the replacement facility;
- (d) The existing facility has been in operation for at least five years at its present location; and
- (e) The existing kidney dialysis facility has not been purchased, sold, or leased within the past five years.
- (5) Station use rates at new facilities created by the total relocation of an existing facility or the partial relocation of an existing facility should not be a barrier to the addition of new stations projected as needed for the planning area. In 4.8 planning areas, the station use rate will be counted as 4.5 incenter patients per station. If the department has had to count the station use at 4.5 under the need methodology described in WAC 246-310-812(5), the facility may not request additional stations at the new facility for three years from the date the stations become operational or the facility meets the 4.5 station use standard, whichever comes first. Data used to make this determination will be the most recent Northwest Renal Network quarterly modality report available as of the application submission date.
- (6) Station use rates at new facilities created by the total relocation of an existing facility or the partial relocation of an existing facility should not be a barrier to the addition of new stations projected as needed for the planning area. In 3.2 planning areas, the station use rate will be counted as 3.2 incenter patients per station. If the department has had to count the station use at 3.2 under the need methodology described in WAC 246-310-812(6), the facility may not request additional stations at the new facility for three years from the date the stations become operational or the facility meets the 3.2 station use standard, whichever comes first. Data used to make this determination will be the most recent Northwest Renal Network quarterly modality report available as of the application submission date.

NEW SECTION

WAC 246-310-833 One-time state border kidney dialysis facility station relocation. (1) When an existing owner-operator of a Washington state kidney dialysis facility is also the owner-operator of a kidney dialysis facility in a contiguous Idaho or Oregon county, the department will not consider a facility that combines the Washington facility and the out-of-state facility to be a new health care facility under WAC 246-310-020(1) provided all of the following criteria are satisfied:

(a) The Washington state kidney dialysis facility is located in Asotin, Benton, Clark, Columbia, Cowlitz, Gar-

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field, Klickitat, Pend Oreille, Skamania, Wahkiakum, Walla Walla, or Whitman counties;

- (b) The kidney dialysis facility is the sole provider of dialysis services in the Washington state county;
- (c) The kidney dialysis facility is the sole provider of dialysis services in the contiguous Idaho or Oregon county;
- (d) The replacement kidney dialysis facility will be located in the same county or planning area as the current Washington state facility;
- (e) Both existing kidney dialysis facilities cease operation:
- (f) There is no break in service between the closure of the existing kidney dialysis facilities and the operation of the replacement facility;
- (g) There has been no change in ownership of either the Washington kidney dialysis facility or out-of-state kidney dialysis facility for at least five years prior to applying for the exemption under this section;
- (h) Each existing kidney dialysis facility has been operated by the current provider for a minimum of five years prior to applying for the exemption under this section;
- (i) Each existing kidney dialysis facility has been operating at its current location for a minimum of five years prior to applying for the exemption under this section;
- (j) The department has not granted a previous exemption under the provisions of this section; and
- (k) The number of stations at the replacement kidney dialysis facility does not exceed the total of:
- (i) All stations from the Washington state kidney dialysis facility; and
- (ii) Using the 4.8 patients per station standard, the stations necessary for the number of patients receiving dialysis at the out-of-state kidney dialysis facility as reported on the most recent Northwest Renal Network quarterly modality report.
- (2) Once a Washington state provider has requested and received its one-time exemption under the provisions of this section, the kidney dialysis facility's "resident in-center patient" will have the same meaning as all patients at the facility.

REPEALER

The following sections of the Washington Administrative Code are repealed:

WAC 246-310-280 Kidney disease treatment centers— Definitions.

WAC 246-310-282 Kidney disease treatment centers— Concurrent review cycle.

WAC 246-310-284 Kidney disease treatment centers—Methodology.

WAC 246-310-286 Kidney disease treatment centers— Standards for planning areas without an existing facility.

WAC 246-310-287 Kidney disease treatment centers— Exceptions. WAC 246-310-288 Kidney disease treatment centers—Tiebreakers.

WAC 246-310-289 Kidney disease treatment centers— Relocation of facilities.

WSR 16-19-041 WITHDRAWL OF PROPOSED RULES EMPLOYMENT SECURITY DEPARTMENT

[Filed September 14, 2016, 3:02 p.m.]

The employment security department is withdrawing proposal WSR 16-15-080, filed on July 19, 2016. After review with stakeholders, it was determined the proposed rule is unnecessary.

Lisa Marsh Deputy Commissioner

WSR 16-19-056 PROPOSED RULES EXECUTIVE ETHICS BOARD

[Filed September 16, 2016, 2:54 p.m.]

Original Notice.

Preproposal statement of inquiry was filed as WSR 16-15-017

Title of Rule and Other Identifying Information: Chapter 292-100 WAC, Procedural rules.

Hearing Location(s): 2425 Bristol Court S.W., 4th Floor Conference Room, Olympia, WA, on November 18, 2016, at 9:00 a.m.

Date of Intended Adoption: December 16, 2016.

Submit Written Comments to: Kate Reynolds, P.O. Box 40149, Olympia, WA 98504-0149, e-mail kater@atg.wa. gov, fax (360) 586-3955, by November 4, 2016.

Assistance for Persons with Disabilities: Contact Ruthann Bryant by November 4, 2016, (360) 586-3265.

Purpose of the Proposal and Its Anticipated Effects, Including Any Changes in Existing Rules: Update the rules and provide guidance and clarity to state employees and the public on ethics board procedures.

Statutory Authority for Adoption: RCW 42.52.360.

Statute Being Implemented: RCW 42.52.360

Rule is not necessitated by federal law, federal or state court decision.

Name of Proponent: Executive ethics board, governmental

Name of Agency Personnel Responsible for Drafting, Implementation, and Enforcement: Kate Reynolds, Olympia, (360) 586-6759.

No small business economic impact statement has been prepared under chapter 19.85 RCW. The state employees and statewide elected officials that must comply with the proposed rule are not small businesses, pursuant to chapter 19.85 RCW.

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A cost-benefit analysis is not required under RCW 34.05.328.

September 16, 2016 Ruthann Bryant Administrative Officer

AMENDATORY SECTION (Amending WSR 05-19-142, filed 9/21/05, effective 10/22/05)

- WAC 292-100-007 Definitions. Unless the context clearly requires otherwise, the definitions in this section apply throughout this chapter.
- (1) "Board staff" shall include the executive director, ((the)) investigators, administrative officer, and assistant attorneys general who bring cases before the board((, and the training and information specialist)).
- (2) "Complainant" means a person who has filed a complaint with the board.
- (3) "Employing agency" means the former or current state agency of the respondent during the time the alleged violation occurred.
- (4) (("Lobbying," for the purposes of RCW 42.52.380, does not include written communication by the board to members of the state legislature or to any other government official on matters pertaining directly to the Ethics in Public Service Act.)) "Investigation" means the fact finding conducted prior to a dismissal or reasonable cause determination.
- (5) "Party" includes the board staff and the respondent. ((The respondent may be represented in any matter filed under chapter 42.52 RCW by an attorney or an exclusive bargaining representative. If the respondent is represented by a person who is not an attorney, the representation shall conform to the standards of ethical conduct required of attorneys before the courts of the state of Washington.
- (6) "Preliminary investigation" refers to the confidential fact-finding investigation that occurs before the board's determination of reasonable cause.

(7)))

- (6) "Presiding officer" refers to the board chair, vice chair, a board member designated as presiding officer by the chair or vice chair, or an administrative law judge.
- (((8))) (7) "Respondent" means a current or former state officer or state employee alleged to have violated chapter 42.52 RCW ((by a complainant)).

AMENDATORY SECTION (Amending WSR 01-13-033, filed 6/13/01, effective 7/14/01)

- WAC 292-100-020 Complaint procedures—Status of complainant and others. (1) When a complaint has been filed with the board, neither the complainant, if other than board, nor any other person ((shall)) will have special standing to participate or intervene in the investigation or consideration of the complaint by the board. The complainant is not a party to an ethics case for any purpose((; however, the board staff will give notice to the complainant and the employing agency of any open board hearings on the matter)).
- (2) If a member of the board or the board's staff files a complaint in his or her individual capacity, the board member

- or staff member will be disqualified from acting in his or her official capacity with regard to the disposition of that complaint.
- (3) This section does <u>not</u> affect the right to request a review of a board staff decision to dismiss <u>a</u> complaint, pursuant to RCW 42.52.425 and WAC 292-100-045.
- (((3) The person or persons alleged in a complaint to have violated chapter 42.52 RCW, are respondents as to that complaint.))

<u>AMENDATORY SECTION</u> (Amending WSR 01-13-033, filed 6/13/01, effective 7/14/01)

- WAC 292-100-030 <u>Complaint procedures</u> ((for filing complaints)). (1) A complaint filed with the board shall be in writing on a form provided by the board($(\frac{1}{2})$) or in an appropriate written form that includes the information in subsection (2) of this section, and signed by the complainant or by the complainant's counsel, <u>unless anonymous</u>.
 - (2) A complaint shall include:
- (a) The complainant's name((; except that the board may choose to issue a complaint based upon information provided by a person who refuses to be identified)), unless anonymous;
- (b) A statement of the nature of the alleged violation(s) and the name of person(s) responsible ((and the complaint should also include)) as well as the date, time, and place of each alleged violation; and
- (c) All available documentation and other evidence including any witnesses to the violation which the complainant is able to supply to demonstrate a reason for believing that a violation of chapter 42.52 RCW, or the rules adopted under it, has occurred.
- (3) A complaint which is incomplete, ((\(\text{or}\))) does not contain enough information to allege a violation of chapter 42.52 RCW, or is not within the jurisdiction of the board, will not be accepted for filing.
- (((4) The board will not consider allegations in a properly filed complaint that fall outside the jurisdiction of the board. The board or its staff may refer such allegations to an appropriate agency with jurisdiction.))

AMENDATORY SECTION (Amending WSR 01-13-033, filed 6/13/01, effective 7/14/01)

- WAC 292-100-041 Investigation of complaints. (1) ((If board staff determines that a complaint should not be dismissed pursuant to RCW 42.52.425 and WAC 292-100-045, the board staff shall conduct a preliminary investigation.
- (2))) During the course of ((the preliminary)) an investigation, the board staff will give the respondent(s) a copy of the complaint or a summary ((thereof)) of the complaint, and an opportunity to ((present such information as the respondent may desire, provided that if a complainant has requested confidentiality under chapter 42.17 RCW,)) respond to the allegations. In accordance with RCW 42.52.410, the complainant's name and identifying information ((shall)) may be ((deleted)) redacted from the complaint.
- (((3) It is the intent of the board that)) (2) During the course of the investigation board staff ((who are investigating a complaint will work with the respondent's employing agency, unless in the judgment of the investigator it)) will

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provide the employing agency with a copy of the complaint or a summary of the complaint, unless board staff determines it would impede the investigation. ((During the course of the investigation, the board staff shall provide the employing agency with a copy of the complaint or a summary thereof. If a complainant has requested confidentiality under chapter 42.17 RCW)) In accordance with RCW 42.52.410, the complainant's name and identifying information ((shall be deleted)) may be redacted from the complaint.

(((4) The board staff shall reduce the results of a preliminary review or investigation to writing.))

AMENDATORY SECTION (Amending WSR 01-13-033, filed 6/13/01, effective 7/14/01)

WAC 292-100-042 Board staff referral of allegations.

- (1) If the complaint is outside the jurisdiction of the board, the board or its staff may also refer such allegations to an appropriate agency with jurisdiction.
- (2) The board staff may refer a complaint ((or a summary thereof)) to the employing agency for investigation and recommendation of resolution. In accordance with RCW 42.52.410, the complainant's name and identifying information may be redacted from the complaint.
- (a) The referral will include a copy of the complaint and all supporting documentation and shall include a date for submission of the report and recommendation, allowing at least thirty days. ((If a complainant has requested confidentiality under chapter 42.17 RCW, the complainant's name and identifying information shall be deleted from the complaint.)) The agency receiving the referral may request additional time, if needed.
- (b) During the course of the agency's investigation, the agency ((shall)) will contact the respondent and provide the respondent with a copy of the complaint. The agency will provide the respondent with an opportunity to ((present such information as the respondent may desire.
 - (2))) respond to the allegations.
- (3) If board staff determine that a complaint alleges conduct which may violate a criminal statute, the <u>board</u> staff may refer the complaint to the appropriate law enforcement authority ((and if)). Once referred, the board staff will suspend their investigation until the law enforcement authority responds as to whether criminal charges will be filed. If the law enforcement authority elects to file criminal charges, no further action will be taken while the criminal case is pending. If the law enforcement authority elects not to file criminal charges, board staff ((shall)) will complete their investigation ((and follow the procedures set forth in these rules)).

AMENDATORY SECTION (Amending WSR 07-02-001, filed 12/20/06, effective 1/20/07)

- WAC 292-100-045 Dismissal of complaints. (1) ((If after a preliminary review or investigation)) The executive director may dismiss the complaint if the board or the board staff determines that:
- (a) Any alleged violation that may have occurred is not within the jurisdiction of the board;
- (b) The complaint is obviously unfounded or frivolous; or

- (c) The complaint presents a violation of chapter 42.52 RCW, but any violation that may have occurred does not constitute a material violation because it was inadvertent and minor, or has been cured, and, after consideration of all of the circumstances, further proceedings would not serve the purposes of this chapter((, the executive director may dismiss the complaint by issuing an order of dismissal)).
- (2) If the executive director dismisses the complaint, the ((preliminary review or)) investigation report and a written notice of the executive director's order of dismissal ((shall)) will be provided to the complainant, respondent, and the board and ((shall)) will include a statement of the complainant's right to ((appeal to)) request review of the dismissal by the board. (((See RCW 42.52.425.)))
- (3) If the board dismisses the complaint, written notice ((shall)) will be provided to the complainant((, respondent, and the board. (See RCW 42.52.425.))) and the respondent.

AMENDATORY SECTION (Amending WSR 01-13-033, filed 6/13/01, effective 7/14/01)

WAC 292-100-046 Complainant's request for review of executive director's dismissal order. (1) ((Upon the written request of the complainant, the executive director's order of dismissal will be reviewed by the board.

- (2))) A <u>written</u> request for review <u>by a complainant</u> must be received at the board's administrative office no later than twenty days after the date the order of dismissal is mailed to the complainant.
- $((\frac{3}{)})$ (2) A request for review $(\frac{\text{shall}}{\text{must}})$ state the grounds $(\frac{\text{therefor}}{\text{or the request for review}}$.
- (((4))) (3) When a request for review is received, the board staff ((shall)) will prepare a record for the board's review and serve notice upon the respondent that a review has been requested. The record will consist of:
 - (a) The complaint;
- (b) The ((preliminary review or)) investigation report((, as applicable));
 - (c) The order of dismissal;
 - (d) The complainant's request for review;
- (e) The executive director's response to the request for review; and
- (f) Any additional material requested by the chair <u>or the</u> chair's designee.
- (((5))) (4) At the next available opportunity, the board ((shall)) will review the record and deliberate in closed session, without oral argument, and act on the request ((at the next meeting at which it may be practicable)) by:
 - (a) Affirming the dismissal;
- (b) Directing board staff to conduct further investigation; or
- (c) Issuing a determination that there is reasonable cause to believe that a violation has been or is being committed.
- $((\frac{(6)}{)})$ (5) In reviewing the executive director's order of dismissal, the board $((\frac{\text{shall}}{)})$ will base its review on whether the executive director had a rational basis for the decision. The board will only $((\frac{\text{shall}}{)})$ reverse a decision to the extent that a rational basis is lacking.

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 $(((\frac{7}{})))$ (6) The board's decision $((\frac{1}{})$ be reduced to)) will be in writing and provided to the complainant and the respondent.

AMENDATORY SECTION (Amending WSR 01-13-033, filed 6/13/01, effective 7/14/01)

- WAC 292-100-047 Board member's request for review of executive director's dismissal order. (1) ((Upon the written request of a board member, the executive director's order of dismissal will be reviewed by the board.
- (2) The preliminary review or investigation report and a written notice of the executive director's order of dismissal shall be provided to the board at the next regular meeting.
- (3) A request for review by a board member must be received by the executive director no later than twenty days after the date the order of dismissal is provided to the board.
- (4))) A written request for review by a board member must be received by the executive director no later than twenty days after the date the order of dismissal is provided to the board.
- (2) When a request for review is received, the board staff ((shall)) will prepare a record for the board's review and serve notice upon the respondent that a review has been requested. The record will consist of:
 - (a) The complaint;
- (b) The ((preliminary review or)) investigation report((, as applicable));
 - (c) The order of dismissal;
- (d) Any additional material requested by the chair, the <u>chair's designee</u> or the board member who requested the review.
- (((5) The board shall review the record, consider the request in executive session, and act on the request at the next meeting at which it may be practicable)) (3) At the next available opportunity, the board will review the record and deliberate in closed session, without oral argument, and act on the request by:
 - (a) Affirming the dismissal;
- (b) Directing board staff to conduct further investigation;or
- (c) Issuing a determination that there is reasonable cause to believe that a violation has been or is being committed.
- (((6))) (4) In reviewing the executive director's order of dismissal, the board will base its review on whether the executive director had a rational basis for the decision. The board will only reverse a decision to the extent that a rational basis is lacking.
- (5) The board's decision ((shall be reduced to)) will be in writing and provided to the complainant and the respondent.

AMENDATORY SECTION (Amending WSR 07-02-001, filed 12/20/06, effective 1/20/07)

WAC 292-100-050 Determination on reasonable cause. (1) Following ((the preliminary)) an investigation, if the complaint is not dismissed, the board staff ((shall)) will prepare a written investigation report and make a recommendation to the board on whether to find reasonable cause, including a recommendation as to ((whether)) the potential penalty ((should be greater than \$500)).

- (2) Upon receipt of the board staff's investigation report and recommendation, the board ((shall)) will determine whether or not there is reasonable cause to believe that a violation of chapter 42.52 RCW has occurred and ((whether any)) the potential penalty ((should be greater than \$500)).
- (3) The board's reasonable cause determination ((shall)) will be done in closed session.
- (4) If after determining reasonable cause, the board ((further)) determines that the penalty and costs should be greater than ((\$500)) five hundred dollars, the respondent ((shall)) will be given the option to have an administrative law judge conduct the hearing and rule on procedural and evidentiary matters((. If the respondent is not given that option, the board may not impose penalty and costs greater than \$500)) in accordance with RCW 42.52.500.
- (5) The board may, on its own initiative, choose to retain an administrative law judge to conduct any hearing.
- (((5))) (6) Upon receipt of an investigation report and recommendation on a complaint referred to the employing agency for investigation, the board ((shall)) will either:
- (a) Reject the report and recommendation and initiate its own investigation; or
- (b) Reject or concur with the report and recommendation and dismiss the complaint; or
- (c) Concur with the report and recommendation and ((either initiate a hearing if the recommended penalty is a monetary fine or)) proceed under this section; or
- (d) Concur with the report and recommendation and refer the matter to the employing agency for implementation of the recommendation if the recommendation is within the agency's authority to implement. The agency ((shall)) will report implementation to the board and the board ((shall)) will then dismiss the complaint((; or
- (c) Concur with the report and recommendation, enter a finding of no reasonable cause and dismiss the complaint; or
- (d) Concur with the report and recommendation, consider the report an investigative report, enter a finding of reasonable cause, and proceed under this section)).

REPEALER

The following sections of the Washington Administrative Code are repealed:

WAC 292-100-010 Initiation of complaint.

WAC 292-100-040 Acceptance and preliminary review of complaints.

WSR 16-19-059 PROPOSED RULES DEPARTMENT OF FISH AND WILDLIFE

[Filed September 19, 2016, 10:01 a.m.]

Original Notice.

Preproposal statement of inquiry was filed as WSR 16-06-076 on February 26, 2016.

Proposed

Title of Rule and Other Identifying Information: The department must amend recreational fishing rules to meet conservation objectives and provide fishing opportunities within those conservation objectives. The department is considering changes to the recreational fishing rules in saltwater areas of Washington state. The department may consider additional recreational fishing rule changes if necessary.

Hearing Location(s): Fish and Wildlife Commission Meeting, Natural Resources Building, Room 172, 1111 Washington Street S.E., Olympia, WA 98501, on November 4-5, at 8:00 a.m.

Date of Intended Adoption: On or after November 4, 2016.

Submit Written Comments to: Scott Bird, WDFW Rules Coordinator, 600 Capitol Way North, Olympia, WA 98501-1091, e-mail Rules.Coordinator@dfw.wa.gov, fax (360) 902-2155, by October 28, 2016.

Assistance for Persons with Disabilities: Contact Dolores Noyes by October 28, 2016, TTY (360) 902-2207 or (360) 902-2349.

Purpose of the Proposal and Its Anticipated Effects, Including Any Changes in Existing Rules: The department makes adjustments to recreational fishing rules annually to maximize conservation and recreational fishing opportunity. This proposal includes changes to marine recreational fishing regulations, focusing on the Puget Sound and coast. The department also proposes technical changes to clarify, correct, and update language as part of this rule making.

This proposal will create WAC 220-20-011 Food fish and shellfish taken by another. It is unlawful to possess food fish or shellfish taken during the open season by another fisher unless it is accompanied by a statement which shows the name, address, fishing license or document number and signature of the taker, and the date, county or marine area where taken.

This proposal will delete WAC 220-56-312, 220-56-400, 220-56-405, 220-56-410, 220-56-415, 220-56-340 and 220-56-385, as they [have] become redundant.

Edits are made to WAC 220-12-010, 220-16-265, 220-56-115, 220-56-310, 220-56-315, 220-56-317, 220-56-320, 220-56-325, 220-56-330, 220-56-335, 220-56-336, 220-56-355, and 220-56-390.

Reasons Supporting Proposal: The changes in this proposal are needed to make necessary adjustments to recreational fishing rules based on department data and public feedback. The department also proposes amendments for conservation purposes and to provide greater fishing opportunity. Technical changes are needed to ensure accuracy, clarity, and uniformity in the code.

Statutory Authority for Adoption: RCW 77.04.012, 77.04.013, 77.04.055, and 77.12.047.

Statute Being Implemented: RCW 77.04.012, 77.04.013, 77.04.055, and 77.12.047.

Rule is not necessitated by federal law, federal or state court decision.

Name of Proponent: [No information supplied by agency], governmental.

Name of Agency Personnel Responsible for Drafting and Implementation: Valerie Tribble, 600 Capitol Way North, Olympia, WA 98501-1091, (360) 902-2339; and Enforcement: Chief Chris Anderson, 600 Capitol Way North, Olympia, WA 98501-1091, (360) 902-2373.

No small business economic impact statement has been prepared under chapter 19.85 RCW. There is no evidence that these rule changes will have any impact on small business.

A cost-benefit analysis is not required under RCW 34.05.328. No hydraulics are involved in these rule changes.

> September 16, 2016 Scott Bird Rules Coordinator

AMENDATORY SECTION (Amending WSR 12-09-046, filed 4/13/12, effective 5/14/12)

WAC 220-12-010 Food fish—Classification. The following species are classified as food fish under RCW 77.12.047 and are subject to the provisions of this title:

Barracuda

Pacific barracuda Sphyraena argentea

Cyprinids

Carp Cyprinus carpio

Cods and hake

Pacific hake or whiting Merluccius productus

Walleye pollock ((Theragra chalcogrammus))

> Gadus chalcogrammus Microgadus proximus

Psettichthys melanostictus

Pacific Tomcod Pacific Cod or true cod ((Gadusmacrocephalus)) Gadus macrocephalus

Flounder, sole and halibut

Butter sole or Bellingham Isopsetta isolepis

C-O sole Pleuronichtys coenosus Dover sole Microstomus pacificus English sole Parophrys vetulus

Flathead sole Hippoglossoides elassodon Pacific halibut Hippoglossus stenolepis

Petrale sole Eopsetta jordani

Rex sole Glyptocephalus zachirus Northern rock sole Lepidopsetta polyxystra Southern rock sole Lepidopsetta bilineata Pacific sand dab Citharichthys sordidus Sand sole

Slender sole Lyopsetta exilis

Speckled sand dab Citharichthys stigmaeus Starry flounder Platichthys stellatus

Turbot or Arrowtooth

flounder Atheresthes stomias

All other species of sole and

flounder (Pleuronectiformes)

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Giant wrymouth	Delolepsis gigantea	Pacific Ocean perch	Sebastes alutus
Greenling		Yelloweye or rasphead	
Lingcod	Ophiodon elongatus	rockfish	Sebastes ruberrimus
Rock greenling	Hexagrammos superciliosus	Rosefish or splitnose rock- fish	Sebastes diploproa Sebastes brevispinis
Kelp greenling	Hexagrammos decagrammus	Silvergray rockfish	Sebastes maliger
All other species of green- ling	(Hexagrammidae)	Quillback rockfish	Sebastes flavidus
Herring and herring-li	· · · · · · · · · · · · · · · · · · ·	Yellowtail rockfish	(Scorpaenidae)
Northern anchovy	Engraulis mordax	All other species of rockfish	,
Pacific sand lance or can-	Ammodytes ((hexapterus))	Sablefish	Anoplopoma fimbria
dlefish	personatus	Salmon	
Pacific herring	Clupea ((harengus pallasi))	Chinook or King salmon	
C	<u>pallasii</u>	(except in its landlocked	
Pacific sardine or pilchard	Sardinops sagax	form as defined in WAC 232-12-018)	Oncorhynchus tshawytscha
American shad	Alosa sapidissima	Chum or dog salmon	Oncorhynchus keta
Mackerels, tunas and j	acks	Pink or humpback	Oncorhynchus gorbuscha
(carangids)		Coho or silver (except in its	Oncornynchus gorouschu
Pacific bonito	Sarda chiliensis	landlocked form as defined	
Pacific mackerel	Scomber japonicus	in WAC 232-12-018)	Oncorhynchus kisutch
Jack mackerel	Trachurus symmetricus	Sockeye or blue back	Oncorhynchus nerka
Monterey Spanish mackerel	Scomberomorus concolor	Masu	Oncorhynchus masu
Spanish mackerel	Scomberomorus maculatus	Atlantic salmon (except in	
Yellowtail	Seriola dorsalis	its landlocked form)	Salmo salar
Albacore	Thunnus alalunga	Sculpins	
Bluefin tuna	Thunnus thynnus	Brown Irish lord	Hemilepidotus spinosus
Skipjack tuna	Euthynnus pelamis	Buffalo sculpin	Enophrys bison
Yellowfin tuna	Thunnus albacares	Cabezon	Scorpaenichthys marmoratus
All other species of tunas and mackerels	(Scombridae)	Great sculpin	Myoxocephalus polyacantho- cephalus
Pacific pomfret	Brama japonica	Pacific Staghorn sculpin	Leptocottus armatus
Pacific pompano	Peprilus simillimus	Red Irish lord	Hemilepidotus hemilepidotus
Plainfin midshipman	Parichthys notatus	Seabass and drums	
Ratfish	Hydrolagus colliei	White seabass	Cynoscion nobilis
Rattails, all species	(Coryphaenoididae)	All other seabass and drums	(Sciaenidae and Serranidae)
Skates		Sharks	
Longnose skate	Raja rhina	Sixgill shark	Hexanchus griseus
Big skate All other species of skates	Raja binoculata (((Rajidae)))	Soupfin or tope shark	Galeorhinus ((zyopterus)) galeus
	(Rajiformes)	Dogfish or spiny dogfish	Squalus ((acanthias)) <u>suckleyi</u>
Rockfish Bocaccio	Sebastes paucispinis	All other species of sharks	(((Squaliformes and Hexanchiformes)))
Black rockfish	Sebastes melanops		(Selachimorpha)
Brown rockfish	Sebastes auriculatus	Smelts	
Copper rockfish	Sebastes caurinus	Eulachon or Columbia	
Greenstriped rockfish	Sebastes elongatus	River smelt	Thaleichthys pacificus
Canary rockfish	Sebastes pinniger		

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Longfin smelt Spirinchus ((dilatus)) thale-

ichthys

Surf smelt Hypomesus pretiosus

All other species of smelt (Osmeridae)

Sturgeons

Green sturgeon Acipenser medirostris
White sturgeon Acipenser transmontanus

Surfperches

Blue perch or striped seap-

erch Embiotoca lateralis
Kelp perch Brachyistius frenatus
Redtail surfperch Amphistichus rhodoterus
Shiner perch Cymatogaster aggregata
Pile perch Rhacochilus vacca
Walleye surfperch Hyperprosopon argenteum
White seaperch Phanerodon furcatus

All other species of perch (Embiotocidae)

Wolf-eel Anarrhichthys ocellatus

Hagfishes

Pacific hagfish Eptatretus stouti
Black hagfish Eptatretus deani

AMENDATORY SECTION (Amending Order 817, filed 5/29/69)

WAC 220-16-265 Geographical definitions—((Lopez Island shrimp fishing area)) Marine Area 7 shrimp fishing subareas. (("Lopez Island shrimp fish area" shall include those waters of Puget Sound lying inside and southerly of a line projected from Spencer Spit on Lopez Island to Fauntle-roy Point on Decatur Island and a line projected from Decatur Light across Lopez Pass to the nearest point of Lopez Island.)) (1) Marine Area 7 South: The portion of Marine Area 7 south of a line from Biz Point on Fidalgo Island to Cape Saint Mary on Lopez Island, then south of a line from Davis Point on Lopez Island to Cattle Point on San Juan Island, then south of a line projected due west from Lime Kiln Point light to the international boundary.

(2) Marine Area 7 West: The portion of Marine Area 7 north of a line from Davis Point on Lopez Island to Cattle Point on San Juan Island, then north of a line due west from Lime Kiln Point light to the international boundary, then west of a line from the bell buoy at the international boundary to Point Doughty on Orcas Island, then west of a line projected true north and south from the western tip of Crane Island, then west of a line projected from the southern tip of Shaw Island to the number 2 buoy at the entrance to Fisherman Bay.

(3) Marine Area 7 East: The portion of Marine Area 7 north of a line from Biz Point on Fidalgo Island to Cape Saint Mary on Lopez Island, then east of a line projected from the number 2 buoy at the entrance to Fisherman Bay to the southern tip of Shaw Island, then east of a line projected true north

and south from the western tip of Crane Island, then east of a line from Point Doughty on Orcas Island to the bell buoy at the international boundary.

NEW SECTION

WAC 220-20-011 Food fish and shellfish taken by another. It is unlawful to possess food fish or shellfish taken during the open season by another fisher unless it is accompanied by a statement which shows the name, address, fishing license or document number and signature of the taker, and the date, county or marine area where taken.

<u>AMENDATORY SECTION</u> (Amending WSR 15-11-042, filed 5/14/15, effective 6/14/15)

WAC 220-56-115 Angling gear—Lawful and unlawful acts. (1) It is unlawful for any person to use more than one line while angling for personal use, except:

- (a) Anglers in possession of a valid two-pole endorsement may use up to two lines while fishing in lakes, ponds, and reservoirs open to fishing unless listed as an exception in WAC 220-55-220. Anglers in possession of a valid two-pole endorsement may use up to two lines while fishing in rivers and marine areas as noted in WAC 220-55-220 and 220-310-175 through 220-310-200.
- (b) A second line using forage fish jigger gear is permissible while fishing in Catch Record Card Areas 5, 6, 7, 8-1, 8-2, 9, 10, 11, $((\frac{12}{2}))$ and 13.
- (c) When fishing outside 3 miles from shore in Pacific Ocean waters for tuna species, anglers are not restricted on the number of rods or lines fished per angler, provided that no other species are possessed onboard the vessel. A violation of this subsection is an infraction, punishable under RCW 77.15.160, Infractions.
- (2) It is unlawful for any person to take, fish for, or possess fish taken for personal use by any means other than angling with a line attached to a pole held in hand while landing the fish or with a hand-operated line without rod or reel, except:
- (a) It is unlawful to fish for or possess salmon taken for personal use with hand lines in marine waters of Puget Sound east of the mouth of the Sekiu River and in Washington waters at the mouth of the Columbia River east of a line projected true north and south through Buoy 10, Grays Harbor, and Willapa Bay.
- (b) It is permissible to leave a pole in a pole holder while playing or landing the fish if the pole is capable of being readily removed from the pole holder.
- (c) It is permissible to use an electric power-operated reel designed for sport fishing attached to a pole.
- (3) It is unlawful for any person while angling to fail to keep his angling gear under his or her direct and immediate physical control.
- (4) In areas where a saltwater license is valid, each fisher aboard a vessel may continue to deploy angling gear or shell-fish gear until the daily limit of food fish or shellfish for all licensed anglers and juvenile anglers aboard has been retained.
- (5) In Catch Record Card Area 4 east of the Bonilla-Tatoosh line and Areas 5 through 13: It is unlawful for any

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person to take, fish for, or possess bottomfish or halibut taken for personal use, to fail to have onboard the vessel a fish descending or fish recompression device, rigged for immediate use, and capable of rapidly returning fish to depth of capture.

- (6) A violation of this section is an infraction, punishable under RCW 77.15.160, unless the person has harvested fish or shellfish. If the person has harvested fish or shellfish, the violation is punishable under RCW 77.15.380, Unlawful recreational fishing in the second degree—Penalty, unless the fish or shellfish are taken in the amounts or manner to constitute a violation of RCW 77.15.370, Unlawful recreational fishing in the first degree—Penalty.
- (((6))) (7) It is unlawful to possess fish or shellfish taken with gear in violation of the provisions of this section. Possession of fish or shellfish while using gear in violation of the provisions of this section is a rebuttable presumption that the fish or shellfish were taken with such gear. Possession of such fish or shellfish is punishable under RCW 77.15.380, Unlawful recreational fishing in the second degree—Penalty, unless the fish or shellfish are taken in the amounts or manner to constitute a violation of RCW 77.15.370, Unlawful recreational fishing in the first degree—Penalty.

AMENDATORY SECTION (Amending WSR 13-19-007, filed 9/5/13, effective 10/6/13)

- WAC 220-56-310 Shellfish—Daily limits. It is unlawful for any one person to possess at any time more than one daily limit of fresh shellfish. Additional shellfish may be possessed in a frozen or processed form. It is unlawful for any one person to take more than the following quantities and sizes of shellfish for personal use in any one day:
- (1) Cockles, borers and clams in the shell, other than razor clams, geoduck clams and horse clams, 40 clams total, or 10 pounds, whichever is achieved first ((except:
- (a) In Skagit Bay, east of a line projected from Browns Point to Swinomish Slough entrance: Diggers may additionally retain up to 20 pounds of eastern softshell clams in the shell.
- (b) In Willapa Bay: Diggers may additionally retain up to 24 cockles)).
 - (2) Razor clams: 15 clams.
 - (3) Geoduck clams: 3 clams.
 - (4) Horse clams: 7 clams.
- (5) Oysters: 18 oysters((, shucked and the shells left on the beach)). Minimum size before shucking two and one-half inches along the longest dimension of the shell.
 - (6) Rock scallops: 6 scallops.
 - (7) Weathervane scallops: 12 scallops (over 4 inches).
- (8) Spiny and pink scallops: 10 pounds or 5 quarts in the shell, in the aggregate.
 - (9) Shrimp:
- (a) In Areas 1 through 3 and Area 4 west of the Bonilla-Tatoosh line: Total weight 25 pounds, maximum 200 spot shrimp as part of the 25-pound limit.
- (b) In Area 4 east of the Bonilla-Tatoosh line and Areas 5 through 13: First Saturday in May through May 31, daily limit 80 shrimp; during all other open periods total weight 10

pounds, maximum 80 spot shrimp as part of the 10-pound limit.

- (10) Pinto abalone: Closed statewide.
- (11) Crawfish: 10 pounds in the shell. Minimum size 3 1/4 inches from tip of rostrum to tip of tail. Female crawfish with eggs or young attached to the abdomen must be released immediately.
 - (12) Sea cucumbers: 25 sea cucumbers.
 - (13) Red sea urchins: 18 sea urchins.
 - (14) Purple sea urchins: 18 sea urchins.
 - (15) Green sea urchins: 36 sea urchins.
 - (16) Dungeness crab:
- (a) In Area 1 except when fishing from the north jetty of the Columbia River and Areas 2, 3, and 4 west of the Bonilla-Tatoosh line 6 male crab.
- (b) In Area 4 east of the Bonilla-Tatoosh line, and Areas 5, 6, 7, 8-1, 8-2, 9, 10, 11, 12 and 13 5 male crabs.
- (c) In the Columbia River upstream of a line from the outermost end of the north jetty to the exposed end of the south jetty, or when fishing from the north jetty of the Columbia River 12 male crab.
 - (17) Red rock crab: 6 crab.
 - (18) Mussels: 10 pounds in the shell, in the aggregate.
- (19) Goose barnacles: 10 pounds of whole barnacles or 5 pounds of barnacle stalks.
 - (20) Ghost and mud shrimp: 10 dozen.
 - (21) King and box crab: Closed statewide.
 - (22) Tanner crab: 6 crab.

AMENDATORY SECTION (Amending WSR 14-01-056, filed 12/12/13, effective 1/12/14)

- WAC 220-56-315 Personal use crab, shrimp, craw-fish—Unlawful acts. (1) It is unlawful to take and possess crab, shrimp, and crawfish taken for personal use except by hand or with hand dip nets, ring nets, shellfish pots, or any hand-operated instrument that will not penetrate the shell. A violation of this subsection is a misdemeanor, punishable under RCW 77.15.380 or 77.15.382 depending on the circumstances of the violation.
- (2) It is unlawful to set, fish, or pull more than 2 units of gear per person at any one time, unless otherwise provided in this subsection. A unit of gear is defined as a hand dip net, shellfish pot, ring net or any other instrument used to capture crab, shrimp, or crawfish. A violation of this subsection is punishable under RCW 77.15.160, Infractions, or RCW 77.15.380, Unlawful recreational fishing in the second degree—Penalty, depending on the circumstances of the violation.
- (a) In Puget Sound waters, it is unlawful to set, fish, or pull at any one time more than 2 units of crab gear and 2 additional units of shrimp gear per person.
- (b) In Catch Record Card Areas 4 through 13, it is unlawful for the operator of any boat from which shrimp pots are set, fished, or pulled to have on board or to fish more than 4 shrimp pots.
- (c) In the Columbia River, it is unlawful to set, fish, or pull more than 3 units of crab gear <u>per person</u>.
- (d) In fresh water, it is permissible to use up to 5 units of gear per person to fish for crawfish.

Proposed

- (3) It is unlawful for any person to operate a shellfish pot not attached to a buoy bearing that person's name, except that a second person may assist the pot owner in operation of the gear. A violation of this subsection is a misdemeanor, punishable under RCW 77.15.382, Unlawful use of shellfish gear for personal use purposes—Penalty.
- (4) It is unlawful to salvage or attempt to salvage shell-fish pot gear from Hood Canal that has been lost, unless the person first obtains a permit issued by the director, authorizing that activity. A violation is punishable under RCW 77.15.180, Unlawful interference with fishing or hunting gear—Penalty. It is unlawful to fail to comply with all provisions of a permit authorizing the salvage of gear from Hood Canal. A violation of this subsection is RCW 77.15.750, Unlawful use of a department permit—Penalty.
- (5) It is unlawful to dig for or possess ghost or mud shrimp taken for personal use by any method except hand operated suction devices or dug by hand. A violation of this subsection is punishable under RCW 77.15.160, Infractions, or RCW 77.15.380, Unlawful recreational fishing in the second degree—Penalty, depending on the circumstances of the violation.
- (6) It is unlawful to have more than one unit of unattended gear attached to a buoy line or to fail to have a separate buoy for each unit of gear. "One unit of gear" means one ring net or one shellfish pot. A violation of this subsection is a misdemeanor, punishable under RCW 77.15.382, Unlawful use of shellfish gear for personal use purposes—Penalty.
- (7) In waters open only on certain days or certain hours during the day, except for those waters affected by the night closure set out in subsection (8) of this section, it is unlawful to fail to remove gear from the water if fishing for shellfish is not allowed. It is also unlawful to fail to remove gear from the water within one hour after sunset if fishing is not allowed on the next calendar day. In waters that are open continuously, except for those waters affected by the night closure set out in subsection (8) of this section, gear may be left in the water during a night closure. A violation of this subsection is punishable under RCW 77.15.160, Infractions, or RCW 77.15.380, Unlawful recreational fishing in the second degree—Penalty, depending on the circumstances of the violation.
- (8) It is unlawful to set or pull shellfish pots, ring nets or star traps from a vessel in Catch Record Card Areas 1-13 from one hour after official sunset to one hour before official sunrise. A violation of this subsection is punishable under RCW 77.15.160, Infractions, or RCW 77.15.380, Unlawful recreational fishing in the second degree—Penalty, depending on the circumstances of the violation.

AMENDATORY SECTION (Amending WSR 12-23-016, filed 11/9/12, effective 12/10/12)

- WAC 220-56-317 Personal use shrimp pot gear requirements. (1) All buoys attached to shrimp gear must be yellow or fluorescent yellow in color. Flags and staff, if attached, may be any color.
- (2) It is unlawful to take, fish for, or possess shrimp taken for personal use with shellfish pot gear unless the gear meets the following requirements:

- (a) A shrimp pot may not exceed 10 feet in perimeter and 1-1/2 feet in height.
- (b) The entire top, bottom, and sides of the shrimp pot must be constructed of mesh material (no liners allowed), except the entrance tunnels must have the minimum mesh opening size specified in subsection (2)(((e))) (g) of this section.
- (c) ((The minimum mesh size for shrimp pots is one inch, defined as a mesh that a 7/8 inch square peg will pass through each mesh opening. Flexible (web) mesh pots must have an opening with a mesh size of a minimum of 1-3/4 inch stretch measure.

June 1 through October 15, Area 4 east of the Bonilla-Tatoosh line, and Areas 5 through 13:

- (i) In any Marine Area or portion thereof that is closed for spot shrimp but open for coonstripe and pink shrimp, the minimum mesh size for shrimp pots is 1/2 inch.
- (ii) 1/2-inch mesh is defined as mesh that a 3/8-inch square peg will pass through each mesh opening, except for flexible (web) mesh pots where the opening must be a minimum of 1-1/8 inch stretch measure.
- (d) All entrance tunnels must open into the pot from the side.
- (e) The sum of the maximum widths of all entrance tunnels must not exceed half of the perimeter of the bottom of the pot.)) All entrance tunnels must open into the pot from the side.
- (d) The sum of the maximum widths of all entrance tunnels must not exceed half of the perimeter of the bottom of the pot.
- (e) Half-inch mesh is defined as mesh that a 3/8-inch square peg will pass through each mesh opening (except for the entrance tunnels which can be any size mesh material); flexible (web) mesh pots must have mesh size openings that are a minimum of 1-1/8 inch stretch measure.
- (f) One inch mesh is defined as a mesh that a 7/8-inch square peg will pass through each mesh opening (except for the entrance tunnels which can be any size mesh material); flexible (web) mesh pots must have mesh size openings that are a minimum of 1-3/4 inch stretch measure.
 - (g) The minimum mesh size for shrimp pots is:
- (i) Year-round, Marine Areas 1-3 and 4 west of the Bonilla-Tatoosh line:
- (A) Shoreward of 20 fathoms, the minimum mesh size for shrimp pots is 1/2-inch.
- (B) Seaward of 20 fathoms, the minimum mesh size for shrimp pots is 1 inch.
- (ii) May 1 through October 15, Area 4 east of the Bonilla-Tatoosh line, and Areas 5 through 13, the minimum mesh size for shrimp pots is 1 inch, with the following exception: June 1 through October 15, in any Marine Area or portion thereof that is closed for spot shrimp but open for coonstripe and pink shrimp, the minimum mesh size for shrimp pots is 1/2-inch.

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AMENDATORY SECTION (Amending WSR 12-23-016, filed 11/9/12, effective 12/10/12)

- WAC 220-56-320 Personal use shellfish gear— Unlawful acts. (1) It is unlawful to violate the following provisions regarding unattended shellfish gear:
- (a) Unattended shellfish gear must be marked with a buoy that lists the first and last name and permanent mailing address of the ((owner)) fisher operating the gear.
- (i) The information on the buoy must be permanent, visible, and legible.
- (ii) Only one person's name and address may appear on a marker buoy.
- (b) All buoys must consist of durable material. It is unlawful to use bleach, antifreeze or detergent bottles, paint cans, or any other container as a buoy.
- (c) Buoys must remain visible on the surface at all times, except during extreme tidal conditions.
- (d) The line attaching a buoy to shellfish gear must be weighted sufficiently to prevent the line from floating on the water's surface.
- (2) It is unlawful to fish for or possess shellfish taken for personal use with shellfish pot gear unless the gear allows for escapement using at least one of the following methods:
- (a) Attachment of pot lid hooks or tiedown straps with a single strand or loop of untreated, 100 percent cotton twine no larger than thread size 120 so that the pot lid will open freely if the twine or fiber is broken.
- (b) An opening in the pot mesh no less than three inches by five inches which is laced or sewn closed with untreated, 100 percent cotton twine no larger than thread size 120. The opening must be located within the top half of the pot and be unimpeded by the entry tunnels, bait boxes, or any other structures or materials.
- (c) Attachment of pot lid or one pot side serving as a pot lid with no more than 3 single loops of untreated 100 percent cotton or other natural fiber twine no larger than thread size 120 so that the pot lid or side will open freely if the twine or fiber is broken.
- (3) It is unlawful to set shellfish pots in a manner that they are not covered by water at all times.
- (4) Use of gear in violation of this section is an infraction, punishable under RCW 77.15.160, except failure to use untreated cotton twine as provided for in subsection (2) of this section is a misdemeanor punishable under RCW 77.15.380 Unlawful recreational fishing in the second degree—Penalty.
- (5) It is unlawful to possess shellfish taken with gear in violation of the provisions of this section. Possession of shell-fish while using gear in violation of the provisions of this section is a rebuttable presumption that the shellfish were taken with that gear. Violation of this subsection is punishable under RCW 77.15.380 Unlawful recreational fishing in the second degree—Penalty, unless the shellfish are taken in the amounts or manner to constitute a violation of RCW 77.15.370 Unlawful recreational fishing in the first degree—Penalty.

- AMENDATORY SECTION (Amending WSR 07-05-051, filed 2/16/07, effective 3/19/07)
- WAC 220-56-325 Shrimp—Areas and seasons. It is unlawful to fish for or possess shrimp taken for personal use from the following areas, except as otherwise provided in this section:
- (1) ((Discovery Bay Shrimp District and Marine Areas 8, 9, 10 and 11 Open 7:00 a.m. through 3:00 p.m., beginning the first Saturday in May through May 31 and open only on Wednesday and Saturday of each week except it is lawful for divers to take shrimp by hand or hand held device from 7:00 p.m. until midnight on any open day in May in Marine Area 8-2:
- (2) Hood Canal Shrimp District Open 9:00 a.m. through 1:00 p.m., the first Saturday in May through May 31 and open only on Wednesday and Saturday of each week;
- (3) Marine Area 4 east of the Bonilla-Tatoosh line and Marine Areas 5, 6, 7 and 13, except for Shrimp Districts Open 7:00 a.m. the first Saturday in May through May 31 and open daily except open only Wednesday through Saturday in Marine Area 7.
- (4) Beginning June 1 through October 15 in Marine Area 4 east of the Bonilla Tatoosh line and Areas 5 through 13, shrimp fishing is open daily except closed in Area 10 and the shrimp districts at all times. Unlawful to retain spot shrimp.
- (5))) It is unlawful to fish for or possess shrimp taken for personal use in Marine Area 4 east of the Bonilla-Tatoosh line and Marine Areas 5, 6, 7, 8-1, 8-2, 9, 10, 11, 12, and 13 except as provided by emergency rule.
- (2) Marine Areas 1 through 3 and Marine Area 4 west of the Bonilla-Tatoosh line Open year-round.

<u>AMENDATORY SECTION</u> (Amending WSR 12-23-016, filed 11/9/12, effective 12/10/12)

- WAC 220-56-330 Crab—Areas and seasons—Personal use. (1) It is unlawful to fish for or possess crab taken for personal use from Puget Sound except during the following seasons:
- (a) Marine Area 4 east of the Bonilla-Tatoosh line, and Areas 5, 6, 8-1, 8-2, 9, 10, 11, 12, and 13: Open 7:00 a.m., July 1 through Labor Day, Thursday through Monday of each week.
- (b) Those waters of Marine Area 7 south and west of a line projected from Village Point, Lummi Island, through the navigation buoy just east of Matia Island, thence to the buoy at Clements Reef, thence to the easternmost point of Patos Island, thence running along the northern shore of Patos Island to the westernmost point of Patos Island, thence ((due)) true west to the international boundary and south of a line that extends from Point Francis on Portage Island, through the marker just north of Inati Bay on Lummi Island to Lummi Island: Open 7:00 a.m., July 15 through September 30, Thursday through Monday of each week.
- (c) Those waters of Marine Area 7 north and east of a line projected from Village Point, Lummi Island through the navigation buoy just east of Matia Island thence to the buoy at Clements Reef thence to the easternmost point of Patos Island, running along the northern shoreline of Patos Island and from the westernmost point of Patos Island ((due)) true

Proposed

west to the international boundary and north of a line that extends from Point Francis on Portage Island, through the marker just north of Inati Bay on Lummi Island to Lummi Island: Open 7:00 a.m. August 15 through September 30, Thursday through Monday of each week.

- (2) It is unlawful to fish for or possess crab taken for personal use with shellfish pot gear from Marine Areas 1, 2, 3, and Area 4 west of the Bonilla-Tatoosh line except during the period from December 1 through September 15. Open to gear other than shellfish pot gear year-round.
- (3) The Columbia River upstream from a line projected from the outermost end of the north jetty to the exposed end of the south jetty is open to crab fishing for personal use year-round.
- (4) It is unlawful to fish for or possess crab taken for personal use with shellfish pot or ring net gear from the waters of Padilla Bay or Swinomish Slough within 25 yards of the Burlington Northern Railroad crossing the northern end of Swinomish Slough except from one hour before official sunrise to one hour after official sunset.
- (5) Violation of this section is a misdemeanor, punishable under RCW 77.15.380, Unlawful recreational fishing in the second degree—Penalty.

<u>AMENDATORY SECTION</u> (Amending WSR 12-23-016, filed 11/9/12, effective 12/10/12)

- WAC 220-56-335 Crab—Unlawful acts—Personal use. (1) It is unlawful for any person to take or possess any female Dungeness crab for personal use.
- (2) It is unlawful to take or possess any male Dungeness crabs taken for personal use measuring less than the following caliper measurements:
- (a) In Puget Sound (all contiguous waters east of the Bonilla-Tatoosh Line) 6 1/4 inch minimum size.
- (b) In coastal waters west of the Bonilla-Tatoosh Line, Pacific Ocean waters except when fishing from the north jetty of the Columbia River, Grays Harbor, Willapa Bay 6 inch minimum size.
- (c) In the Columbia River upstream of a line from the outermost end of the north jetty to the exposed end of the south jetty, and when fishing from the north jetty of the Columbia River 5 3/4 inch minimum size.
- (3) It is unlawful to take or possess any red rock crab taken for personal use that measure less than 5 inches. Either sex may be retained.
- (4) <u>It is unlawful to take or possess any tanner crab taken</u> <u>for personal use that measure less than 4 1/2 inches. Either sex may be retained.</u>
- (5) All crab measurements must be made at the widest part of the shell (caliper measurement) immediately in front of the points (tips).
- $((\frac{5}{)}))$ (6) It is unlawful to possess in the field any crab or crab parts without also retaining the back shell.
- $((\frac{(6)}{(6)}))$ (7) It is unlawful to possess soft-shelled crab for any personal use purpose. Violation of this subsection is an infraction, punishable under RCW 77.15.160.

AMENDATORY SECTION (Amending WSR 97-07-078, filed 3/19/97, effective 5/1/97)

- WAC 220-56-336 Crawfish, abalone, sea urchins, sea cucumbers, goose barnacles—Areas and seasons, personal use fishery. ((The open season for crawfish is the first Monday in May through October 31.)) (1) Crawfish: The open season for crawfish is the first Monday in May through October 31.
- (2) Abalone: It is unlawful to fish for or possess abalone taken for personal use the entire year.
- (3) Sea urchins: It is lawful to fish for sea urchins for personal use the entire year. It shall be lawful to take, fish for and possess sea urchins for personal use with any hand-operated instrument which does not penetrate the shell.
- (4) Sea cucumbers: It is lawful to fish for sea cucumbers for personal use the entire year except closed year-round in Marine Area 12. It shall be lawful to take, fish for and possess sea cucumbers for personal use with any hand-operated instrument which does not penetrate the animal.
- (5) Goose barnacles: It is lawful to take goose barnacles for personal use the entire year.

AMENDATORY SECTION (Amending WSR 02-17-019, filed 8/9/02, effective 9/9/02)

- WAC 220-56-355 Clams, oysters, mussels—Unlawful acts. (1) It is unlawful to take, dig for and possess clams (excluding razor clams), cockles, and mussels taken for personal use except by hand or with hand-operated forks, picks, mattocks, rakes and shovels. Violation of this subsection is an infraction, punishable under RCW 77.15.160.
- (2) It is unlawful to take, dig for and possess razor clams taken for personal use except by hand, shovels or with cylindrical cans, tubes or hinged digging devices. The opening of tubes or cans must be either circular or elliptical with the circular can/tube having a minimum outside diameter of 4 inches and the elliptical can/tube having a minimum dimension of 4 inches long and 3 inches wide outside diameter. The hinged digging device when opened in a cylindrical position, must have a minimum outside diameter of 4 inches at the bottom. Violation of this subsection is an infraction, punishable under RCW 77.15.160.
- (3) Any newly designed or modified digging device intended for the recreational use of razor clams must receive the specific approval of the director of fish and wildlife.
- (4) In the field each digger, including holders of razor clam disability permits, must have his or her daily limit in a separate container. Violation of this subsection is an infraction, punishable under RCW 77.15.160.
- (5) It is unlawful to possess shellfish taken with gear that violates the provisions of this section. Possession of shellfish while using gear in violation of the provisions of this section is a rebuttable presumption that the shellfish were taken with such gear. Possession of such shellfish is punishable under RCW 77.15.380 Unlawful recreational fishing in the second degree—Penalty, unless the shellfish are taken in the amounts or manner to constitute a violation of RCW 77.15.370 Unlawful recreational fishing in the first degree—Penalty.

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- (6) It shall be unlawful for any person digging clams other than razor clams for personal use to fail to fill in holes created during the digging operation. Beach terrain must be returned to approximately its original condition by clam diggers before leaving the scene.
- $((\frac{(2)}{2}))$ (7) It shall be unlawful to maim, injure or attempt to capture a geoduck by thrusting any instrument through its siphon or to possess only the siphon or neck portion of a geoduck.
- (((3))) (8) Oysters taken for personal use must be shucked before removing oysters from the intertidal zone and the shells replaced on the tidelands at the approximate tide level from which originally taken and it shall be unlawful for any person to fail to do so.
- (9) Opening or shucking oysters by heating the shell or cooking oysters in the shell is unlawful.
- (10) It is unlawful to possess Manila, native littleneck, cockle, or butter clams taken for personal use which measure less than 1-1/2 inches across the longest dimension of the shell except minimum size 1-1/4 inches if taken from public tidelands on the west side of Quilcene Bay north of the county boat ramp.
- (((4))) (11) It is unlawful to return any eastern softshells, horse clams, or geoducks to the beach or water regardless of size or condition. All such clams taken for personal use must be retained by the digger as part of the daily limit.
- $((\frac{5}{2}))$ (12) Violation of the provisions of this section shall be an infraction, punishable under RCW 77.15.160.

AMENDATORY SECTION (Amending WSR 13-19-007, filed 9/5/13, effective 10/6/13)

- **WAC 220-56-390 Squid, octopus.** (1)(a) Squid daily limit: For squid other than Humboldt squid, the daily limit is 10 pounds or 5 quarts. For Humboldt squid, the daily limit is 5 squid.
- (b) It is unlawful to take, fish for or possess squid taken for personal use with more than one line. A maximum of four squid lures may be used. If gear utilizes conventional hooks, it shall not exceed a total of nine points. Herring rakes and hand dip net gear may be used to take squid. In the field each person taking squid must use a separate container to hold their catch.
- (c) It is permissible to take, fish for or possess squid the entire year((, except closed year-round in Catch Record Card Area 12)).
 - (2)(a) The octopus daily limit is 1.
- (b) It is unlawful to take octopus except by hand or by any instrument which will not penetrate or mutilate the body, except that it is permissible to retain octopus taken while angling with hook and line gear.
 - (c) It is unlawful to take octopus in the following areas:
 - (i) Marine Area 12;
- (ii) **Redondo Beach.** Redondo Beach is defined as the waters, bed lands, and tidelands within the area described by a line starting from shore at 122°19'27.69"W, 47°20'55.64"N; then northwesterly to 122°19'30.77"W, 47°20'56.82"N; then to 122°19'33.84"W, 47°20'57.31"N; then northeasterly to 122°19'29.78"W, 47°21'02.32"N; then returning to shore at 122°19'25.27"W, 47°21'00.64"N.

- (iii) **Three Tree Point.** Three Tree Point is defined as the waters, bed lands, and tidelands within the area described by a line starting from shore at 122°22'48.68"W, 47°27'06.46"N; then northwesterly to 122°22'58.06"W, 47°27'15.30"N; then northeasterly to 122°22'36.99"W, 47°27'25.51"N; then returning to shore at 122°22'27.63"W, 47°27'16.67"N.
- (iv) **Alki Beach Seacrest Coves 1, 2 and 3.** Alki Beach Seacrest Coves 1, 2, and 3 are defined as the waters, bed lands, and tidelands within the area described by a line starting from shore at 122°22'37.34"W, 47°35'12.98"N; then northeasterly and offshore to 122°22'33.61"W, 47°35'16.10"N; then northwesterly to 122°23'51.20"W, 47°35'29.51"N; then returning to shore at 122°23'54.31"W, 47°35'28.81"N. This area does not include waters within 150 feet of the Seacrest Public Fishing Pier, as demarcated at the surface with buoys and on the sea floor by a perimeter line.
- (v) **Les Davis.** Les Davis is defined as the waters, bed lands, and tidelands within the area described by a line starting from shore at 122°29'07.21"W, 47°17'05.15"N; the northeasterly to 122°29'0.97"W, 47°17'10.57"N; then southeasterly to 122°31'05.91"W, 47°17'06.91"N; then returning to shore at 122°30'59.80"W, 47°17'01.48"N.
- (vi) **Alki Beach Junk Yard.** Alki Beach Junk Yard is defined as the waters, bed lands, and tidelands within the area described by a line starting from shore at 122°24'57.17"W, 47°34'40.64"N; then northwesterly to 122°25'03.25"W, 47°34'50.03"N; then northeasterly to 122°24'40.68"W, 47°34'56.75"N; then returning to shore at 122°24'34.48"W, 47°34'47.34"N.
- (vii) **Days Island.** Days Island is defined as the waters, bed lands, and tidelands within the area described by a line starting from shore at 122°33'49.16"W, 47°14'07.49"N; then west to 122°34'01.41"W, 47°14'07.58"N; then north to 122°34'0.78"W, 47°14'41.73"N; then returning to shore at 122°34'40.74"W, 47°14'41.73"N.
- (viii) **Deception Pass.** Deception Pass is defined as the waters, bed lands, and tidelands east of a line starting at 122°39'48.07"W, 48°24'08.05"N; and north to 122°40'20.57"W, 48°25'10.16"N; then east to 122°40'09.63"W, 48°25'16.15"N proceeding to 122°39'50.68"W, 48°24'55.51"N; and west of a line starting at 122°36'54.24"W, 48°24'29.52"N; and north to 122°36'54.73"W, 48°24'48.92"N.
- (3) It is unlawful to possess squid or octopus taken with gear that violates the provisions of this section. If a person violates any provision of this section but has not yet harvested squid or octopus, the violation is an infraction punishable under RCW 77.15.160. Possession of squid or octopus while using gear in violation of the provisions of this section is a rebuttable presumption that the squid or octopus were taken with such gear. Possession of such squid or octopus is punishable under RCW 77.15.380 Unlawful recreational fishing in the second degree—Penalty, unless the squid or octopus are taken in the amounts or manner to constitute a violation of RCW 77.15.370 Unlawful recreational fishing in the first degree—Penalty.

[41] Proposed

REPEALER

The following sections of the Washington Administrative Code are repealed:

WAC 220-56-312 Shellfish—Possession limits.

WAC 220-56-340 General provisions—Clams, cockles,

mussels—Gear.

WAC 220-56-385 Oysters—Unlawful acts.

WAC 220-56-400 Abalone.

WAC 220-56-405 Sea urchins.

WAC 220-56-410 Sea cucumbers.

WAC 220-56-415 Goose barnacles.

WSR 16-19-065 PROPOSED RULES PARKS AND RECREATION COMMISSION

[Filed September 19, 2016, 1:15 p.m.]

Original Notice.

Preproposal statement of inquiry was filed as WSR 16-16-042.

Title of Rule and Other Identifying Information: The agency will conduct a review of WAC 352-48-050 Application process and 352-56-050 Application process, for the snowmobile and nonmotorized winter recreation programs.

This review will be conducted to provide clarification and modifications to rules including WAC 352-48-050 and 352-56-050. The review may also result in minor changes and corrections to rules in order to bring rules up-to-date with current terminology, correction of references to statutes contained in the rules and completion of a general review for clarification, corrections and modifications.

Hearing Location(s): Commission meeting at the Harman Center, 101 North 65th Avenue, Yakima, WA 98502, on November 17, 2016, at 9:00 a.m. to 5:00 p.m.

Date of Intended Adoption: November 17, 2016.

Submit Written Comments to: Pamela A. McConkey, 1111 Israel Road S.W., Olympia, WA 98504-2650, e-mail pamela.mcconkey@parks.wa.gov, fax (360) 586-6651, by November 14, 2016.

Assistance for Persons with Disabilities: Contact Becki Ellison at becki.ellison@parks.wa.gov or by calling (360) 902-8502.

Purpose of the Proposal and Its Anticipated Effects, Including Any Changes in Existing Rules: State parks' staff has reviewed the commission rules in consideration of changes to current business practices. The agency has proposed changes to selected sections of chapters 352-48 and 352-56 WAC to consider changes pertaining to the snowmobile and nonmotorized winter recreation program's funding applications process and due dates. These changes will provide a more definitive process for submitting funding requests to the winter recreation program by changing the due date from received by June 1 each year, to postmarked by

June 1, giving the requester assurance of meeting the submission requirements.

Reasons Supporting Proposal: Consistent with current business practices.

Statutory Authority for Adoption: RCW 79A.05.030, 79A.05.035.

Rule is not necessitated by federal law, federal or state court decision.

Name of Proponent: Washington state parks and recreation commission, governmental.

Name of Agency Personnel Responsible for Drafting and Implementation: Pamela A. McConkey, 1111 Israel Road, Olympia, WA 98504, (360) 902-8595.

No small business economic impact statement has been prepared under chapter 19.85 RCW. This chapter of administrative rule does not regulate or have economic impact through regulations on small business. There are no compliance costs to small business as a result of the modifications to these rules.

A cost-benefit analysis is not required under RCW 34.05.328. Significant legislative rule-making requirements are not imposed on the state parks and recreation commission, nor has the commission voluntarily applied those requirements.

September 19, 2016 Valeria Evans Management Analyst

AMENDATORY SECTION (Amending WSR 83-13-087, filed 6/17/83)

WAC 352-48-050 Application process. In order to be considered by the commission for the receipt of snowmobile funds, a public or private agency or person must:

- (1) Complete an application on a form prescribed by the commission and file the application with the commission <u>postmarked</u> by June 1st prior to the beginning of the first snow season for which funds are requested.
- (2) Obtain permission to conduct a program from all owners of the land on which a program is to occur and file documentation of such permission with the commission at the time of application for funds.
 - (3) Agree to:
- (a) File with the commission an annual report on a program for which funds are received by May 15th after the end of each snow season for which funds are received:
- (b) Return, or replace in kind, to the commission any losses to a program for which funds are received, if due to the action of a recipient of funds, a program is not completed in a timely manner or ((eancelled)) canceled; and
- (c) Execute a contract with the commission on a program for which funds are received and fulfill all obligations of the contract.
- (4) Certify to the commission that any facility for which funds are received will be open to the general public.
- (5) Comply with all applicable local, state, and federal laws.

Proposed [42]

AMENDATORY SECTION (Amending WSR 83-13-033, filed 6/17/83)

WAC 352-56-050 Application process. In order to be considered by the commission for the receipt of winter recreational program funds, a public or private agency or person must:

- (1) Complete an application on a form prescribed by the commission and file the application with the commission <u>postmarked</u> by June 1st prior to the beginning of the first snow season for which funds are requested.
- (2) Obtain permission to conduct a program from all owners of the land on which a program is to occur and file documentation of such permission with the commission at the time of application for funds.
 - (3) Agree to:
- (a) File with the commission an annual report on a program for which funds are received by May 15th after the end of each snow season for which funds are received;
- (b) Return, or replace in kind, to the commission any losses to a program for which funds are received, if due to the action of a recipient of funds, a program is not completed in a timely manner or ((eancelled)) canceled; and
- (c) Execute a contract with the commission on a program for which funds are received and fulfill all obligations of the contract.
- (4) Certify to the commission that any facility for which funds are received will be open to the general public.
- (5) Comply with all applicable local, state, and federal laws.

WSR 16-19-066 PROPOSED RULES DEPARTMENT OF SOCIAL AND HEALTH SERVICES

(Economic Services Administration) [Filed September 19, 2016, 2:14 p.m.]

Original Notice.

Preproposal statement of inquiry was filed as WSR 16-13-052.

Title of Rule and Other Identifying Information: The department is proposing to amend WAC 388-478-0015 Need standards for cash assistance, to revise the basic need standards for cash assistance.

Hearing Location(s): Office Building 2, DSHS Head-quarters, 1115 Washington, Olympia, WA 98504 (public parking at 11th and Jefferson. A map is available at https://www.dshs.wa.gov/sesa/rules-and-policies-assistance-unit/driving-directions-office-bldg-2), on October 25, 2016, at 10:00 a.m.

Date of Intended Adoption: Not earlier than October 26, 2016.

Submit Written Comments to: DSHS Rules Coordinator, P.O. Box 45850, Olympia, WA 98504, e-mail DSHSRPAU RulesCoordinator@dshs.wa.gov, fax (360) 664-6185, by 5:00 p.m., October 25, 2016.

Assistance for Persons with Disabilities: Contact Jeff Kildahl, DSHS rules consultant, by phone (360) 664-6092, TTY (360) 664-6178, or e-mail KildaJA@dshs.wa.gov.

Purpose of the Proposal and Its Anticipated Effects, Including Any Changes in Existing Rules: The community services division is proposing to amend WAC 388-478-0015 in order to revise the basic need standards for cash assistance programs.

Reasons Supporting Proposal: DSHS is required by RCW 74.04.770 to establish standards of need for cash assistance programs on an annual basis.

Statutory Authority for Adoption: RCW 74.04.050, 74.04.055, 74.04.057, 74.04.770, 74.08.090.

Statute Being Implemented: RCW 74.04.770.

Rule is not necessitated by federal law, federal or state court decision.

Name of Proponent: DSHS, governmental.

Name of Agency Personnel Responsible for Drafting, Implementation, and Enforcement: Anna Minor, P.O. Box 45470, Olympia, WA 98504-5470, (360) 725-4894.

No small business economic impact statement has been prepared under chapter 19.85 RCW. These proposed rules do not have an economic impact on small businesses. The proposed amendment only affects DSHS clients by revising the need standards for cash assistance.

A cost-benefit analysis is not required under RCW 34.05.328. These amendments are exempt as allowed under RCW 34.05.328 (5)(b)(vii) which states in-part, "[t]his section does not apply to ... rules of the department of social and health services relating only to client medical or financial eligibility and rules concerning liability for care of dependents."

September 15, 2016 Katherine I. Vasquez Rules Coordinator

AMENDATORY SECTION (Amending WSR 16-03-013, filed 1/8/16, effective 2/8/16)

WAC 388-478-0015 Need standards for cash assistance. The need standards for cash assistance units are:

(1) For assistance units with <u>an</u> obligation to pay shelter costs:

Assistance Unit Size	Need Standard
1	\$((1,308)) <u>1,348</u>
2	((1,656)) 1,706
3	((2,044)) 2,106
4	((2,412)) 2,485
5	((2,780)) 2,864
6	((3,148)) 3,243
7	((3,638)) 3,749
8	((4,027)) 4,149
9	((4 ,415)) <u>4,549</u>
10 or more	((4,803)) 4,949

(2) For assistance units with shelter provided at no cost:

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Assistance Unit Size	Need Standard
1	\$((665)) <u>645</u>
2	((842)) <u>816</u>
3	((1,039)) 1,008
4	((1,226)) 1,189
5	((1,413)) 1,371
6	((1,600)) <u>1,552</u>
7	((1,849)) <u>1,794</u>
8	((2,047)) 1,986
9	((2,244)) 2,177
10 or more	((2,442)) 2,369

WSR 16-19-068 PROPOSED RULES DEPARTMENT OF FISH AND WILDLIFE

[Filed September 19, 2016, 3:15 p.m.]

Original Notice.

Preproposal statement of inquiry was filed as WSR 16-13-044 on June 8, 2016, and WSR 16-02-115 on January 6, 2016.

Title of Rule and Other Identifying Information: The department is proposing to amend existing rules regarding wildlife: WAC 232-12-011 Wildlife classified as protected shall not be hunted or fished and 232-12-014 Wildlife classified as endangered species.

Hearing Location(s): Fish and Wildlife Commission Meeting, Natural Resources Building, Room 172, 1111 Washington Street S.E., Olympia, WA 98501, on Friday, November 4-5, 2016, at 8:00 a.m.

Date of Intended Adoption: On or after December 9, 2016.

Submit Written Comments to: Online http://wdfw.wa.gov/about/regulations/development.html, Wildlife Program, Attn: Administrative Rule Public Comments, 600 Capitol Way North, Olympia, WA 98501-1091, e-mail wildthing@dfw.wa.gov, fax (360) 902-2162, by October 14, 2016.

Assistance for Persons with Disabilities: Contact Tami Lininger by October 14, 2016, TTY (800) 833-6388 or (360) 902-2267.

Purpose of the Proposal and Its Anticipated Effects, Including Any Changes in Existing Rules: The proposal will remove bald eagle and peregrine falcon from the state's sensitive species subcategory (WAC 232-12-011). However, as nongame birds the bald eagle and peregrine falcon shall remain protected species under WAC 232-12-011. These species will also continue to be protected under the federal Migratory Bird Treaty Act and the bald eagle is also protected under the federal Golden and Bald Eagle Act.

The proposal will reclassify American white pelican from state endangered (WAC 232-12-014) to the state's threatened species subcategory (WAC 232-12-011).

In addition, the proposal will reclassify the North American (Canada) lynx and marbled murrelet from the state's threatened species subcategory (WAC 232-12-011) to state endangered (WAC 232-12-014).

Reasons Supporting Proposal: The department has reviewed all relevant data pertaining to the population status of bald eagle, peregrine falcon, American white pelican, North American (Canada) lynx, and marbled murrelet in Washington. Protection measures to recover the bald eagle have abated primary threats allowing the species to make an incredible recovery both within Washington as well as nationally. While there are still potential threats across the landscape, the preponderance of evidence suggests that the bald eagle population continues to grow despite those threats. Like bald eagle, primary threats to peregrine falcons have been ameliorated and the current population demographics and positive growth trajectory warrant removal from the state's list of endangered, threatened, and sensitive species.

Concurrent with range wide increases, the numbers of American white pelicans observed in Washington have increased substantially in the last thirty years, although with just a single population in Washington the species remains vulnerable.

Information on the North American (Canada) lynx indicates that the state population has declined likely largely from the loss of suitable habitat due to wildfires. Washington's marbled murrelet population has continued to decline due to a number of factors, including loss and fragmentation of suitable nesting habitat, nest predation, and changes in availability of prey in the marine environment.

Statutory Authority for Adoption: RCW 77.04.012, 77.04.013, 77.04.055, and 77.12.047.

Statute Being Implemented: RCW 77.04.012, 77.04.013, 77.04.055, and 77.12.047.

Rule is not necessitated by federal law, federal or state court decision.

Name of Proponent: [Department of fish and wildlife], governmental.

Name of Agency Personnel Responsible for Drafting and Implementation: Eric Gardner, 600 Capitol Way North, Olympia, WA 98501-1091, (360) 902-2339; and Enforcement: Chief Chris Anderson, 600 Capitol Way North, Olympia, WA 98501-1091, (360) 902-2373.

No small business economic impact statement has been prepared under chapter 19.85 RCW. These rule changes do not impact small businesses.

A cost-benefit analysis is not required under RCW 34.05.328. No hydraulics are involved in these rule changes.

September 19, 2016 Scott Bird Rules Coordinator

<u>AMENDATORY SECTION</u> (Amending WSR 15-10-021, filed 4/27/15, effective 5/28/15)

WAC 232-12-011 Wildlife classified as protected shall not be hunted or fished. Protected wildlife are designated into three subcategories: Threatened, sensitive, and other.

Proposed [44]

(1) Threatened species are any wildlife species native to the state of Washington that are likely to become endangered within the foreseeable future throughout a significant portion of their range within the state without cooperative management or removal of threats. Protected wildlife designated as threatened include:

Common Name Scientific Name western gray squirrel Sciurus griseus ((North American lynx Lynx canadensis)) ferruginous hawk Buteo regalis

((marbled murrelet Brachyramphus marmoratus))

green sea turtle Chelonia mydas loggerhead sea turtle Caretta caretta

sage grouse Centrocercus urophasianus sharp-tailed grouse Phasianus columbianus Mazama pocket gopher Thomomys mazama

American white pelican Pelecanus erythrorhynchos

(2) Sensitive species are any wildlife species native to the state of Washington that are vulnerable or declining and are likely to become endangered or threatened in a significant portion of their range within the state without cooperative management or removal of threats. Protected wildlife designated as sensitive include:

Common Name Scientific Name Gray whale Eschrichtius gibbosus

Common Loon Gavia immer

Haliaeetus leucocephalus ((bald eagle

Peregrine Falcon Falco peregrinus))

Larch Mountain

Plethodon larselli salamander Pygmy whitefish Prosopium coulteri Margined sculpin Cottus marginatus Olympic mudminnow Novumbra hubbsi

(3) Other protected wildlife include:

Common Name Scientific Name cony or pika Ochotona princeps least chipmunk Tamius minimus yellow-pine chipmunk Tamius amoenus Townsend's chipmunk Tamius townsendii red-tailed chipmunk Tamius ruficaudus hoary marmot Marmota caligata Olympic marmot Marmota olympus

Cascade

golden-mantled

ground squirrel Spermophilus saturatus

Scientific Name Common Name

golden-mantled

ground squirrel Spermophilus lateralis

Washington ground

squirrel Spermophilus washingtoni red squirrel Tamiasciurus hudsonicus Douglas squirrel Tamiasciurus douglasii northern flying squirrel Glaucomys sabrinus

wolverine Gulo gulo

painted turtle Chrysemys picta

California mountain

kingsnake Lampropeltis zonata((;))

All birds not classified as game birds, predatory birds or endangered species, or designated as threatened species or sensitive species; all bats, except when found in or immediately adjacent to a dwelling or other occupied building; mammals of the order Cetacea, including whales, porpoises, and mammals of the order *Pinnipedia* not otherwise classified as endangered species, or designated as threatened species or sensitive species. This section shall not apply to hair seals and sea lions which are threatening to damage or are damaging commercial fishing gear being utilized in a lawful manner or when said mammals are damaging or threatening to damage commercial fish being lawfully taken with commercial gear.

AMENDATORY SECTION (Amending WSR 16-11-023, filed 5/6/16, effective 6/6/16)

WAC 232-12-014 Wildlife classified as endangered **species.** Endangered species include:

Common Name Scientific Name pygmy rabbit Brachylagus idahoensis fisher Martes pennanti gray wolf Canis lupus grizzly bear Ursus arctos sea otter Enhydra lutris killer whale Orcinus orca sei whale Balaenoptera borealis fin whale Balaenoptera physalus blue whale Balaenoptera musculus humpback whale Megaptera novaeangliae black right whale Balaena glacialis sperm whale Physeter macrocephalus Columbian white-tailed Odocoileus virginianus deer leucurus

woodland caribou Rangifer tarandus caribou

((American white pelican Pelecanus ervthrorhyn-

chos))

sandhill crane Grus canadensis

[45] Proposed Common Name Scientific Name snowy plover charadrius alexandrinus upland sandpiper Bartramia longicauda spotted owl Strix occidentalis western pond turtle Clemmys marmorata leatherback sea turtle Dermochelys coriacea Polites mardon mardon skipper Oregon silverspot Speyeria zerene hippolyta butterfly Oregon spotted frog Rana pretiosa

northern leopard frog Rana pipiens
Taylor's checkerspot Euphydryas editha taylori
Streaked horned lark Eremophila alpestris

strigata

Tufted puffin Fratercula cirrhata

North American lynx Lynx canadensis

marbled murrelet Brachyramphus marmoratus

WSR 16-19-069 PROPOSED RULES EMPLOYMENT SECURITY DEPARTMENT

[Filed September 19, 2016, 3:32 p.m.]

Original Notice.

Preproposal statement of inquiry was filed as WSR 14-14-043.

Title of Rule and Other Identifying Information: The rules amend sections in chapter 192-180 WAC, Job search requirements and WAC 192-110-015 Applications by standby workers. The rules apply to unemployment insurance benefit claims.

Hearing Location(s): Employment Security Department, Maple Leaf Conference Room, 2nd Floor, 212 Maple Park Avenue, Olympia, WA, on October 25, 2016, at 1:30 p.m.

Date of Intended Adoption: October 26, 2016.

Submit Written Comments to: Juanita Myers, Employment Security Department, P.O. Box 9046, Olympia, WA 98507, e-mail jmyers@esd.wa.gov, fax (360) 902-9605, by October 24, 2016.

Assistance for Persons with Disabilities: Contact Teresa Eckstein, state EO officer, by October 24, 2016, TTY 711 or (360) 902-9354.

Purpose of the Proposal and Its Anticipated Effects, Including Any Changes in Existing Rules: The rules pertaining to job search requirements and the job search review (JSR) program are being amended to reflect that the job search monitoring function has been moved from local WorkSource offices to a centralized function. Other changes are made to make the review process more flexible, both for the department and the claimant. For example, rather than specifying in rule the elements that must be included on a job search log, the rule simply requires that the claimant provide information requested by the department. This permits the

department to take advantage of advancing technology by permitting new methods of searching for work without having to amend the rule in future. Another change will deny benefits indefinitely to individuals who fail to appear for a review of all weeks claimed, rather than denying only the weeks prior to the review and continuing to allow claimants to draw benefits.

WAC 192-110-015 reduces the periods of standby that will be approved by the department. This means that workers temporarily laid off by their employer for more than four weeks will be required to look for other work. The rule also adds those unemployed due to natural disaster to be eligible for standby. This eliminates the need for an employer to submit a written request for exemption in cases of wildfires, mudslides, etc.

Reasons Supporting Proposal: The amendments to the JSR program will reduce costs to the trust fund. Claimants will no longer be permitted to continue to be paid unemployment benefits when they have not shown the department they are meeting job search requirements. Support for the changes to the standby rule: (1) Claimants who do not return to work after being placed on standby will have more weeks available for a job search; and (2) other base period employers are not charged while the claimant is not looking for work.

Statutory Authority for Adoption: RCW 50.12.010 and 50.12.040.

Statute Being Implemented: RCW 50.20.010 and 50.20.240.

Rule is not necessitated by federal law, federal or state court decision.

Name of Proponent: Employment security department, governmental.

Name of Agency Personnel Responsible for Drafting: Juanita Myers, Olympia, (360) 902-9665; Implementation and Enforcement: Susan Hettinger, Olympia, (360) 902-9223.

No small business economic impact statement has been prepared under chapter 19.85 RCW. The rules do not impose additional costs on businesses in general, nor on small businesses in particular.

A cost-benefit analysis is required under RCW 34.05.328. A preliminary cost-benefit analysis may be obtained by contacting Juanita Myers, Employment Security Department, 212 Maple Park Drive, P.O. Box 9046, Olympia, WA 98503, phone (360) 902-9665, fax (360) 902-9605, e-mail jmyers@esd.wa.gov.

September 19, 2016 Lisa Marsh Deputy Commissioner

AMENDATORY SECTION (Amending WSR 05-19-018, filed 9/9/05, effective 10/10/05)

WAC 192-110-015 Applications by standby workers—RCW 50.20.010. (1) What is "standby?"

(a) "Standby" means you are temporarily unemployed because of a lack of work but:

(i) You expect to return to work with your regular employer((-)) within four weeks; or

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- (ii) You expect to begin full-time work with a new employer within two weeks; or
- (iii) You are temporarily unemployed due to natural disaster.
- (b) You do not have to register for work or look for other work while you are on standby.
- (c) You must be available for all hours of work offered by your regular employer.

(2) How long can I be on standby?

- (a) You can ask to be on standby for up to four weeks <u>for each standby period</u>, <u>beginning</u> with the date of the request.
- (b) ((We will ask your employer to verify that you are on standby and your expected return to work date:
- (i) If your employer does not reply, you can be on standby for up to four weeks;
- (ii) If your employer confirms you are on standby, you can be on standby for up to four weeks or until the return to work date given by your employer, whichever is earlier;
- (iii) If your employer replies that you are not on standby or do not have a return to work date within eight weeks, we will require you to immediately register for work and to look for work.
- (c) Your regular employer may ask to extend your standby status for more than four, but no more than eight, weeks (except as provided in (2)(d) below). This request must be approved by the department. We will consider the following before deciding whether to approve standby for more than four weeks:
 - (i) How long you have been out of work;
 - (ii) Whether other suitable work is available;
- (iii) The impact on you and your employer if you accept other work; and
- (iv) Other factors that apply to your situation)) You may receive up to four weeks of standby for subsequent temporary layoffs, but in no case will you be eligible for standby for more than four weeks at a time or a total of eight weeks in your benefit year except as provided in (c) of this subsection.
- (((d))) (c) At his or her discretion, the commissioner may grant ((standby for more than eight weeks in a benefit year.)) exceptions due to natural disaster. Exceptions can be made in other extraordinary circumstances when the employer ((must apply)) applies in writing and shows there are conditions that apply to the business that are so unique or unusual compared to similar businesses that having their employees on standby for more than ((eight)) four weeks per standby period or eight weeks per benefit year is necessary.
- (((e))) (d) We can approve standby if you have obtained a <u>definite offer of</u> bona fide ((job with a new employer)) <u>full-time work</u> that has a ((definite)) <u>probable</u> start date within ((four)) <u>two</u> weeks, which include the week of the job offer and up to two additional weeks. If the standby request under this subsection is part of your initial claim, standby begins with the date of the request.
 - (e) The job, however, must be ((in employment)):
- (i) With a new employer or with a former employer to whom you are no longer attached as provided in subsection (3)(f) of this section; and
- (ii) Covered by Title 50 RCW or the comparable laws of another state or the federal government.

- (3) Are there conditions that apply to a request for standby?
- (a) You must have a ((definite)) probable date when you will return to work for your regular employer;
- (b) We will not approve standby if you only have prospects of future work with ((the)) your regular employer((5)) or a promise of more work at some unspecified date((5 or when the return to work date depends on conditions beyond the employer's control, such as weather));
- (c) We will not approve standby with your regular employer unless the employment is covered by Title 50 RCW or the comparable laws of another state or the federal government;
- (d) Except for claimants who qualify as part-time eligible workers under RCW 50.20.119, we will not approve standby if you regularly work ((fewer than)) less than full-time. For purposes of this section, "full-time" means forty hours each week ((for the employer; and
- (d) Except as provided in subsection (2)(d), we will not approve standby for more than eight weeks in any benefit year.)) or the number of hours that are full-time for your occupation and labor market area;
- (e) Any week(s) that you do not qualify for benefits ((because of your earnings)) will not be considered as part of the maximum eight weeks((-)) of standby; and
- (f) After ((eight)) four consecutive weeks of unemployment, we will no longer consider you attached to that employer. You must meet the job search requirements specified by RCW 50.20.010 (1)(c) and 50.20.240.

AMENDATORY SECTION (Amending WSR 13-09-010, filed 4/5/13, effective 5/6/13)

WAC 192-180-005 Registration for work—RCW 50.20.010(1) and 50.20.230. (1) Am I required to register for work? You must register for work unless you are:

- (a) Attached to an employer, meaning you are:
- (i) Partially unemployed as defined in WAC 192-180-013(1);
 - (ii) On standby as defined by WAC 192-110-015;
- (iii) Unemployed because you are on strike or locked out from the worksite as provided in RCW 50.20.090; or
- (iv) Participating in the shared work program under chapter 50.60 RCW;
- (b) A member of a union that participates in the referral union program (see WAC 192-210-110);
- (c) Participating in a training program approved by the commissioner; or
- (d) The subject of an antiharassment order. This includes any court-issued order providing for your protection, such as restraining orders, no contact orders, domestic violence protective orders, and similar documents.

(2) How soon do I have to register?

(a) If you live within the state of Washington, the department will register you automatically based on information contained in your application for benefits. In unusual circumstances where you are not automatically registered, you must register within one week of the date on which you are notified by the department of the requirement to register for work.

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- (b) If you live in another state, you must register for work within one week of the date your first payment is issued on your new or reopened claim.
- (3) Where do I register for work? You will be registered for work with ((your local WorkSource office)) the department. However, if you live in another state, you must register for work with the equivalent public employment agency in that state.
- (4) What is the penalty if I do not register for work? You will not be eligible for benefits for any week in which you are not registered for work as required by this section.

<u>AMENDATORY SECTION</u> (Amending WSR 10-11-046, filed 5/12/10, effective 6/12/10)

- WAC 192-180-010 Job search requirements—Directives—RCW 50.20.010 (1)(c) and 50.20.240. (1) Do I have to look for work? You must be actively seeking work unless you are:
- (a) Attached to an employer as defined in WAC 192-180-005(1); or
- (b) Participating in a training program approved by the commissioner.
- (2) When should I start my job search? You must look for work every week that you file a claim for benefits, unless you are exempt under subsection (1) of this section.
 - (3) What are my weekly job search requirements?
 - (a) At a minimum, you must:
- (i) Make job search contacts with at least three employers each week; or
- (ii) Participate in three approved in-person job search activities ((at)) through the WorkSource office or ((local employment center)) the equivalent public employment agency in the state in which you reside, or any combination of employer contacts or in-person job search activities for a total of three.
- (b) Based on your individual circumstances, such as your occupation, experience, or labor market area, the department may issue you a directive requiring more than three employer contacts or job search activities each week.
- (c) If you are a member of a referral union you must be registered with your union, eligible for and actively seeking dispatch, and comply with your union's dispatch or referral requirements (see WAC 192-210-120). Your benefits may be denied for any weeks in which you fail to meet these requirements and you may be directed to seek work outside of your union.
- (4) What is a "job search contact"? A job search contact is a contact with an employer to inquire about or apply for a job. You ((may)) must use job search methods that are customary for your occupation and labor market area((5)) including, but not limited to, in-person, telephone, internet, or telefax contacts. The work applied for must be suitable (see RCW 50.20.100 and 50.20.110) unless you choose to look for work in a lower skill area. A contact does not count if it is made with an employer whom you know is not hiring, or if the department decides the contact is designed in whole or in part to avoid meeting the job search requirements. Simply posting your resume online (for example, ((Monster.com)) Simplyhired.com or Craigslist) does not constitute a job

- search contact for purposes of this section; in addition to posting your resume, an application or contact with an employer for a ((specific)) job must be submitted to count as one of the required weekly job search contacts.
- (5) What is an "in-person job search activity"? This is an activity provided or monitored through the WorkSource office or ((local employment center)) the equivalent public employment agency in the state in which you reside that will assist you in your reemployment efforts. It includes, but is not limited to, job search workshops, training classes, or other facilitated services provided or monitored by WorkSource staff or other affiliated agencies and approved by the local WorkSource ((administrator)) office. For claimants residing in Washington state, an in-person job search activity must be documented in the department's ((services, knowledge and information exchange system (SKIES))) computer system to qualify. For interstate claimants, the activity must be documented ((in the one-stop system)) by the equivalent public employment agency in the state in which you reside.
- (6) What is a directive? A directive is a written notice from the department telling you that specific methods of job search are required in order to meet the job search requirements. A written directive need not have been issued to deny benefits for failure to meet the job search requirements in subsection (3) of this section, unless the directive is required under WAC 192-180-012.
- (7) When is a directive issued? The department can issue a directive to clarify or to increase the job search requirements you must meet. Examples include, but are not limited to, cases in which you need to:
 - (a) Increase the number of employer contacts each week;
- (b) Change your method of looking for work (((such as from resumes to in-person contacts)));
- (c) Expand the geographic area in which you look for work; ((or))
 - (d) Look for work in a secondary occupation; or
- (e) Accurately record your job search activities as required by WAC 192-180-015.
- (8) When is the directive effective? The directive is effective when it is given in writing by the department. It stays in effect until a new written directive is given((, or it is)); the directive is rescinded in writing; your benefit year ends; or you receive final payment on any extension of benefits related to that benefit year, whichever is later.

AMENDATORY SECTION (Amending WSR 05-13-156, filed 6/21/05, effective 7/22/05)

WAC 192-180-014 Requirements of individuals who leave work due to domestic violence or stalking—RCW 50.20.010 (1)(c). If you are allowed benefits because the department decides you left work for good cause due to domestic violence or stalking, each week you claim benefits you must demonstrate an attachment to the labor market by being able to work, available for work, and actively seeking suitable work. In general, claimants are required to make at least three job search contacts each week. You may make the number of contacts that are consistent with your need to address issues raised by domestic violence or stalking as long as you meet the requirements of RCW 50.20.010 (1)(c) by

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making at least one job search contact each week you claim benefits. You may substitute participation in an approved job search activity ((at)) through the WorkSource office or ((local employment center)) the equivalent public employment agency in the state in which you reside for the required job search contact.

AMENDATORY SECTION (Amending WSR 10-11-046, filed 5/12/10, effective 6/12/10)

WAC 192-180-015 Tracking job search activities—RCW 50.20.240. (1) Do I need to keep track of my job search activities? You must keep a record or log of your job search contacts and the in-person job search activities you receive through the WorkSource office ((or local employment center)), other affiliated agency, or equivalent public employment agency in the state in which you reside unless you are:

(a) ((A member of a full referral union;

- (b))) Allowed benefits because you left work to protect yourself or a member of your immediate family from domestic violence or stalking as provided in RCW 50.20.050 (2)(b)(iv); or
- $((\frac{(e)}{(e)}))$ (b) Exempt from $(\frac{(\text{job search requirements})}{\text{istration for work}})$ under WAC $((\frac{192-180-010(1)}{(1)}))$ 192-180-005 (1)(a) through (c).

(2) What information do I need to keep in the log?

- (a) Your job search log must contain ((at least the following information:
- (a) For in-person or telephone job search contacts, record the date contact was made; the employer's name, address and telephone number; how contact was made (in-person, telephone, etc.); the name or position of the person you contacted; and the type of work you applied for. If application was made online, by newspaper or other means in which there is no direct employer contact, include date, web address, or newspaper name or address, the job applied for, such as a job reference number, or attach a copy of the job announcement or a confirmation notice received after your application was submitted)) sufficient information to establish to the department's satisfaction that you met the job search requirements;
- (b) For in-person job search activities at the WorkSource office ((or local reemployment center)), other affiliated agency, or the equivalent public employment agency in the state in which you reside, record the date contact was made((\(\frac{1}{2}\))), and a description of the services you received or the activities in which you participated.
- (3) **Is there a specific form I must use?** The department will supply you with a ((form (EMS 10313))) job search log to use in tracking your job search activities. You may use your own form or tracking method as long as ((you record all information required by)) it meets the requirements of this section.
- (4) **How long should I keep my log?** Keep your log for at least ((sixty)) thirty days after the end of your benefit year or thirty days after receiving your final payment on any extension of benefits, whichever is later.

AMENDATORY SECTION (Amending WSR 05-01-076, filed 12/9/04, effective 1/9/05)

- WAC 192-180-020 Monitoring job search activities—RCW 50.20.240. (1) Will my job search activities be monitored? Every week that you file a claim for benefits, you must certify ((that you meet)) whether you met the job search requirements. The department may review your job search activities at any time. ((H)) Once you have been paid benefits for five or more weeks in any benefit year, you must provide the department with a copy of your job search log upon request. ((You must bring a copy of your job search log to any job search review interview (see WAC 192-180-025) for which you have been seheduled.))
- (2) Will the department verify the information on my job search log? Employer contacts and other job search activities on your log ((will)) may be verified ((whenever the department has a question about the information reported. In addition, when you are scheduled for a job search review interview, your log will be verified with the listed employers on a random basis)) by the department.

AMENDATORY SECTION (Amending WSR 10-11-046, filed 5/12/10, effective 6/12/10)

- WAC 192-180-025 Job search reviews ((interviews)).

 (1) What is a job search review (JSR) ((interview))? The JSR is ((an interview between you and a representative of the WorkSource office or local employment center. Its purpose is to)) a review of your job search activities by the department. At a minimum, the department will review your job search documentation, ((identify any barriers to your reemployment, develop a plan for resolving barriers that may be identified, and provide advice on how to improve)) your ability to work, availability for work, and your efforts to find work. The department may also promote an active search for work by directing you to resources that will assist you with your job search efforts. ((For interstate claimants, this interview may be conducted by telephone or by the local employment center in a contracted state.))
- (2) Will my job search activities be reviewed? Yes, you must ((bring)) provide your job search log to the ((interview)) department when requested. The ((interviewer)) department will review your log ((with you and discuss)), review your eligibility for benefits as required by RCW 50.20.010 (1)(c), and, when appropriate, provide feedback on areas in which your job search can be improved((. The employer contacts and job search activities included in your log will be verified at random. The interviewer may further verify any reported contacts at his or her discretion)).
- (3) **How many weeks will be reviewed?** The ((interviewer)) department will review at least one week of your job search documentation at the initial ((interview)) JSR.
- (a) If the documentation shows you met the job search requirements for that week, no further action will be taken at that time except as provided in WAC 192-180-020(2). You may be scheduled for another JSR at a later date.
- (b) If the documentation shows that you substantially complied with the job search requirements, you will not be scheduled for an all weeks JSR. However, your benefits may be denied for that week and the department will issue you a

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work search directive explaining how your job search efforts or documentation of those efforts must be modified.

- (c) If the job search documentation ((is unsatisfactory)) fails to show that you substantially complied with the job search requirements, the department will reschedule you for a second ((interview)) JSR in which ((we will review)) your ((documentation)) job search for all weeks claimed will be reviewed
- (4) What happens if I ((don't attend)) do not participate in the initial JSR ((interview))? If you fail to ((attend)) participate in the initial JSR ((interview and you have an:)), the department will determine if your failure is excused or unexcused.
- (a) <u>If you have an excused absence</u>, ((WorkSource staff)) <u>the department</u> will reschedule you for a ((review)) <u>JSR</u> of one week of your job search documentation.

You may be excused from ((attending)) participating in the initial JSR ((interview)) only for ((the following reasons)) good cause:

- (i) ((Jury duty;)) Your illness or disability or that of a member of your immediate family that prevents you from participating:
- (ii) ((National Guard duty;)) Your employment or presence at a job interview scheduled with an employer;
 - (iii) Natural disaster or similar acts of nature; or
 - (iv) ((Verifiable employment or a job interview.
 - (b) Unexeused absence, the following will apply:
- (i))) Factors specific to your situation which would prevent a reasonably prudent person in similar circumstances from participating.
- (b) If you have an unexcused absence, the department will:
- (i) Schedule you for ((an interview in which we will review)) a JSR of your job search activities for all weeks claimed; and
- (ii) ((The department will)) <u>Deny</u> your benefits for the week of the initial ((interview)) <u>JSR</u> unless you can show good cause for not ((attending)) <u>participating</u>. (See WAC 192-180-030.)
- (5) **What does "all weeks" mean?** For purposes of this section, "all weeks" means the latest of the following:
- (a) Weeks claimed since you filed your application for benefits; or
- (b) Weeks claimed since your last <u>all weeks</u> JSR ((interview, if applicable)).
- (6) ((Do I need to bring anything else to)) Will the department verify my identity at the JSR interview? Yes, you must be prepared to ((present proof of your identity during the JSR interview. Acceptable documents are:
- (a) State or government issued driver's license or identification card with photo;
 - (b) U.S. passport (expired or unexpired);
- (c) Permanent resident card or alien registration receipt card (Form I 551);
- (d) Unexpired employment authorization document, with photo:
 - (e) School identification eard with photo;
 - (f) Voter's registration card;
 - (g) U.S. military identification card or draft record;
 - (h) Military dependent's identification eard;

- (i) U.S. Coast Guard merchant mariner card; or
- (j) Native American tribal document)) provide the department with sufficient information to verify your identity.

AMENDATORY SECTION (Amending WSR 05-01-076, filed 12/9/04, effective 1/9/05)

- WAC 192-180-030 ((Penalties.)) Are there penalties if I do not comply with the job search monitoring program? (1) ((Is there a penalty if I don't look for work or fail to report for the JSR interview as directed?)) If you fail to participate in a JSR when directed, benefits will be denied under RCW 50.20.010(1) for the specific week or weeks in which you failed to participate.
- (2) Benefits will be denied ((i+)) under RCW 50.20.010 (1)(c) for the specific week or weeks in which you fail to:
 - (a) Meet the minimum job search requirements;
- (b) Provide information about your job search activities ((and, once you have been paid five weeks of benefits,)):
- (c) Provide a copy of your job search logs upon request if you have been paid five or more weeks of benefits; or
- (((e))) (d) Comply with any job search directive issued by the department((; or
 - (d) Report to a scheduled job search review interview.
- (2) How long will my benefits be denied? Benefits will be denied for the specific week or week(s) in which you fail to act as described in subsection (1).
- (3) What is the penalty if I don't attend a JSR that has been scheduled to review all weeks claimed? If you fail to appear for a review of your job search logs for all weeks claimed, fail to produce your job search logs for those weeks, or your logs fail to establish that you have met the minimum job search requirements, such failure will be treated as non-disclosure under RCW 50.20.160(3) and your benefits may be denied for any weeks at issue)).
- (e) Such failure will be considered misrepresentation for purposes of redetermination under RCW 50.20.160(3). Such misrepresentation, however, will not be treated as fraud unless all criteria in WAC 192-100-050(1) are established.
- (3) If you fail to participate in an all weeks JSR without good cause, benefits are denied under RCW 50.20.010 (1)(c) and 50.20.240. The denial is indefinite and will continue until you participate in a scheduled JSR with the department.

WSR 16-19-070 PROPOSED RULES DEPARTMENT OF FINANCIAL INSTITUTIONS

(Consumer Services Division) [Filed September 20, 2016, 9:07 a.m.]

Original Notice.

Preproposal statement of inquiry was filed as WSR 16-06-071.

Title of Rule and Other Identifying Information: Amending the rules (chapter 208-620 WAC) under the Consumer Loan Act (chapter 31.04 RCW) concerning requirements for

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residential mortgage loan servicers such as bonding, liquidity and tangible net worth.

Hearing Location(s): Department of Financial Institutions, 150 Israel Road S.W., Olympia, WA 98501, (360) 902-8700, on November 22, 2016, at 10 a.m. - 12 [p.m.]

Date of Intended Adoption: December 20, 2016.

Submit Written Comments to: Sara Rietcheck, 150 Israel Road S.W., P.O. Box 41200, Olympia, WA 98504-1200, e-mail sara.rietcheck@dfi.wa.gov, fax (360) 586-5068, by November 15, 2016.

Assistance for Persons with Disabilities: Contact Sara Rietcheck by November 15, 2016, TTY (360) 664-8126 or (360) 902-8786.

Purpose of the Proposal and Its Anticipated Effects, Including Any Changes in Existing Rules: The rules must be amended to implement changes to the state law. The rules will provide additional detail to industry to help them comply with the law.

Reasons Supporting Proposal: Specific information provided in the rules is necessary to guide the regulated industries in complying with the laws.

The rules are being amended under the authority of OFM Guideline 3.a. dated October 12, 2011.

Statutory Authority for Adoption: Chapter 43.320 RCW, RCW 31.04.165.

Statute Being Implemented: Chapter 31.04 RCW.

Rule is not necessitated by federal law, federal or state court decision.

Name of Proponent: Department of financial institutions, consumer services, governmental.

Name of Agency Personnel Responsible for Drafting: Cindy Fazio, 150 Israel Road S.W., Olympia, WA 98501, (360) 902-8800; Implementation and Enforcement: Charles Clark, 150 Israel Road S.W., Olympia, WA 98501, (360) 902-0511.

No small business economic impact statement has been prepared under chapter 19.85 RCW. The rule amendments will not impose more than minor costs on the businesses impacted by the proposed rules.

A cost-benefit analysis is not required under RCW 34.05.328. Not applicable to the proposed rules.

September 19, 2016 Charles Clark, Director Division of Consumer Services

AMENDATORY SECTION (Amending WSR 13-24-024, filed 11/22/13, effective 1/1/14)

WAC 208-620-320 What is the amount of the <u>surety</u> bond required for my consumer loan license? (1) <u>Surety</u> bond amounts are based on loan origination volume from prior years. If there is no prior year volume, the surety bond amount required at application is thirty thousand dollars. For purposes of this section, "loan origination volume" means a volume of closed loans.

(2) Nonresidential loan origination. If you originate non-residential loans the <u>surety</u> bond amount is based on the annual dollar amount of loans you originate. See the following chart:

1. Zero to twenty million in loans originated: \$30,000

2. Twenty million to forty million: \$50,000

3. Forty million to fifty million: \$100,0004. Fifty million and above: \$150,000

 $((\frac{2}{2}))$ (3) Residential mortgage loan origination.

(a) <u>Origination</u>. If you <u>only</u> originate residential mortgage loans, the <u>surety</u> bond amount is based on the annual dollar amount of residential mortgage loans you originate. Use the chart in subsection (((1))) (2) of this section for the bond amount.

(b) <u>Servicing.</u> If you only service residential mortgage loans, ((your bond amount at application is thirty thousand dollars. Thereafter and subject to annual adjustment, your bond amount is based on the annual dollar amount of the residential mortgage loans serviced pursuant to the following schedule (see RCW 31.04.045(6)):

1. Zero to fifty million in loan principal: \$30,000

Fifty million and above: \$50,000))

a bond requirement may only arise if you elect a surety bond in lieu of the required net worth in WAC 208-620-322.

- (c) <u>Origination and servicing</u>. If you originate and service residential mortgage loans, your <u>surety</u> bond amount will be based on your origination ((activity)) volumes. <u>See the table in subsection (2) of this section</u>.
- (d) <u>Brokering.</u> If you <u>only</u> broker residential mortgage loans, your <u>surety</u> bond amount <u>at application is thirty thousand dollars. There after subject to annual adjustment the <u>surety bond amount</u> will be based on the <u>total annual principal amount</u> of the loans brokered. <u>See the table in subsection</u> (2) of this section.</u>
- (((3))) (4) Combined nonresidential and residential loan origination. If you originate both nonresidential and residential loans, your bond amount will be based on the combined origination volume.
- (5) Third-party loan modification services. If you only offer third-party residential mortgage loan modification services, your bond amount is thirty thousand dollars.

NEW SECTION

WAC 208-620-321 What are the capital requirements for a nondepository residential mortgage loan servicer applicant and licensee servicing loans guaranteed by one or more government sponsored entity (GSE) and/or government corporation? (1)(a) An applicant or licensee operating as an approved servicer by one or more government sponsored or government corporation entities must maintain liquidity (to include operating reserves) and tangible net worth that meet the standards set by the entity. If approved by more than one entity, the applicant or licensee must meet the highest standard of the entities for which they are approved. Tangible net worth does not include money held in borrower escrow accounts.

Examples of government sponsored entities are Freddie Mac, Fannie Mae, the Federal Home Loan Bank System, and

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the Federal Agricultural Mortgage Corporation. Ginnie Mae is an example of a government corporation.

(b) Applicants or licensees with a combined portfolio will be subject to the standards in (a) of this subsection.

For example, if your portfolio contains loans from one or more GSE or government corporations and loans not insured by any GSE or government corporation, your capital requirements must meet the highest standard of the GSE or government corporations.

- (c) An applicant or licensee with a portfolio of loans not subject to any government sponsored or government corporation entity must comply with WAC 208-620-322.
- (2) The standards described in subsection (1)(a) of this section are set by the GSE and/or government corporation financial eligibility requirements for servicing residential mortgage loans.

NEW SECTION

WAC 208-620-322 What are the capital requirements for a nondepository residential mortgage loan servicer applicant and licensee servicing loans not guaranteed by a government sponsored entity (GSE) and/or government corporation? (1)(a) An applicant or licensee servicing residential mortgage loans not including any GSE or government corporation loans must maintain a minimum tangible net worth as follows:

0-199 loans	\$100,000
200-299 loans	\$200,000
300-399 loans	\$300,000
400-499 loans	\$400,000
500-599 loans	\$500,000
600-699 loans	\$600,000
700-799 loans	\$700,000
800-899 loans	\$800,000
900-999 loans	\$900,000
1,000 plus loans	\$1,000,000

- (b) Alternatively the applicant or licensee may maintain a one million dollar surety bond in lieu of tangible net worth.
- (c) In addition, the applicant or licensee must maintain liquidity (to include operating reserves) of .00035 times the unpaid principal balance of the portfolio.
- (2) An applicant or licensee with twenty-five or fewer loans may apply to the director to waive or adjust one or more of these capital requirements. In considering such a request the director will consider whether the licensee has a positive net worth and adequate operating reserves. For purposes of this section, "operating reserves" are funds set aside in anticipation of future payments or obligations and are included in liquidity.
- (3) Licensees must annually or more frequently report, as prescribed by the director, on liquidity (including operating reserves) and tangible net worth.
- (4) Any licensee that does not maintain the standards in this section is subject to action by the director including that authority in RCW 31.04.165(4).

- (5) The following definitions apply to this section:
- (a) Tangible net worth means total equity minus receivables due from affiliated entities, minus goodwill and other intangible assets, and minus the carrying value of pledged assets net of the associated liabilities of the pledged assets.
- (b) Liquidity means unrestricted cash and cash equivalents, investment grade securities that are available for sale or held for trade, and unused/available portion of committed servicing advance lines.

REPEALER

The following section of the Washington Administrative Code is repealed:

WAC 208-620-325 What will my bond amount be in the first year of licensing?

WSR 16-19-071 PROPOSED RULES DEPARTMENT OF LABOR AND INDUSTRIES

[Filed September 20, 2016, 9:12 a.m.]

Original Notice.

Preproposal statement of inquiry was filed as WSR 16-13-122.

Title of Rule and Other Identifying Information: Chapter 296-17 WAC, General reporting rules, audit and recordkeeping, rates and rating system for Washington workers' compensation insurance and chapter 296-17B WAC, Retrospective rating for workers' compensation insurance.

Hearing Location(s): Marshal Community Center, Oak Room, 1009 East McLoughlin Boulevard, Vancouver, WA 98663, on October 26, 2016, at 9:00 a.m.; at the Department of Labor and Industries, Tukwila Service Location, Room C30, 12806 Gateway Drive South, Tukwila, WA 98168, on October 27, 2016, at 9:00 a.m.; at Everett Community College, Corporate and Continuing Education Center, 2333 Seaway Boulevard, Everett, WA 98203, on November 1, 2016, at 9:00 a.m.; at the Spokane CenterPlace, 2426 North Discovery Place, Spokane Valley, WA 99216, on November 2, 2016, at 9:00 a.m.; at the Richland Community Center, Activity Room, 500 Amon Park Drive, Richland, WA 99352, on November 3, 2016, at 9:00 a.m.; and at the Department of Labor and Industries, Auditorium, 7273 Linderson Way S.W., Tumwater, WA 98501, on November 4, 2016, at 9:00 a.m.

Date of Intended Adoption: November 29, 2016.

Submit Written Comments to: Jo Anne Attwood, P.O. Box 41448, Olympia, WA 98504-4148, e-mail joanne. attwood@lni.wa.gov, fax (360) 902-4988, by 5 p.m. on November 8, 2016.

Assistance for Persons with Disabilities: Contact office of information and assistance by October 15, 2016, TTY (360) 902-5797.

Purpose of the Proposal and Its Anticipated Effects, Including Any Changes in Existing Rules: This rule proposal will amend the tables of classification base premium rates,

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experience rating plan parameters, experience modification factor calculation limitations, and retrospective rating plan size groupings for the workers' compensation insurance program for calendar year 2017. Classification base rates were amended for updated loss and payroll experience. The department proposes a 0.7 percent overall average premium rate increase.

The rule also repeals WAC 296-17-86507 2007 Claim-free experience modification phase-in limitation, which is now obsolete.

As part of rebuilding the contingency reserves, this rule making is also notice that the director intends to transfer the amount of the accident and medical-aid funds combined that exceed ten percent of funded liabilities as required by RCW 51.44.023.

Amending WAC 296-17-855 Experience modification, 296-17-875 Table I, 296-17-880 Table II, 296-17-885 Table III, 296-17-890 Table IV, 296-17-895 Industrial insurance accident fund base rates, stay at work and medical aid base rates by class of industry, 296-17-89502 Industrial insurance accident fund, stay at work, medical aid and supplemental pension rates by class of industry for nonhourly rated classifications, 296-17-89507 Horse racing rates, 296-17-920 Assessment for supplemental pension fund, 296-17B-540 Determining loss incurred for each claim and 296-17B-900 Retrospective rating plans standard premium size ranges; and repealing WAC 296-17-86507 2007 Claim-free experience modification phase-in limitation.

Reasons Supporting Proposal: The department's decision to increase overall rates is intended to ensure adequate premiums to cover expected losses for 2017 claims and to continue rebuilding the trust funds' contingency reserves to adequate levels. Washington law provides that rates should be adjusted annually to reflect the hazards of each industry and in accordance with recognized workers' compensation insurance principles.

Statutory Authority for Adoption: RCW 51.16.035 (base rates), 51.32.073 (supplemental pension), 51.18.010 (retrospective rating), and 51.04.020(1) (general authority).

Statute Being Implemented: RCW 51.16.035, 51.32.073, and 51.18.010.

Rule is not necessitated by federal law, federal or state court decision.

Name of Proponent: Department of labor and industries, governmental.

Name of Agency Personnel Responsible for Drafting: Jo Anne Attwood, Tumwater, Washington, (360) 902-4777; Implementation: Chris Bowe, Tumwater, Washington, (360) 902-4826; and Enforcement: Victoria Kennedy, Tumwater, Washington, (360) 902-4997.

No small business economic impact statement has been prepared under chapter 19.85 RCW. No small business economic impact statement is required as the proposed rules are adjusting rates pursuant to legislative standards.

A cost-benefit analysis is not required under RCW 34.05.328. The proposed rules are adjusting rates pursuant to legislative standards.

September 20, 2016 Joel Sacks Director AMENDATORY SECTION (Amending WSR 15-24-103, filed 12/1/15, effective 1/1/16)

WAC 296-17-855 Experience modification. The basis of the experience modification shall be a comparison of the actual losses charged to an employer during the experience period with the expected losses for an average employer reporting the same exposures in each classification. The comparison shall contain actuarial refinements designed to weigh the extent to which the actual experience is credible, due consideration being given to the volume of the employer's experience. Except for those employers who qualify for an adjusted experience modification as specified in WAC 296-17-860 or 296-17-865, the experience modification factor shall be calculated from the formula:

EXPERIENCE MODIFICATION FACTOR	=	(Credible Actual Primary Loss + Credible Actual Excess Loss)/Expected Loss
Where		
Credible Actual Primary Loss	=	Actual Primary Loss x Primary Credibility
	+	Expected Primary Loss x (100% - Primary Credibility)
Credible Actual Excess Loss	=	Actual Excess Loss x Excess Credibility
	+	Expected Excess Loss x (100% - Excess Credibility)

The meaning and function of each term in the formula is specified below.

For each claim, the actual primary loss is the first dollar portion of the claim costs, which has been shown in actuarial studies, to have the greater credibility in predicting future experience. These amounts are summed over all claims. For each claim in excess of \$20,112 the actual primary loss shall be determined from the formula:

ACTUAL PRI-
MARY LOSS =
$$\frac{50,280}{\text{(Total loss} + 30,168)} \text{ x total loss}$$

For each claim, less than \$20,112 the full value of the claim shall be considered a primary loss.

For each claim, the excess actual loss is the remaining portion of the claim costs, which have been shown in actuarial studies to have less credibility in predicting future experience. The excess actual loss for each claim shall be determined by subtracting the primary loss from the total loss. These amounts are summed over all claims.

For any claim without disability benefits (time loss, partial permanent disability, total permanent disability or death) either actually paid or estimated to be paid, the total actual losses for calculating the primary loss and excess loss shall first be reduced by the lesser of \$((2,760)) 2.820 or the total cost of the claim. Here are some examples for these claims:

Total Loss	Type of Claim	(after deduction)	Primary Loss	Excess Loss
300	Medical Only	0	0	0

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Total Loss	Type of Claim	Total Loss (after deduction)	Primary Loss	Excess Loss	TOTAL LOSS AFTER DEDUCTION	PRIMARY LOSS
3,000	Medical Only	((240))	((240))	0	29,834	25,000
	Ž	180	180		44,627	30,000
3,000	Time Loss	3,000	3,000	0	69,102	35,000
30,000	Medical Only	((27,240)) 27,180	((23,858)) 23,830	((3,382)) 3,350	100,000	38,627
30,000	Time Loss	30,000	25,070	4,930	117,385	40,000
130,000	PPD	130,000	40,810	89,190	200,000	43,690
500,000	TPD Pension	((283,507)) 275,499	((4 5,444)) 45,318	((238,063)) 230,181	((283,507 **	45,444))
2,000,000	TPD Pension	((283,507)) <u>275,499</u>	((45,444)) 45,318	$\frac{((238,063))}{230,181}$	275,499 ** ** Maximum claim value	45,318

Note: The deduction, \$((2,760)) 2.820, is twice the average case incurred cost of these types of claims occurring during the three-year period used for experience rating. On average this results in reducing the average actual loss about seventy percent for these types of claims adjusted. This is done to help make the transition between the two different experience rating methods better by helping make the change in experience factor reasonable for small changes to the actual losses. ((The \$2,000,000 loss is limited by the Maximum Claim Value before the reduction of \$2,760 is applied.))

For each employer, the primary credibility and the excess credibility determines the percentage weight given to the corresponding actual primary losses and the actual excess losses, included in the calculation of the experience modification, based on the volume of expected losses. Primary credibility and excess credibility values are set forth in Table II.

An employer's expected losses shall be determined by summing the expected loss for each of the three years of the experience period, which are calculated by multiplying the reported exposure in each classification during the year by the corresponding classification expected loss rate and rounding the result to the nearest cent. Classification expected loss rates by year are set forth in Table III.

Expected losses in each classification shall be multiplied by the classification "Primary-Ratio" to obtain "expected primary losses" which shall be rounded to the nearest cent. Expected excess losses shall then be calculated by subtracting expected primary losses from expected total losses rounded to the nearest cent. Primary-Ratios are also set forth in Table III.

AMENDATORY SECTION (Amending WSR 15-24-103, filed 12/1/15, effective 1/1/16)

WAC 296-17-875 Table I.

Primary Losses for Selected Claim Values Effective January 1, ((2016)) 2017

TOTAL LOSS AFTER	
DEDUCTION	PRIMARY LOSS
5,000	5,000
10,000	10,000
15,000	15,000
20,112	20,112

AMENDATORY SECTION (Amending WSR 15-24-103, filed 12/1/15, effective 1/1/16)

WAC 296-17-880 Table II.

PRIMARY AND EXCESS CREDIBILITY VALUES Effective January 1, ((2016)) 2017

Maximum Claim Value = \$((283,507)) 275,499Average Death Value = \$((283,507)) 275,499

	_			
			Primary	Excess
Expected Losses		Credibility	Credibility	
((1	-	7,379	12%	7%
7,380	-	7,877	13%	7%
7,878	-	8,381	14%	7%
8,382	-	8,890	15%	7%
8,891	-	9,405	16%	7%
9,406	-	9,927	17%	7%
9,928	-	10,456	18%	7%
10,457	-	10,991	19%	7%
10,992	_	11,533	20%	7%
11,534	-	12,083	21%	7%
12,084	-	12,641	22%	7%
12,642	-	13,207	23%	7%
13,208	-	13,781	24%	7%
13,782	-	14,365	25%	7%
14,366	-	14,959	26%	7%
14,960	-	15,559	27%	7%
15,560	-	16,173	28%	7%
16,174	-	16,795	29%	7%
16,796	-	17,430	30%	7%
17,431	-	18,079	31%	7%
18,080	_	18,736	32%	7%
18,737	-	19,410	33%	7%
19,411	-	20,097	34%	7%
20,098	-	20,800	35%	7%

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Expec	ted l	Losses	Primary Credibility	Excess Credibility	Expec	ted L	osses	Primary Credibility	Excess Credibility
20,801	_	21,520	36%	7%	422,022	_	430,748	65%	20%
21,521	_	22,256	37%	7%	430,749	_	455,053	66%	20%
22,257	_	23,015	38%	7%	455,054	_	471,351	66%	21%
23,016	_	23,789	39%	7%	471,352	_	488,295	67%	21%
23,790	_	24,590	40%	7%	488,296	_	511,953	67%	22%
24,591	_	25,413	41%	7%	511,954	_	521,752	68%	22%
25,414	_	26,264	42%	7%	521,753	_	552,553	68%	23%
26,265	_	27,144	43%	7%	552,554	_	555,421	69%	23%
27,145	_	28,057	44%	7%	555,422	_	589,308	69%	24%
28,058	_	29,007	4 5%	7%	589,309	_	593,155	69%	25%
29,008	_	29,999	46%	7%	593,156	_	623,413	70%	25%
30,000	_	31,037	47%	7%	623,414	_	633,760	70%	26%
31,038	_	32,135	48%	7%	633,761	_	657,740	71%	26%
32,136	_	33,298	49%	7%	657,741	_	674,363	71%	27%
33,299	_	34,538	50%	7%	674,364	_	692,291	72%	27%
34,539	_	35,877	51%	7%	692,292	-	714,964	72%	28%
35,878	_	37,344	52%	7%	714,965	_	727,064	73%	28%
37,345	_	38,979	53%	7%	727,065	_	755,567	73%	29%
38,980	_	39,145	54%	7%	755,568	-	762,065	74%	29%
39,146	_	40,863	54%	8%	762,066	_	796,169	74%	30%
40,864	_	43,165	55%	8%	796,170	-	797,299	75%	30%
43,166	-	65,327	56%	8%	797,300	-	832,762	75%	31%
65,328	-	72,003	57%	8%	832,763	-	836,772	75%	32%
72,004	-	102,846	57%	9%	836,773	-	868,461	76%	32%
102,847	-	105,929	57%	10%	868,462	-	877,374	76%	33%
105,930	-	133,879	58%	10%	877,375	-	904,394	77%	33%
133,880	-	146,530	58%	11%	904,395	-	917,977	77%	34%
146,531	-	165,106	59%	11%	917,978	-	940,569	78%	34%
165,107	-	187,134	59%	12%	940,570	-	958,579	78%	35%
187,135	-	196,520	60%	12%	958,580	-	976,983	79%	35%
196,521	-	227,737	60%	13%	976,984	_	999,181	79%	36%
227,738	-	228,135	61%	13%	999,182	-	1,013,641	80%	36%
228,136	_	259,946	61%	14%	1,013,642	-	1,039,782	80%	37%
259,947	-	268,338	61%	15%	1,039,783	-	1,050,545	81%	37%
268,339	-	291,956	62%	15%	1,050,546	_	1,080,386	81%	38%
291,957	-	308,941	62%	16%	1,080,387	_	1,087,698	82%	38%
308,942	-	324,165	63%	16%	1,087,699	-	1,120,989	82%	39%
324,166	-	349,544	63%	17%	1,120,990	-	1,125,104	83%	39%
349,545	-	356,578	64%	17%	1,125,105	-	1,161,591	83%	40%
356,579	-	389,195	64%	18%	1,161,592	-	1,162,762	84%	40%
389,196	-	390,144	64%	19%	1,162,763	-	1,200,675	84%	41%
390,145	-	422,021	65%	19%	1,200,676	-	1,202,190	84%	42%

[55] Proposed

Expected Losses		Primary Credibility	Excess Credibility	Expec	ted	Losses	Primary Credibility	Excess Credibility
1,202,191 -	1,238,847	85%	42%	2,331,787	_	2,378,092	100%	69%
1,238,848 -	1,242,795	85%	43%	2,378,093	_	2,424,747	100%	70%
1,242,796 -	1,277,284	86%	43%	2,424,748	_	2,471,757	100%	71%
1,277,285 -	1,283,399	86%	44%	2,471,758	_	2,519,125	100%	72%
1,283,400 -	1,315,982	87%	44%	2,519,126	_	2,566,853	100%	73%
1,315,983 -	1,324,000	87%	45%	2,566,854	_	2,614,948	100%	74%
1,324,001 -	1,354,949	88%	45%	2,614,949	_	2,663,410	100%	75%
1,354,950 -	1,364,603	88%	46%	2,663,411	_	2,712,251	100%	76%
1,364,604 -	1,394,184	89%	46%	2,712,252	_	2,761,467	100%	77%
1,394,185 -	1,405,204	89%	47%	2,761,468	_	2,811,069	100%	78%
1,405,205 -	1,433,695	90%	47%	2,811,070	_	2,861,058	100%	79%
1,433,696 -	1,445,808	90%	48%	2,861,059	_	2,911,440	100%	80%
1,445,809 -	1,473,478	91%	48%	2,911,441	_	2,962,220	100%	81%
1,473,479 -	1,486,409	91%	49%	2,962,221	_	3,013,399	100%	82%
1,486,410 -	1,513,540	92%	49%	3,013,400	_	3,064,986	100%	83%
1,513,541 -	1,527,013	92%	50%	3,064,987	_	3,116,982	100%	84%
1,527,014 -	1,553,885	93%	50%	3,116,983	_	3,110,302 3,169,398	100%	85%
1,553,886 -	1,567,614	93%	51%	3,169,399	an	nd higher	10070	86%))
1,567,615 -	1,594,514	94%	51%	1	_	6,899	<u>12%</u>	<u>7%</u>
1,594,515 -	1,608,216	94%	52%	<u>6,900</u>	=	7,365	13%	7%
1,608,217 -	1,635,430	95%	52%	7,366	=	7,836	14%	7%
1,635,431 -	1,648,818	95%	53%	7,837	_	8,312	15%	7%
1,648,819 -	1,676,635	96%	53%	8,313	=	8,794	16%	7%
1,676,636 -	1,689,421	96%	54%	8,79 <u>5</u>	=	9,282	17%	7%
1,689,422 -	1,718,135	97%	54%	9,283	=	9,776	18%	7%
1,718,136 -	1,730,023	97%	55%	9,777	_	10,277	19%	7%
1,730,024 -	1,759,929	98%	55%	10,278	=	10,783	20%	7%
1.759.930 -	1,770,626	98%	56%	10,784	-	11,298	21%	7%
1,770,627 -	1,802,026	99%	56%	11,299	-	11,819	22%	7%
1,802,027 -	1,811,227	99%	57%	11,820		12,348	23%	7%
1,811,228 -	1,844,425	100%	57%	12,349			<u>24%</u>	7%
1,844,426 -	1,887,131	100%	58%	12,886		13,431	25%	7 %
1,887,132 -	1,930,145	100%	59%	13,432		13,987	26%	7 %
1,930,146 -	1,973,473	100%	60%	13,988	_	14,548	27%	7 %
1,973,474 -	2,017,117	100%	61%	14,549	_		28%	7 %
2,017,118 -	2,061,081	100%	62%	15,123			29%	7 %
2,061,082 -	2,105,369	100%	63%				30%	7 %
2,105,370 -	2,149,983	100%	64%	16,298		16,904	31%	7 %
2,149,984 -	2,194,928	100%	65%	16,905	=	4==40	32%	7%
2,194,929 -	2,240,208	100%	66%	15.510		10.140	33%	7 %
2,240,209 -	2,285,826	100%	67%				34%	7%
2,285,827 -	2,331,786	100%	68%	18,792			35%	7%
, ,= :	, , ,				_			<u> </u>

Proposed [56]

Expect	ted I	Losses	Primary Credibility	Excess Credibility	Expec	ted L	osses	Primary Credibility	Excess Credibility
19,449	=	20,121	<u>36%</u>	<u>7%</u>	<u>394,591</u>	=	402,749	<u>65%</u>	<u>20%</u>
20,122	=	20,809	<u>37%</u>	<u>7%</u>	402,750	Ξ	425,474	<u>66%</u>	<u>20%</u>
20,810	=	21,519	<u>38%</u>	<u>7%</u>	425,475	=	440,713	<u>66%</u>	<u>21%</u>
21,520	=	22,243	<u>39%</u>	<u>7%</u>	440,714	Ξ	456,556	<u>67%</u>	<u>21%</u>
22,244	=	22,992	<u>40%</u>	<u>7%</u>	456,557	=	478,676	<u>67%</u>	<u>22%</u>
22,993	=	23,761	<u>41%</u>	<u>7%</u>	478,677	Ξ	487,838	<u>68%</u>	<u>22%</u>
23,762	=	24,557	<u>42%</u>	<u>7%</u>	487,839	Ξ	516,637	<u>68%</u>	<u>23%</u>
24,558	=	<u>25,380</u>	<u>43%</u>	<u>7%</u>	<u>516,638</u>	=	<u>519,319</u>	<u>69%</u>	<u>23%</u>
25,381	=	<u>26,233</u>	<u>44%</u>	<u>7%</u>	<u>519,320</u>	=	<u>551,003</u>	<u>69%</u>	<u>24%</u>
26,234	=	<u>27,121</u>	<u>45%</u>	<u>7%</u>	<u>551,004</u>	=	<u>554,600</u>	<u>69%</u>	<u>25%</u>
27,122	=	28,049	<u>46%</u>	<u>7%</u>	<u>554,601</u>	=	<u>582,891</u>	<u>70%</u>	<u>25%</u>
28,050	=	<u>29,020</u>	<u>47%</u>	<u>7%</u>	<u>582,892</u>	=	<u>592,566</u>	<u>70%</u>	<u>26%</u>
29,021	=	<u>30,046</u>	<u>48%</u>	<u>7%</u>	<u>592,567</u>	=	<u>614,987</u>	<u>71%</u>	<u>26%</u>
30,047	=	31,134	<u>49%</u>	<u>7%</u>	<u>614,988</u>	=	630,529	<u>71%</u>	<u>27%</u>
<u>31,135</u>	Ξ	<u>32,293</u>	<u>50%</u>	<u>7%</u>	630,530	Ξ	647,292	<u>72%</u>	<u>27%</u>
<u>32,294</u>	=	<u>33,545</u>	<u>51%</u>	<u>7%</u>	647,293	=	<u>668,491</u>	<u>72%</u>	<u>28%</u>
<u>33,546</u>	=	<u>34,917</u>	<u>52%</u>	<u>7%</u>	668,492	Ξ	<u>679,805</u>	<u>73%</u>	<u>28%</u>
<u>34,918</u>	=	<u>36,445</u>	<u>53%</u>	<u>7%</u>	<u>679,806</u>	Ξ	<u>706,455</u>	<u>73%</u>	<u>29%</u>
<u>36,446</u>	=	<u>36,601</u>	<u>54%</u>	<u>7%</u>	<u>706,456</u>	Ξ	<u>712,531</u>	<u>74%</u>	<u>29%</u>
<u>36,602</u>	=	<u>38,207</u>	<u>54%</u>	<u>8%</u>	<u>712,532</u>	Ξ	<u>744,418</u>	<u>74%</u>	<u>30%</u>
<u>38,208</u>	=	40,359	<u>55%</u>	<u>8%</u>	<u>744,419</u>	Ξ	<u>745,475</u>	<u>75%</u>	<u>30%</u>
40,360	=	61,081	<u>56%</u>	<u>8%</u>	<u>745,476</u>	=	<u>778,632</u>	<u>75%</u>	<u>31%</u>
61,082	=	67,323	<u>57%</u>	8%	778,633	=	<u>782,382</u>	<u>75%</u>	<u>32%</u>
<u>67,324</u>	=	<u>96,161</u>	<u>57%</u>	<u>9%</u>	<u>782,383</u>	Ξ	<u>812,011</u>	<u>76%</u>	<u>32%</u>
<u>96,162</u>	=	99,044	<u>57%</u>	<u>10%</u>	<u>812,012</u>	Ξ	820,345	<u>76%</u>	<u>33%</u>
99,045	Ξ	125,177	<u>58%</u>	<u>10%</u>	<u>820,346</u>	Ξ	845,608	<u>77%</u>	<u>33%</u>
125,178	=	137,005	<u>58%</u>	<u>11%</u>	<u>845,609</u>	=	<u>858,308</u>	<u>77%</u>	<u>34%</u>
137,006	=	154,374	<u>59%</u>	<u>11%</u>	<u>858,309</u>	=	879,432	<u>78%</u>	<u>34%</u>
<u>154,375</u>	=	<u>174,970</u>	<u>59%</u>	<u>12%</u>	<u>879,433</u>	=	<u>896,271</u>	<u>78%</u>	<u>35%</u>
<u>174,971</u>	=	183,746	<u>60%</u>	<u>12%</u>	<u>896,272</u>	=	913,479	<u>79%</u>	<u>35%</u>
183,747	=	212,934	<u>60%</u>	<u>13%</u>	<u>913,480</u>	=	934,234	<u>79%</u>	<u>36%</u>
<u>212,935</u>	=	213,306	<u>61%</u>	<u>13%</u>	<u>934,235</u>	=	<u>947,754</u>	<u>80%</u>	<u>36%</u>
213,307	=	243,049	<u>61%</u>	<u>14%</u>	947,755	=	<u>972,196</u>	<u>80%</u>	<u>37%</u>
243,050	=	250,896	<u>61%</u>	<u>15%</u>	972,197	=	<u>982,260</u>	<u>81%</u>	<u>37%</u>
250,897	=	<u>272,979</u>	<u>62%</u>	<u>15%</u>	<u>982,261</u>	=	1,010,161	<u>81%</u>	<u>38%</u>
<u>272,980</u>	=	<u>288,860</u>	<u>62%</u>	<u>16%</u>	<u>1,010,162</u>	Ξ	1,016,998	<u>82%</u>	<u>38%</u>
<u>288,861</u>	=	303,094	<u>63%</u>	<u>16%</u>	<u>1,016,999</u>	=	1,048,125	<u>82%</u>	<u>39%</u>
303,095	=	326,824	<u>63%</u>	<u>17%</u>	<u>1,048,126</u>	=	1,051,972	<u>83%</u>	<u>39%</u>
<u>326,825</u>	=	333,400	<u>64%</u>	<u>17%</u>	<u>1,051,973</u>	Ξ	1,086,088	<u>83%</u>	<u>40%</u>
333,401	=	363,897	<u>64%</u>	<u>18%</u>	1,086,089	=	<u>1,087,182</u>	<u>84%</u>	<u>40%</u>
363,898	=	<u>364,785</u>	<u>64%</u>	<u>19%</u>	<u>1,087,183</u>	=	1,122,631	<u>84%</u>	<u>41%</u>
<u>364,786</u>	Ξ	<u>394,590</u>	<u>65%</u>	<u>19%</u>	1,122,632	=	1,124,048	84%	<u>42%</u>

[57] Proposed

Expected Losses	Primary Credibility	Excess Credibility	Ехрес	eted Losses	(Primary Credibility	Excess Credibility
<u>1,124,049</u> <u>- 1,158,322</u>	<u>85%</u>	<u>42%</u>	2,180,221		3,516	<u>100%</u>	<u>69%</u>
1,158,323 - 1,162,013	<u>85%</u>	43%	2,223,517		7,138	100%	70%
1,162,014 - 1,194,260	86%	43%	2,267,139		1,093	100%	71%
<u>1,194,261</u> - <u>1,199,978</u>	86%	44%	2,311,094		5,382	100%	72%
1,199,979 - 1,230,443	87%	44%	2,355,383		0,007	100%	73%
1,230,444 - 1,237,940	87%	45%	2,400,008		1,976	100%	74%
1,237,941 - 1,266,877	88%	45%	2,444,977),288	100%	75%
1,266,878 - 1,275,904	88%	46%	2,490,289		5,955	100%	76%
<u>1,275,905</u> - <u>1,303,562</u>	<u>89%</u>	<u>46%</u>	2,535,956		1,972	100%	<u>77%</u>
<u>1,303,563</u> - <u>1,313,866</u>	<u>89%</u>	<u>47%</u>	2,581,973	<u>- 2,628</u>	3,349	100%	<u>78%</u>
<u>1,313,867</u> - <u>1,340,505</u>	<u>90%</u>	<u>47%</u>	2,628,350	<u>- 2,675</u>	5,089	<u>100%</u>	<u>79%</u>
<u>1,340,506</u> - <u>1,351,830</u>	<u>90%</u>	<u>48%</u>	2,675,090	<u>- 2,722</u>	2,196	100%	80%
<u>1,351,831</u> - <u>1,377,702</u>	<u>91%</u>	<u>48%</u>	2,722,197	<u>- 2,769</u>	9,676	100%	<u>81%</u>
<u>1,377,703</u> <u>- 1,389,792</u>	<u>91%</u>	<u>49%</u>	2,769,677	<u>-</u> 2,81′	7,528	<u>100%</u>	<u>82%</u>
<u>1,389,793</u> <u>- 1,415,160</u>	<u>92%</u>	<u>49%</u>	2,817,529	<u>-</u> 2,865	5,762	<u>100%</u>	<u>83%</u>
<u>1,415,161</u> <u>- 1,427,757</u>	<u>92%</u>	<u>50%</u>	2,865,763	<u>- 2,91</u>	1 <u>,378</u>	<u>100%</u>	<u>84%</u>
<u>1,427,758</u> <u>-</u> <u>1,452,882</u>	<u>93%</u>	<u>50%</u>	2,914,379	<u>- 2,963</u>	3,387	<u>100%</u>	<u>85%</u>
<u>1,452,883</u> <u>- 1,465,719</u>	<u>93%</u>	<u>51%</u>	2,963,388	and higher			<u>86%</u>
<u>1,465,720</u> <u>-</u> <u>1,490,871</u>	<u>94%</u>	<u>51%</u>					
<u>1,490,872</u> <u>- 1,503,682</u>	<u>94%</u>	<u>52%</u>	AMENDATO	ORY SECT	ON (An	nending WS	R 15-24-103,
<u>1,503,683</u> <u>-</u> <u>1,529,127</u>	<u>95%</u>	<u>52%</u>	filed 12/1/15,	effective I/	1/16)		
<u>1,529,128</u> <u>-</u> <u>1,541,645</u>	<u>95%</u>	<u>53%</u>	WAC 29	06-17-885 T	able III.		
<u>1,541,646</u> - <u>1,567,654</u>	<u>96%</u>	<u>53%</u>	Expo	ected Loss F	Rates and	l Primary R	atios
<u>1,567,655</u> - <u>1,579,609</u>	<u>96%</u>	<u>54%</u>	by	Risk Classi	fication a	and Fiscal Y	ear
<u>1,579,610</u> - <u>1,606,456</u>	<u>97%</u>	<u>54%</u>	-	l Loss Rates			
<u>1,606,457</u> - <u>1,617,571</u>	<u>97%</u>	<u>55%</u>	F	Effective Jai	nuary 1,	((2016)) <u>201</u>	<u>7</u>
<u>1,617,572</u> <u>- 1,645,534</u>	<u>98%</u>	<u>55%</u>					Primary
<u>1,645,535</u> - <u>1,655,535</u>	<u>98%</u>	<u>56%</u>	((Class	2012	2013	2014	Ratio
<u>1,655,536</u> - <u>1,684,894</u>	<u>99%</u>	<u>56%</u>	0101	1.2076	1.0574		0.402
<u>1,684,895</u> <u>- 1,693,497</u>	<u>99%</u>	<u>57%</u>	0103	1.5737	1.3849		0.416
<u>1,693,498</u> <u>-</u> <u>1,724,537</u>	<u>100%</u>	<u>57%</u>	0104	1.0254	0.8982		0.427
<u>1,724,538</u> <u>-</u> <u>1,764,467</u>	<u>100%</u>	<u>58%</u>	0105	1.3729	1.2027		0.527
<u>1,764,468</u> <u>-</u> <u>1,804,686</u>	<u>100%</u>	<u>59%</u>	0106	1.8483	1.6195	1.3317	0.494
<u>1,804,687</u> <u>-</u> <u>1,845,197</u>	<u>100%</u>	<u>60%</u>	0107	0.9557	0.8382		0.429
<u>1,845,198</u> <u>-</u> <u>1,886,004</u>	<u>100%</u>	<u>61%</u>	0108	1.0254	0.8982	0.7442	0.427
<u>1,886,005</u> <u>-</u> <u>1,927,111</u>	<u>100%</u>	<u>62%</u>		0.8008	0.7026		0.442
<u>1,927,112</u> <u>-</u> <u>1,968,520</u>	<u>100%</u>	<u>63%</u>	0201	1.5154	1.3204		0.420
<u>1,968,521</u> <u>-</u> <u>2,010,234</u>	<u>100%</u>	<u>64%</u>	0202	3.0439	2.6681		0.402
<u>2,010,235</u> <u>-</u> <u>2,052,258</u>	<u>100%</u>	<u>65%</u>	0210	0.9575	0.8381	0.6949	0.407
<u>2,052,259</u> <u>-</u> <u>2,094,594</u>	<u>100%</u>	<u>66%</u>	0212	1.3122	1.1508		0.420
<u>2,094,595</u> <u>-</u> <u>2,137,247</u>	<u>100%</u>	<u>67%</u>	0214	1.3573	1.1857		0.453
<u>2,137,248</u> <u>-</u> <u>2,180,220</u>	<u>100%</u>	<u>68%</u>	0217	1.3836	1.2131	1.0058	0.437
			0219	0.9607	0.8405	0.6956	0.426

Proposed [58]

				Primary					Primary
((Class	2012	2013	2014	Ratio	((Class	2012	2013	2014	Ratio
0301	0.8549	0.7545	0.6264	0.504	1105	0.8136	0.7152	0.5935	0.462
0302	2.2548	1.9679	1.6290	0.399	1106	0.2998	0.2663	0.2231	0.500
0303	1.8221	1.5983	1.3325	0.401	1108	0.5592	0.4928	0.4084	0.499
0306	0.9433	0.8231	0.6759	0.452	1109	1.4827	1.3039	1.0761	0.507
0307	0.9168	0.8021	0.6608	0.457	1301	0.5504	0.4774	0.3836	0.548
0308	0.6313	0.5593	0.4662	0.516	1303	0.2599	0.2270	0.1838	0.569
0403	1.7586	1.5424	1.2757	0.458	1304	0.0272	0.0238	0.0196	0.514
0502	1.3185	1.1521	0.9502	0.437	1305	0.4823	0.4237	0.3494	0.504
0504	1.8701	1.6531	1.3902	0.415	1401	0.2550	0.2272	0.1920	0.457
0507	3.2914	2.9137	2.4518	0.425	1404	0.8331	0.7339	0.6065	0.528
0508	1.5506	1.3516	1.1165	0.397	1405	0.8611	0.7533	0.6129	0.557
0509	1.0804	0.9442	0.7817	0.413	1407	0.5772	0.5083	0.4193	0.534
0510	2.2461	1.9784	1.6506	0.439	1501	0.6712	0.5873	0.4801	0.525
0511	1.5935	1.3924	1.1443	0.467	1507	0.6144	0.5402	0.4455	0.510
0512	1.2157	1.0682	0.8866	0.457	1701	0.7548	0.6579	0.5352	0.507
0513	0.9009	0.7886	0.6509	0.451	1702	1.5331	1.3399	1.1167	0.360
0514	1.6433	1.4369	1.1773	0.496	1703	0.9073	0.7881	0.6468	0.409
0516	1.4403	1.2630	1.0476	0.433	1704	0.7548	0.6579	0.5352	0.507
0517	2.1880	1.9315	1.6249	0.397	1801	0.4379	0.3856	0.3210	0.454
0518	1.2791	1.1180	0.9262	0.407	1802	0.7352	0.6439	0.5272	0.498
0519	1.6137	1.4114	1.1600	0.479	2002	0.8560	0.7536	0.6253	0.478
0521	0.5222	0.4593	0.3811	0.472	2004	0.6586	0.5798	0.4776	0.527
0601	0.5162	0.4520	0.3719	0.477	2007	0.7167	0.6348	0.5311	0.483
0602	0.6825	0.5937	0.4874	0.426	2008	0.3746	0.3307	0.2750	0.494
0603	0.6977	0.6104	0.5051	0.426	2009	0.3447	0.3045	0.2513	0.561
0604	1.1138	0.9852	0.8251	0.461	2101	0.6861	0.6089	0.5106	0.488
0606	0.6164	0.5403	0.4410	0.551	2102	0.6985	0.6131	0.5030	0.535
0607	0.7681	0.6750	0.5590	0.476	2104	0.3362	0.3002	0.2509	0.582
0608	0.3281	0.2876	0.2367	0.484	2105	0.6670	0.5864	0.4827	0.523
0701	1.5507	1.3384	1.0874	0.408	2106	0.4604	0.4079	0.3405	0.493
0803	0.5580	0.4881	0.3977	0.543	2201	0.2756	0.2436	0.2020	0.541
0901	1.2791	1.1180	0.9262	0.407	2202	0.7481	0.6566	0.5404	0.509
1002	0.8938	0.7854	0.6498	0.483	2203	0.5075	0.4485	0.3710	0.543
1003	0.7470	0.6554	0.5401	0.488	2204	0.2756	0.2436	0.2020	0.541
1004	0.4798	0.4177	0.3389	0.496	2401	0.4089	0.3569	0.2910	0.512
1005	8.2912	7.2351	5.9463	0.435	2903	0.7261	0.6420	0.5336	0.511
1006	0.1401	0.1226	0.0997	0.569	2904	0.6977	0.6121	0.5035	0.511
1007	0.2968	0.2589	0.2121	0.470	2905	0.5905	0.5208	0.4312	0.515
1101	0.8378	0.7335	0.6016	0.506	2906	0.3900	0.3459	0.2887	0.509
1102	1.4425	1.2596	1.0352	0.457	2907	0.5077	0.4466	0.3668	0.547
1103	1.1773	1.0319	0.8522	0.467	2908	1.1170	0.9883	0.8232	0.491
1104	0.6864	0.6038	0.4968	0.532	2909	0.4170	0.3679	0.3036	0.535

[59] Proposed

				Primary					Primary-
((Class	2012	2013	2014	Ratio	((Class	2012	2013	2014	Ratio
3101	0.7628	0.6700	0.5512	0.518	3906	0.4946	0.4379	0.3636	0.536
3102	0.2710	0.2384	0.1970	0.493	3909	0.3340	0.2962	0.2465	0.539
3103	0.4880	0.4298	0.3571	0.467	4101	0.3285	0.2886	0.2375	0.513
3104	0.6754	0.5928	0.4885	0.501	4103	0.5629	0.4953	0.4074	0.540
3105	0.7597	0.6693	0.5518	0.532	4107	0.1851	0.1631	0.1346	0.527
3303	0.4159	0.3657	0.3012	0.517	4108	0.1837	0.1620	0.1339	0.548
3304	0.5804	0.5150	0.4295	0.539	4109	0.2055	0.1813	0.1502	0.521
3309	0.4246	0.3746	0.3113	0.497	4201	0.6709	0.5838	0.4748	0.508
3402	0.4714	0.4145	0.3422	0.500	4301	0.7700	0.6792	0.5593	0.561
3403	0.1912	0.1684	0.1396	0.496	4302	0.8798	0.7749	0.6381	0.549
3404	0.4850	0.4273	0.3522	0.533	4304	0.9764	0.8672	0.7252	0.512
3405	0.2944	0.2588	0.2126	0.537	4305	1.2296	1.0691	0.8660	0.522
3406	0.2889	0.2546	0.2090	0.581	4401	0.4396	0.3900	0.3264	0.490
3407	0.7142	0.6240	0.5117	0.484	4402	0.7739	0.6783	0.5525	0.578
3408	0.2391	0.2090	0.1683	0.616	4404	0.4923	0.4352	0.3622	0.488
3409	0.1647	0.1451	0.1188	0.603	4501	0.1856	0.1635	0.1338	0.589
3410	0.1999	0.1767	0.1459	0.576	4502	0.0530	0.0467	0.0385	0.534
3411	0.4868	0.4269	0.3515	0.496	4504	0.1137	0.1006	0.0830	0.578
3412	0.6006	0.5253	0.4323	0.465	4802	0.3406	0.3020	0.2513	0.533
3414	0.7436	0.6551	0.5443	0.472	4803	0.3538	0.3153	0.2632	0.584
3415	0.7906	0.6970	0.5838	0.416	4804	0.5402	0.4795	0.3991	0.564
3501	1.0681	0.9378	0.7724	0.500	4805	0.3881	0.3434	0.2848	0.550
3503	0.3248	0.2882	0.2395	0.540	4806	0.0871	0.0776	0.0648	0.583
3506	0.8600	0.7488	0.6072	0.529	4808	0.4650	0.4105	0.3406	0.504
3509	0.4242	0.3737	0.3067	0.584	4809	0.3526	0.3130	0.2604	0.550
3510	0.3493	0.3081	0.2539	0.551	4810	0.1979	0.1760	0.1462	0.597
3511	0.6756	0.5944	0.4895	0.519	4811	0.3901	0.3475	0.2904	0.549
3512	0.3793	0.3345	0.2754	0.547	4812	0.4065	0.3599	0.2983	0.546
3513	0.6193	0.5487	0.4572	0.513	4813	0.1995	0.1774	0.1478	0.561
3602	0.0971	0.0857	0.0709	0.528	4814	0.1422	0.1277	0.1080	0.571
3603	0.5320	0.4701	0.3895	0.528	4815	0.2893	0.2607	0.2213	0.584
3604	0.7011	0.6243	0.5262	0.470	4816	0.4080	0.3668	0.3121	0.523
3605	0.5446	0.4770	0.3905	0.519	4900	0.1689	0.1479	0.1229	0.421
3701	0.2710	0.2384	0.1970	0.493	4901	0.0473	0.0414	0.0338	0.491
3702	0.4754	0.4179	0.3429	0.545	4902	0.1229	0.1080	0.0885	0.553
3708	0.6941	0.6094	0.5004	0.530	4903	0.1797	0.1577	0.1286	0.586
3802	0.2346	0.2073	0.1716	0.544	4904	0.0217	0.0191	0.0158	0.557
3808	0.4125	0.3618	0.2986	0.476	4905	0.4504	0.4014	0.3355	0.573
3901	0.1505	0.1338	0.1110	0.602	4906	0.1127	0.0987	0.0804	0.559
3902	0.4578	0.4049	0.3349	0.554	4907	0.0646	0.0573	0.0476	0.568
3903	1.1607	1.0316	0.8650	0.507	4908	0.1023	0.0904	0.0736	0.585
3905	0.1461	0.1300	0.1079	0.583	4909	0.0401	0.0358	0.0296	0.508

Proposed [60]

				Primary					Primary
((Class	2012	2013	2014	Ratio	((Class	2012	2013	2014	Ratio
4910	0.4537	0.3993	0.3294	0.519	6208	0.2676	0.2374	0.1965	0.573
4911	0.0684	0.0601	0.0496	0.494	6209	0.3085	0.2739	0.2284	0.529
5001	7.7450	6.7925	5.6705	0.378	6301	0.1267	0.1108	0.0909	0.490
5002	0.6235	0.5456	0.4451	0.539	6303	0.0700	0.0615	0.0505	0.530
5003	1.9792	1.7249	1.4189	0.428	6304	0.3074	0.2727	0.2258	0.571
5004	0.8018	0.7109	0.5981	0.450	6305	0.1112	0.0984	0.0809	0.606
5005	0.7739	0.6804	0.5664	0.427	6306	0.3423	0.3012	0.2482	0.529
5006	1.3549	1.1879	0.9922	0.374	6308	0.0652	0.0573	0.0472	0.519
5101	0.9594	0.8407	0.6946	0.447	6309	0.2035	0.1797	0.1485	0.542
5103	0.7903	0.6997	0.5806	0.532	6402	0.2931	0.2587	0.2127	0.582
5106	0.7903	0.6997	0.5806	0.532	6403	0.1859	0.1645	0.1355	0.587
5108	0.8067	0.7126	0.5914	0.520	6404	0.2982	0.2645	0.2194	0.572
5109	0.6158	0.5369	0.4381	0.492	6405	0.5123	0.4498	0.3698	0.521
5201	0.3517	0.3072	0.2492	0.554	6406	0.1263	0.1118	0.0923	0.589
5204	1.0078	0.8847	0.7340	0.450	6407	0.2599	0.2299	0.1902	0.562
5206	0.4070	0.3573	0.2956	0.472	6408	0.5226	0.4618	0.3846	0.491
5207	0.1656	0.1471	0.1224	0.556	6409	0.6650	0.5839	0.4820	0.487
5208	0.7485	0.6587	0.5437	0.503	6410	0.3226	0.2829	0.2314	0.542
5209	0.6582	0.5799	0.4822	0.466	6501	0.1375	0.1207	0.0984	0.589
5300	0.1102	0.0967	0.0786	0.602	6502	0.0326	0.0289	0.0239	0.536
5301	0.0351	0.0309	0.0254	0.542	6503	0.0721	0.0631	0.0514	0.535
5302	0.0115	0.0100	0.0082	0.541	6504	0.3556	0.3157	0.2612	0.593
5305	0.0548	0.0485	0.0401	0.576	6505	0.1523	0.1351	0.1108	0.648
5306	0.0465	0.0410	0.0335	0.584	6506	0.1272	0.1124	0.0927	0.566
5307	0.7382	0.6448	0.5267	0.514	6509	0.3258	0.2892	0.2395	0.574
5308	0.1003	0.0882	0.0722	0.577	6510	0.4495	0.3945	0.3274	0.440
6103	0.0978	0.0868	0.0716	0.602	6511	0.4010	0.3542	0.2924	0.559
6104	0.4909	0.4314	0.3548	0.529	6512	0.1137	0.1001	0.0828	0.493
6105	0.3921	0.3442	0.2834	0.514	6601	0.2187	0.1930	0.1600	0.518
6107	0.1340	0.1195	0.0992	0.590	6602	0.6023	0.5348	0.4470	0.526
6108	0.4019	0.3559	0.2941	0.569	6603	0.2957	0.2598	0.2138	0.519
6109	0.1077	0.0944	0.0773	0.541	6604	0.0913	0.0806	0.0661	0.582
6110	0.6097	0.5373	0.4437	0.527	6605	0.2983	0.2615	0.2128	0.559
6120	0.3235	0.2829	0.2305	0.540	6607	0.1451	0.1283	0.1066	0.519
6121	0.3557	0.3131	0.2598	0.485	6608	0.5937	0.5175	0.4272	0.405
6201	0.3045	0.2685	0.2235	0.473	6620	3.2769	2.8476	2.2823	0.586
6202	0.7149	0.6285	0.5178	0.509	6704	0.1252	0.1102	0.0900	0.583
6203	0.1222	0.1090	0.0906	0.620	6705	0.8465	0.7525	0.6241	0.609
6204	0.1391	0.1232	0.1021	0.564	6706	0.3014	0.2682	0.2249	0.525
6205	0.2191	0.1942	0.1613	0.538	6707	7.1875	6.3348	5.1392	0.682
6206	0.2156	0.1907	0.1575	0.562	6708	9.1145	8.2345	7.0836	0.452
6207	1.3887	1.2323	1.0309	0.504	6709	0.2764	0.2447	0.2030	0.539

[61] Proposed

				Primary					Primary
((Class	2012	2013	2014	Ratio	((Class	2012	2013	2014	Ratio
6801	0.7999	0.6949	0.5604	0.545	7301	0.4855	0.4301	0.3580	0.516
6802	0.6842	0.6032	0.4962	0.570	7302	0.9636	0.8535	0.7140	0.481
6803	0.6323	0.5531	0.4621	0.348	7307	0.4682	0.4145	0.3442	0.533
6804	0.3069	0.2716	0.2247	0.543	7308	0.3337	0.2964	0.2464	0.548
6809	5.8524	5.1801	4.2393	0.600	7309	0.2901	0.2570	0.2121	0.595
6901	0.0212	0.0202	0.0171	0.775	7400	2.1033	1.8317	1.4897	0.511))
6902	0.8889	0.7786	0.6462	0.420					
6903	6.5538	5.7938	4.9227	0.339	Class	2012	2014	2015	<u>Primary</u>
6904	0.8407	0.7295	0.5886	0.524	Class	2013	<u>2014</u>	<u>2015</u>	Ratio
6905	0.5968	0.5189	0.4175	0.569	<u>0101</u> <u>0103</u>	1.0963	<u>0.9687</u>	0.8136	0.419
6906	0.2332	0.2193	0.1962	0.660	<u></u>	1.5062 1.0132	1.3414 0.8050	1.1348	0.426
6907	1.1709	1.0305	0.8490	0.533	<u>0104</u>		0.8950	0.7482	0.435
6908	0.3931	0.3461	0.2856	0.529	<u>0105</u>	1.1522	1.0064	0.8127	0.525
6909	0.1214	0.1071	0.0883	0.532	<u>0106</u>	1.8362	1.6120	1.3214	0.489
7100	0.0333	0.0296	0.0249	0.466	<u>0107</u>	0.9217	0.8138	0.6816	0.434
7101	0.0254	0.0222	0.0184	0.457	<u>0108</u>	1.0132	0.8950	0.7482	0.435
7103	0.8062	0.7024	0.5694	0.537	<u>0112</u>	0.7410	0.6557	0.5482	0.444
7104	0.0322	0.0284	0.0234	0.570	<u>0201</u>	1.4002	1.2321 2.1772	1.0269	0.431
7105	0.0211	0.0186	0.0153	0.533	<u>0202</u>	2.4473	<u>2.1772</u>	1.8464	0.400
7106	0.2808	0.2481	0.2041	0.610	<u>0210</u>	0.8307	0.7363	0.6213	0.412
7107	0.2786	0.2483	0.2073	0.569	<u>0212</u>	1.2315	1.0878	0.9106	0.430
7108	0.1928	0.1709	0.1418	0.563	<u>0214</u>	1.2513	1.0988	0.9100	0.451
7109	0.1398	0.1235	0.1019	0.574	<u>0217</u>	1.3272	1.1709	0.9748	0.448
7110	0.3316	0.2919	0.2433	0.442	<u>0219</u>	0.8568	0.7580	0.6380	0.418
7111	0.4520	0.3944	0.3237	0.459	0301	0.7788	0.6885	0.5688	0.498
7112	0.8147	0.7193	0.5923	0.573	0302	<u>2.1576</u>	1.8975	1.5866	0.415
7113	0.4354	0.3855	0.3194	0.565	0303	1.8107	1.6063	1.3586	0.410
7114	0.7858	0.6959	0.5741	0.599	<u>0306</u>	0.8524	0.7453	0.6125	0.465
7115	0.5206	0.4615	0.3832	0.561	0307	0.8484	0.7442	0.6122	0.472
7116	0.6161	0.5439	0.4515	0.506	0308	0.6078	<u>0.5352</u>	0.4368	0.529
7117	1.1903	1.0487	0.8605	0.565	<u>0403</u>	1.7801	1.5603	1.2786	0.485
7118	1.7771	1.5701	1.3036	0.518	<u>0502</u>	1.2001	1.0526	0.8683	0.458
7119	1.5853	1.3855	1.1226	0.579	<u>0504</u>	1.9317 2.0010	1.7266	1.4689	0.418
7120	6.2901	5.5445	4.5972	0.499	<u>0507</u>	<u>2.9910</u>	<u>2.6698</u>	2.2539	0.443
7121	5.8042	5.1131	4.2298	0.504	<u>0508</u>	1.3142	1.1630	0.9805	0.401
7122	0.3885	0.3428	0.2832	0.535	<u>0509</u>	<u>0.9226</u>	0.8150	0.6869	0.409
7200	1.8289	1.5928	1.2955	0.511	<u>0510</u>	2.1793	1.9416 1.2964	1.6373	0.441
7201	1.8108	1.5815	1.2926	0.508	<u>0511</u>	1.4695	1.2864	1.0568	<u>0.475</u>
7202	0.0301	0.0264	0.0217	0.532	<u>0512</u>	1.2032	1.0571	0.8716	<u>0.476</u>
7203	0.1242	0.1111	0.0921	0.614	<u>0513</u>	0.8368	0.7345	0.6040	0.471
7204	0.0000	0.0000	0.0000	0.500	<u>0514</u>	1.4923	1.2995	1.0501	0.511
7205	0.0000	0.0000	0.0000	0.500	<u>0516</u>	1.3816	1.2218	1.0210	0.445
					<u>0517</u>	<u>1.9405</u>	<u>1.7384</u>	<u>1.4860</u>	<u>0.406</u>

Proposed [62]

Class	2012	2014	2015	<u>Primary</u>	Class	2012	2014	2015	<u>Primary</u>
Class	2013	<u>2014</u>	2015	<u>Ratio</u>	Class	<u>2013</u>	<u>2014</u>	<u>2015</u>	<u>Ratio</u>
<u>0518</u>	1.0969	0.9700	0.8148	<u>0.427</u>	1802	0.6856	0.5997	0.4869	0.503
<u>0519</u>	1.3979	1.2205	0.9947	<u>0.490</u>	<u>2002</u>	0.8307	0.7290	0.5971	0.495
<u>0521</u>	0.4637	0.4077	0.3344	<u>0.503</u>	<u>2004</u>	0.5971	0.5219	0.4214	0.542
<u>0601</u>	0.4668	0.4082	0.3329	<u>0.494</u>	<u>2007</u>	0.7038	0.6258	0.5219	0.484
<u>0602</u>	0.6278	0.5498	0.4566	<u>0.425</u>	<u>2008</u>	0.3493	0.3079	0.2537	<u>0.500</u>
0603	0.6331	0.5578	0.4653	0.434	<u>2009</u>	0.3330	0.2902	0.2319	0.572
<u>0604</u> <u>0606</u>	1.0383	0.9245 0.5025	0.7774	<u>0.460</u>	<u>2101</u>	0.6085	0.5412	0.4509	0.493
<u>0607</u>	0.5808		0.3979	<u>0.563</u>	2102	0.6516 0.3106	0.5670	0.4552	0.538
0608	<u>0.7216</u>	0.6358 0.2900	0.5265	<u>0.468</u>	2104 2105	0.3196 0.6577	0.2813	0.2265	0.597 0.545
·	0.3335		0.2341	<u>0.509</u>	<u></u>	0.6577	0.5711	0.4566	0.545
<u>0701</u>	1.4527 0.5205	1.2647	1.0476	<u>0.409</u>	<u>2106</u>	0.4210	0.3738	0.3110	<u>0.495</u>
<u>0803</u> <u>0901</u>	0.5205 1.0969	0.4490 0.9700	0.3546 0.8148	<u>0.558</u>	<u>2201</u>	0.2612 0.6671	0.2283	0.1841	<u>0.547</u>
1002	0.8472	<u>0.9700</u> <u>0.7433</u>	0.6101 0.6101	0.427 0.487	2202 2203	0.4820	<u>0.5841</u> <u>0.4227</u>	<u>0.4765</u> <u>0.3422</u>	0.501 0.545
1002 1003	0.6808	0.7433 0.5972	<u>0.4888</u>	<u>0.487</u> <u>0.492</u>	<u>2203</u> 2204	0.4620	0.4227	0.3422 0.1841	0.543 0.547
1003 1004	0.4347	0.3772	0.3035	<u>0.492</u> <u>0.499</u>	$\frac{2204}{2401}$	0.3638	0.3182	0.1841	0.347 0.491
1004 1005	<u>0.4347</u> <u>7.6938</u>	<u>0.3773</u> <u>6.7629</u>	<u>0.3033</u> <u>5.5848</u>	<u>0.499</u> <u>0.443</u>	<u>2401</u> <u>2903</u>	0.3038 0.7099	0.6284	0.5186	0.491 0.507
1005 1006	<u>7.0938</u> <u>0.1675</u>	0.1433	<u>0.1110</u>	<u>0.443</u> <u>0.591</u>	<u>2903</u> 2904	0.6589	<u>0.6284</u> <u>0.5734</u>	0.4620	0.507 0.519
$\frac{1000}{1007}$	0.2805	0.1433	0.2008	<u>0.331</u> <u>0.475</u>	<u>2904</u> <u>2905</u>	0.6389 0.5266	0.4622	0.3765	0.519 0.520
1101 1101	0.8483	0.7393	<u>0.2008</u> <u>0.5978</u>	<u>0.473</u> <u>0.511</u>	<u>2905</u> 2906	<u>0.3260</u> <u>0.3861</u>	0.3417	0.2814	0.520 0.522
1101 1102	1.3973	1.2259	1.0097	<u>0.311</u> <u>0.458</u>	<u>2900</u> <u>2907</u>	0.3861 0.4667	0.4066	0.3261	0.522 0.548
1102 1103	1.0300	0.9051	0.7461	<u>0.438</u> <u>0.472</u>	2908	0.9905	0.8805	0.7330	0.348 0.494
1103 1104	0.6514	<u>0.5698</u>	0.4605	<u>0.472</u> <u>0.535</u>	<u>2909</u>	0.3925	0.3448	0.2802	<u>0.434</u> <u>0.534</u>
110 4 1105	<u>0.0514</u> <u>0.7696</u>	<u>0.5058</u> <u>0.6789</u>	<u>0.5636</u>	<u>0.333</u> <u>0.467</u>	<u>2505</u> 3101	0.7258	0.6315	0.5083	0.529
<u>1105</u> 1106	<u>0.7856</u>	0.2538	0.2109	<u>0.509</u>	3102	$\frac{0.7230}{0.2770}$	0.2437	0.2008	0.488
1108	0.5020	<u>0.4410</u>	0.3611	0.507	3103	0.4374	0.3871	0.3214	0.470
1109	1.3433	1.1723	0.9460	0.525	3104	0.6334	0.5544	0.4517	0.508
1301	0.5236	0.4485	0.3515	0.545	3105	0.7116	0.6232	0.5044	0.541
1303	0.2707	0.2319	0.1802	0.579	3303	0.3826	0.3347	0.2712	0.521
<u>1304</u>	0.0239	0.0209	0.0171	0.505	3304	0.5557	0.4891	0.3982	0.548
1305	0.4579	0.3989	0.3221	0.520	3309	0.4093	0.3599	0.2952	0.516
1401	0.2463	0.2221	0.1882	0.467	3402	0.4558	0.3999	0.3268	0.507
1404	0.7448	0.6530	0.5314	0.518	3403	0.1727	0.1518	0.1248	0.499
1405	0.8124	0.7019	0.5554	0.556	3404	0.4644	0.4053	0.3262	0.545
1407	0.5589	0.4858	0.3880	0.561	<u>3405</u>	0.2835	0.2485	0.2019	0.528
<u>1501</u>	0.6504	0.5641	0.4520	0.525	<u>3406</u>	0.2691	0.2331	0.1841	0.589
<u>1507</u>	0.5893	0.5146	0.4159	0.526	3407	0.7103	0.6195	0.5034	0.492
<u>1701</u>	0.6789	0.5893	0.4732	0.507	3408	0.2225	0.1894	0.1444	0.620
<u>1702</u>	1.3986	1.2449	1.0678	0.365	3409	0.1565	0.1347	0.1054	0.609
<u>1703</u>	0.8377	0.7353	0.6132	0.414	<u>3410</u>	0.1789	0.1556	0.1237	0.584
1704	0.6789	0.5893	0.4732	<u>0.507</u>	3411	0.4678	0.4088	0.3324	0.502
<u>1801</u>	<u>0.4138</u>	0.3658	0.3052	0.459	<u>3412</u>	0.5730	0.5020	0.4120	0.473

[63] Proposed

				<u>Primary</u>					<u>Primary</u>
<u>Class</u>	<u>2013</u>	<u>2014</u>	<u>2015</u>	<u>Ratio</u>	<u>Class</u>	<u>2013</u>	<u>2014</u>	<u>2015</u>	<u>Ratio</u>
<u>3414</u>	0.6942	0.6139	0.5095	<u>0.474</u>	<u>4803</u>	0.3400	0.2981	0.2394	0.597
<u>3415</u>	0.7329	0.6534	0.5535	<u>0.425</u>	<u>4804</u>	0.5612	0.4907	0.3945	<u>0.577</u>
<u>3501</u>	<u>1.0009</u>	<u>0.8765</u>	<u>0.7126</u>	<u>0.507</u>	<u>4805</u>	0.3877	0.3394	0.2737	<u>0.556</u>
<u>3503</u>	<u>0.3193</u>	0.2804	0.2268	<u>0.551</u>	<u>4806</u>	0.0910	0.0797	0.0639	0.602
<u>3506</u>	<u>0.7805</u>	<u>0.6773</u>	<u>0.5449</u>	0.520	<u>4808</u>	<u>0.4307</u>	0.3800	0.3122	<u>0.509</u>
<u>3509</u>	<u>0.3987</u>	<u>0.3450</u>	0.2723	0.589	<u>4809</u>	<u>0.3561</u>	<u>0.3140</u>	<u>0.2559</u>	<u>0.552</u>
<u>3510</u>	0.3329	<u>0.2907</u>	0.2333	<u>0.561</u>	<u>4810</u>	<u>0.1902</u>	<u>0.1665</u>	<u>0.1335</u>	<u>0.592</u>
<u>3511</u>	<u>0.6754</u>	<u>0.5874</u>	<u>0.4703</u>	<u>0.540</u>	<u>4811</u>	0.3831	0.3398	<u>0.2787</u>	<u>0.551</u>
<u>3512</u>	<u>0.3788</u>	0.3293	<u>0.2621</u>	0.569	<u>4812</u>	0.3969	0.3482	<u>0.2824</u>	<u>0.552</u>
<u>3513</u>	<u>0.5613</u>	0.4963	<u>0.4077</u>	<u>0.518</u>	<u>4813</u>	<u>0.1959</u>	<u>0.1730</u>	<u>0.1409</u>	<u>0.569</u>
<u>3602</u>	0.0869	<u>0.0761</u>	<u>0.0617</u>	0.538	<u>4814</u>	<u>0.1345</u>	<u>0.1195</u>	0.0981	<u>0.577</u>
<u>3603</u>	<u>0.4989</u>	<u>0.4396</u>	0.3594	0.522	<u>4815</u>	<u>0.2744</u>	0.2439	0.1997	<u>0.591</u>
<u>3604</u>	<u>0.6519</u>	0.5829	<u>0.4910</u>	<u>0.477</u>	<u>4816</u>	0.3829	0.3436	0.2875	0.530
<u>3605</u>	<u>0.5115</u>	<u>0.4449</u>	0.3572	0.527	<u>4900</u>	<u>0.1526</u>	<u>0.1345</u>	<u>0.1125</u>	<u>0.438</u>
<u>3701</u>	<u>0.2770</u>	0.2437	<u>0.2008</u>	<u>0.488</u>	<u>4901</u>	<u>0.0427</u>	0.0373	0.0302	<u>0.505</u>
<u>3702</u>	0.4232	0.3698	0.2985	<u>0.537</u>	<u>4902</u>	0.1169	0.1012	0.0804	0.561
<u>3708</u>	0.6600	0.5744	0.4619	<u>0.536</u>	<u>4903</u>	0.1708	0.1470	<u>0.1149</u>	0.595
<u>3802</u>	0.2119	0.1854	0.1498	<u>0.554</u>	<u>4904</u>	0.0195	0.0171	0.0138	0.555
<u>3808</u>	0.3977	0.3482	0.2845	<u>0.494</u>	<u>4905</u>	0.4262	0.3752	0.3039	0.580
<u>3901</u>	<u>0.1370</u>	<u>0.1196</u>	0.0951	0.608	<u>4906</u>	<u>0.1055</u>	0.0908	0.0713	<u>0.576</u>
<u>3902</u>	<u>0.4413</u>	0.3858	0.3104	<u>0.560</u>	<u>4907</u>	0.0645	0.0562	<u>0.0450</u>	<u>0.584</u>
<u>3903</u>	1.0878	<u>0.9645</u>	0.7977	<u>0.514</u>	<u>4908</u>	0.0960	0.0840	0.0667	<u>0.586</u>
<u>3905</u>	<u>0.1336</u>	<u>0.1171</u>	0.0940	0.588	<u>4909</u>	0.0368	0.0334	0.0280	<u>0.504</u>
<u>3906</u>	0.4663	<u>0.4111</u>	0.3362	<u>0.530</u>	<u>4910</u>	0.4483	0.3928	0.3196	<u>0.516</u>
<u>3909</u>	0.2918	0.2576	<u>0.2106</u>	<u>0.544</u>	<u>4911</u>	0.0646	0.0568	<u>0.0464</u>	<u>0.506</u>
<u>4101</u>	0.2792	0.2449	0.2002	<u>0.506</u>	<u>5001</u>	6.9239	6.2330	5.3983	0.360
<u>4103</u>	0.5302	<u>0.4616</u>	0.3701	<u>0.552</u>	<u>5002</u>	0.5873	0.5085	0.4042	0.547
<u>4107</u>	<u>0.1791</u>	0.1560	0.1252	<u>0.547</u>	<u>5003</u>	1.8503	1.6239	1.3466	0.433
<u>4108</u>	<u>0.1656</u>	0.1444	0.1162	<u>0.551</u>	<u>5004</u>	0.7598	0.6781	<u>0.5710</u>	0.466
<u>4109</u>	0.1938	<u>0.1706</u>	0.1394	<u>0.523</u>	<u>5005</u>	0.7039	0.6262	0.5273	0.430
<u>4201</u>	0.6568	0.5664	0.4517	<u>0.514</u>	<u>5006</u>	1.2383	<u>1.1041</u>	<u>0.9430</u>	<u>0.381</u>
<u>4301</u>	<u>0.7420</u>	0.6475	0.5189	<u>0.565</u>	<u>5101</u>	0.8841	0.7805	<u>0.6501</u>	<u>0.446</u>
<u>4302</u>	0.8783	0.7623	0.6066	<u>0.567</u>	<u>5103</u>	0.7425	0.6542	0.5333	0.538
<u>4304</u>	0.9325	0.8292	0.6880	<u>0.511</u>	<u>5106</u>	0.7425	0.6542	0.5333	0.538
<u>4305</u>	<u>1.1777</u>	<u>1.0156</u>	<u>0.8074</u>	<u>0.524</u>	<u>5108</u>	0.7612	0.6660	0.5398	<u>0.530</u>
<u>4401</u>	<u>0.4160</u>	0.3698	0.3074	<u>0.498</u>	<u>5109</u>	0.5723	0.4992	<u>0.4064</u>	<u>0.484</u>
<u>4402</u>	0.7345	0.6312	0.4929	0.588	<u>5201</u>	<u>0.3066</u>	0.2655	0.2111	<u>0.548</u>
<u>4404</u>	<u>0.4584</u>	0.4039	0.3310	<u>0.510</u>	<u>5204</u>	0.9279	0.8148	<u>0.6719</u>	0.465
<u>4501</u>	0.1742	0.1508	<u>0.1189</u>	<u>0.594</u>	<u>5206</u>	0.3947	0.3464	0.2846	0.487
<u>4502</u>	0.0533	0.0463	0.0370	0.549	<u>5207</u>	0.1606	0.1409	0.1138	0.565
<u>4504</u>	<u>0.1077</u>	0.0938	0.0745	<u>0.592</u>	<u>5208</u>	0.6932	0.6085	0.4966	0.510
<u>4802</u>	0.3383	0.2976	0.2417	<u>0.548</u>	<u>5209</u>	<u>0.6216</u>	0.5479	0.4535	0.477

Proposed [64]

<u>Class</u>	<u>2013</u>	<u>2014</u>	<u>2015</u>	Primary Ratio	<u>Class</u>	<u>2013</u>	<u>2014</u>	<u>2015</u>	Primary Ratio
5300	0.1009	0.0867	0.0675	0.601	<u>6502</u>	0.0291	0.0255	0.0207	0.541
5301	0.0320	0.0280	0.0226	0.545	6503	0.0707	0.0611	0.0485	0.553
5302	0.0100	0.0087	0.0069	0.545	6504	0.3393	0.2964	0.2362	0.600
<u>5305</u>	0.0517	0.0449	0.0357	0.583	<u>6505</u>	0.1497	0.1293	0.1003	0.655
5306	0.0436	0.0380	0.0303	0.575	6506	0.1214	0.1060	0.0848	0.570
5307	0.6644	0.5762	0.4623	0.520	6509	0.2975	0.2602	0.2086	0.583
<u>5308</u>	0.0871	0.0757	0.0604	0.576	<u>6510</u>	0.4143	0.3685	0.3107	0.427
<u>6103</u>	0.0940	0.0816	0.0644	0.612	<u>6511</u>	0.3490	0.3052	0.2456	0.557
<u>6104</u>	0.4799	0.4178	0.3353	0.543	<u>6512</u>	0.0979	0.0857	0.0696	<u>0.516</u>
<u>6105</u>	0.3571	0.3122	0.2538	<u>0.518</u>	<u>6601</u>	0.2068	0.1810	0.1465	<u>0.534</u>
<u>6107</u>	0.1282	<u>0.1130</u>	0.0912	0.598	<u>6602</u>	0.6018	<u>0.5304</u>	0.4334	0.537
<u>6108</u>	<u>0.3545</u>	0.3094	0.2475	<u>0.581</u>	<u>6603</u>	0.2762	<u>0.2411</u>	0.1947	<u>0.527</u>
<u>6109</u>	<u>0.1077</u>	0.0932	<u>0.0741</u>	<u>0.547</u>	<u>6604</u>	0.0895	0.0773	0.0608	<u>0.593</u>
<u>6110</u>	<u>0.5625</u>	0.4914	0.3969	<u>0.531</u>	<u>6605</u>	0.2625	0.2282	<u>0.1817</u>	<u>0.555</u>
<u>6120</u>	0.3007	0.2602	0.2073	0.549	<u>6607</u>	0.1289	0.1139	0.0936	<u>0.517</u>
<u>6121</u>	0.3277	0.2883	0.2379	0.485	<u>6608</u>	0.5518	0.4853	0.4062	<u>0.415</u>
<u>6201</u>	0.2992	0.2638	<u>0.2184</u>	0.482	<u>6620</u>	3.0947	2.6370	2.0289	0.594
<u>6202</u>	0.6809	0.5957	0.4830	0.520	<u>6704</u>	<u>0.1201</u>	0.1035	0.0811	<u>0.595</u>
<u>6203</u>	<u>0.1226</u>	0.1069	0.0847	0.632	<u>6705</u>	<u>0.7804</u>	0.6781	0.5359	<u>0.616</u>
<u>6204</u>	<u>0.1325</u>	<u>0.1155</u>	<u>0.0924</u>	<u>0.576</u>	<u>6706</u>	0.2772	<u>0.2458</u>	<u>0.2031</u>	<u>0.528</u>
<u>6205</u>	<u>0.1967</u>	<u>0.1732</u>	<u>0.1412</u>	0.543	<u>6707</u>	<u>7.9235</u>	<u>6.7235</u>	<u>5.0532</u>	<u>0.693</u>
<u>6206</u>	<u>0.1955</u>	<u>0.1703</u>	<u>0.1364</u>	0.573	<u>6708</u>	<u>8.5628</u>	<u>7.8422</u>	<u>6.7940</u>	<u>0.462</u>
<u>6207</u>	<u>1.2606</u>	<u>1.1167</u>	<u>0.9211</u>	<u>0.506</u>	<u>6709</u>	<u>0.2404</u>	<u>0.2117</u>	<u>0.1725</u>	<u>0.545</u>
<u>6208</u>	<u>0.2497</u>	<u>0.2191</u>	<u>0.1762</u>	0.586	<u>6801</u>	<u>0.7285</u>	<u>0.6211</u>	<u>0.4821</u>	<u>0.555</u>
<u>6209</u>	0.2892	0.2556	0.2089	<u>0.534</u>	<u>6802</u>	<u>0.7011</u>	0.6053	0.4768	<u>0.580</u>
<u>6301</u>	<u>0.1194</u>	<u>0.1035</u>	0.0832	<u>0.513</u>	<u>6803</u>	<u>0.5878</u>	<u>0.5243</u>	<u>0.4529</u>	<u>0.346</u>
<u>6303</u>	<u>0.0619</u>	<u>0.0540</u>	0.0438	<u>0.522</u>	<u>6804</u>	0.2753	<u>0.2406</u>	<u>0.1933</u>	<u>0.564</u>
<u>6304</u>	<u>0.2754</u>	<u>0.2417</u>	<u>0.1948</u>	<u>0.578</u>	<u>6809</u>	<u>5.4627</u>	<u>4.7757</u>	<u>3.7898</u>	<u>0.606</u>
<u>6305</u>	<u>0.1032</u>	<u>0.0894</u>	<u>0.0703</u>	<u>0.607</u>	<u>6901</u>	<u>0.0197</u>	<u>0.0189</u>	<u>0.0160</u>	<u>0.747</u>
<u>6306</u>	0.3272	0.2849	0.2286	0.545	<u>6902</u>	<u>0.8235</u>	0.7272	0.6072	0.434
<u>6308</u>	0.0600	0.0524	0.0424	0.524	<u>6903</u>	6.1024	5.5069	4.8073	0.358
<u>6309</u>	0.1852	0.1620	0.1304	0.554	<u>6904</u>	0.8613	0.7434	0.5921	0.519
<u>6402</u>	0.2694	0.2336	0.1847	0.596	<u>6905</u>	0.5881	0.5031	0.3920	0.572
<u>6403</u>	0.1702	0.1479	0.1170	0.595	<u>6906</u>	0.2354	0.2163	0.1841	0.661
6404	0.3001	0.2622	0.2100	0.582	<u>6907</u>	1.0475	0.9131	0.7337	0.543
6405	0.4857	0.4235	0.3419	0.526	<u>6908</u>	0.3716	0.3245	0.2625	0.532
<u>6406</u>	0.1162	0.1009	0.0797	<u>0.605</u>	<u>6909</u>	0.1213	0.1058	0.0849	0.553
6407	0.2563	0.2230	0.1780	<u>0.575</u>	7100	0.0311	0.0277	0.0234	0.472
6408	0.4972	0.4389	0.3623	0.499	7101	0.0240	0.0213	0.0176	0.464
6409	0.6210	<u>0.5465</u>	0.4507	<u>0.482</u>	7103	0.7770	0.6684	0.5261	0.548
6410	0.3163	0.2735	0.2169	<u>0.557</u>	7104	0.0284	0.0248	0.0198	0.564
<u>6501</u>	<u>0.1194</u>	<u>0.1025</u>	0.0797	0.600	<u>7105</u>	0.0198	0.0173	0.0139	0.549

[65] Proposed

				Primary					Primary		
<u>Class</u>	<u>2013</u>	<u>2014</u>	<u>2015</u>	<u>Ratio</u>	Class	<u>2013</u>		<u>2015</u>	<u>Ratio</u>		
<u>7106</u>	<u>0.2632</u>	0.2277	<u>0.1788</u>	<u>0.614</u>	<u>551</u>	0.0140	0.0125	<u>0.0106</u>	<u>0.401</u>		
<u>7107</u>	0.2678	0.2366	<u>0.1924</u>	0.574	AMENDAT	CODIA	SECTION (A	1' 11/0	D 15 24 102		
<u>7108</u>	<u>0.1857</u>	<u>0.1621</u>	<u>0.1298</u>	<u>0.576</u>	AMENDATORY SECTION (Amending WSR 15-24-10 filed 12/1/15, effective 1/1/16)						
<u>7109</u>	<u>0.1304</u>	<u>0.1135</u>	<u>0.0902</u>	<u>0.580</u>			,				
<u>7110</u>	<u>0.3267</u>	0.2910	0.2448	<u>0.442</u>			390 Table IV.				
<u>7111</u>	<u>0.4181</u>	<u>0.3644</u>	0.2971	<u>0.476</u>			ım experience				
<u>7112</u>	<u>0.8630</u>	<u>0.7460</u>	<u>0.5867</u>	<u>0.594</u>			vith no compen				
<u>7113</u>	<u>0.4472</u>	0.3888	0.3092	<u>0.585</u>		Effecti	ve January 1, (``			
<u>7114</u>	<u>0.7397</u>	<u>0.6430</u>	<u>0.5090</u>	0.601	F	.4. J.T	D		ım Experi-		
<u>7115</u>	<u>0.5201</u>	<u>0.4530</u>	<u>0.3612</u>	<u>0.579</u>	-		oss Range		odification		
<u>7116</u>	<u>0.5556</u>	<u>0.4884</u>	0.3990	0.509		((1 -	6,682).90		
<u>7117</u>	<u>1.1711</u>	<u>1.0187</u>	0.8121	<u>0.572</u>	6,6		8,159).89		
<u>7118</u>	<u>1.6462</u>	<u>1.4453</u>	<u>1.1787</u>	0.523	8,1		9,039).88).87		
<u>7119</u>	<u>1.4680</u>	<u>1.2626</u>	<u>0.9861</u>	0.581	9,0		9,852).87		
<u>7120</u>	<u>5.8966</u>	<u>5.1836</u>	<u>4.2448</u>	0.507	9,8		10,711).86		
<u>7121</u>	<u>5.4181</u>	<u>4.7601</u>	3.8909	0.510	10,7		11,610).85		
<u>7122</u>	<u>0.3892</u>	0.3391	<u>0.2714</u>	0.554	11,6		12,402).84		
<u>7200</u>	<u>1.6771</u>	<u>1.4504</u>	<u>1.1604</u>	0.511	12,4		13,205).83		
<u>7201</u>	1.6543	<u>1.4293</u>	<u>1.1384</u>	0.527	13,2		14,040).82		
<u>7202</u>	0.0287	0.0249	0.0201	0.537	14,0		14,910).81		
<u>7203</u>	<u>0.1163</u>	0.1029	0.0830	<u>0.611</u>	14,9		15,815).80		
<u>7204</u>	0.0000	0.0000	0.0000	0.500	15,8		16,754) .79		
<u>7205</u>	0.0000	0.0000	0.0000	0.500	16,7		17,730).78		
<u>7301</u>	0.4832	0.4258	0.3479	<u>0.532</u>	17,7		18,736).77		
<u>7302</u>	0.9068	<u>0.8071</u>	0.6748	0.479	18,7		19,783).76		
<u>7307</u>	0.4386	0.3859	0.3141	0.537	19,7		20,862).75		
<u>7308</u>	0.2946	0.2600	0.2119	<u>0.554</u>	20,8		21,980).74		
<u>7309</u>	0.2847	0.2469	<u>0.1946</u>	0.607	21,9		23,132).73		
<u>7400</u>	<u>1.9286</u>	<u>1.6679</u>	1.3345	0.511	23,1		24,324).72		
Ex	nected Loss	Rates in Do	ollars Per S	a. Ft.	24,3		25,550).71		
		allboard In		4	25,5		26,815).70		
				Primary	26,8		28,118).69		
((Class	2012	2013	2014	Ratio	28,1		29,457).68		
0540	0.0270	0.0237	0.0196	0.419	29,4	58 -	30,836	().67		
0541	0.0123	0.0108	0.0090	0.420	30,8		32,249).66		
0550	0.0302	0.0265	0.0221	0.417	32,2	50 -	33,704	().65		
0551	0.0143	0.0126	0.0105	0.404))	33,7	05 -	35,969	().64		
				<u>Primary</u>	35,9	70 -	39,051).63		
Class	<u>2013</u>	<u>2014</u>	<u>2015</u>	Ratio	39,0		42,612).62		
<u>540</u>	0.0229	0.0204	0.0173	0.419	42,6	13 -	49,538	().61		
<u>541</u>	0.0107	0.0096	0.0080	0.430	49,5	39	and higher	0	.60))		
<u>550</u>	0.0308	0.0272	0.0229	0.422		<u>1</u> <u>-</u>	<u>6,248</u>	<u>(</u>	<u>).90</u>		
					<u>6,2</u>	<u>49</u> <u>-</u>	<u>7,629</u>	<u>(</u>	0.89		

Proposed [66]

Expected Loss Range	Maximum Experi- ence Modification			se Rates Effo ary 1, ((2010	
<u>7,630 - 8,451</u>	0.88		Accident	Stay at	Medical Aid
<u>8,452</u> <u>-</u> <u>9,212</u>	<u>0.87</u>	Class	Fund	Work	Fund
<u>9,213</u> <u>-</u> <u>10,015</u>	<u>0.86</u>	((0101	2.0953	0.0313	0.7848
<u>10,016</u> <u>-</u> <u>10,855</u>	<u>0.85</u>	0103	2.5091	0.0372	1.1715
<u>10,856</u> <u>-</u> <u>11,596</u>	<u>0.84</u>	0104	1.7058	0.0254	0.7182
<u>11,597 - 12,347</u>	<u>0.83</u>	0105	1.9607	0.0288	1.1243
<u>12,348</u> <u>-</u> <u>13,127</u>	<u>0.82</u>	0106	2.7316	0.0404	1.3963
<u>13,128</u> <u>-</u> <u>13,941</u>	<u>0.81</u>	0107	1.6056	0.0239	0.6786
<u>13,942</u> <u>-</u> <u>14,787</u>	<u>0.80</u>	0108	1.7058	0.0254	0.7182
<u>14,788</u> <u>-</u> <u>15,665</u>	<u>0.79</u>	0112	1.2755	0.0189	0.5841
<u> 15,666 - 16,577</u>	<u>0.78</u>	0201	2.6694	0.0400	0.9426
<u>16,578</u> <u>-</u> <u>17,518</u>	<u>0.77</u>	0202	5.1011	0.0760	2.1295
<u>17,519</u> <u>-</u> <u>18,497</u>	<u>0.76</u>	0210	1.6461	0.0246	0.6387
<u> 18,498 - 19,506</u>	<u>0.75</u>	0212	2.1651	0.0323	0.9047
<u>19,507</u> <u>-</u> <u>20,551</u>	<u>0.74</u>	0214	2.2491	0.0336	0.9031
<u>20,552</u> <u>-</u> <u>21,628</u>	<u>0.73</u>	0217	2.2437	0.0334	0.9816
<u>21,629</u> <u>- 22,743</u>	<u>0.72</u>	0219	1.6196	0.0242	0.6435
<u> 22,744 - 23,889</u>	<u>0.71</u>	0301	1.1760	0.0172	0.7435
<u>23,890 - 25,072</u>	<u>0.70</u>	0302	4 .0562	0.0609	1.3367
<u>25,073</u> <u>- 26,290</u>	0.69	0303	3.0860	0.0461	1.2166
<u> 26,291 - 27,542</u>	0.68	0306	1.6051	0.0240	0.6195
<u>27,543</u> <u>- 28,832</u>		0307	1.5019	0.0224	0.6486
<u> 28,833 - 30,153</u>		0308	0.8026	0.0116	0.5934
<u>30,154</u> - <u>31,513</u>		0403	2.7376	0.0406	1.3012
<u>31,514</u> - <u>33,631</u>		0502	2.2162	0.0331	0.8699
<u>33,632</u> <u>- 36,513</u>		0504	2.7990	0.0413	1.5130
<u>36,514</u> - <u>39,842</u>		0507	4.7291	0.0695	2.7815
<u>39,843</u> <u>- 46,318</u>		0508	2.7944	0.0419	0.9108
46,319 and higher		0509	1.9037	0.0285	0.6854
		0510	3.4088	0.0504	1.7479
<u>REPEALER</u>		0511	2.6316	0.0392	1.1009
The following section of th	e Washington Administrative	0512	1.9045	0.0282	0.9236
Code is repealed:		0513	1.4585	0.0217	0.6383
WAC 296-17- 2007 Claim	-free experience modifica-	0514	2.5593	0.0380	1.2124
86507 tion phase-	in limitation.	0516	2.3594	0.0351	1.0193
		0517	3.3980	0.0503	1.6781
AMENDATORY SECTION (Amending WSR 15-24-103,	0518	2.2738	0.0340	0.8114
filed 12/1/15, effective 1/1/16)	2.12	0519	2.5438	0.0378	1.1504
base rates, stay at work and	rial insurance accident fund medical aid base rates by	0521	0.7784	0.0115	0.4142
class of industry. Industrial ins	surance accident fund, stay at	0601	0.8239	0.0122	0.3840
work and medical aid fund ba	se rates by class of industry	0602	1.2313	0.0185	0.3969
shall be as set forth below.		0603	1.1868	0.0177	0.4674
			-11000		3

[67] Proposed

Base Rates Effective January 1, ((2016)) 2017

Base Rates Effective January 1, ((2016)) 2017

January 1, ((2016)) <u>2017</u>					January 1, ((2016)) <u>2017</u>				
~	Accident	Stay at	Medical Aid		Accident	Stay at	Medical Aid		
Class	Fund	Work	Fund	Class	Fund	Work	Fund		
0604	1.5799	0.0232	0.9516	2008	0.5275	0.0077	0.3242		
0606	0.8550	0.0125	0.5151	2009	0.4400	0.0064	0.3286		
0607	1.1467	0.0169	0.5962	2101	0.8950	0.0130	0.6469		
0608	0.5122	0.0076	0.2528	2102	0.9786	0.0144	0.5758		
0701	3.1705	0.0480	0.7342	2104	0.3564	0.0050	0.3895		
0803	0.8089	0.0119	0.4380	2105	0.9420	0.0138	0.5638		
0901	2.2738	0.0340	0.8114	2106	0.6301	0.0092	0.4334		
1002	1.3452	0.0199	0.6940	2201	0.3517	0.0051	0.2471		
1003	1.1189	0.0165	0.5846	2202	1.0962	0.0162	0.5981		
1004	0.7864	0.0117	0.3478	2203	0.6481	0.0094	0.4811		
1005	13.5684	0.2023	5.5618	2204	0.3517	0.0051	0.2471		
1006	0.1945	0.0029	0.1186	2401	0.6261	0.0093	0.3022		
1007	0.4946	0.0074	0.1988	2903	0.9674	0.0141	0.6688		
1101	1.2577	0.0186	0.6337	2904	1.0196	0.0150	0.5486		
1102	2.3381	0.0348	0.9722	2905	0.8026	0.0117	0.5217		
1103	1.8321	0.0272	0.8601	2906	0.5260	0.0076	0.3879		
1104	0.9360	0.0137	0.6012	2907	0.6905	0.0101	0.4432		
1105	1.2527	0.0185	0.6279	2908	1.5534	0.0227	1.0506		
1106	0.3896	0.0056	0.2978	2909	0.5593	0.0081	0.3896		
1108	0.8053	0.0118	0.4764	3101	1.1105	0.0163	0.6270		
1109	2.0578	0.0302	1.2149	3102	0.4036	0.0059	0.2254		
1301	0.8617	0.0128	0.3728	3103	0.7077	0.0104	0.3985		
1303	0.3693	0.0054	0.2084	3104	1.0061	0.0149	0.5322		
1304	0.0397	0.0006	0.0214	3105	1.0508	0.0154	0.6807		
1305	0.7025	0.0104	0.3824	3303	0.5848	0.0086	0.3522		
1401	0.3124	0.0045	0.2583	3304	0.7064	0.0102	0.5671		
1404	1.1051	0.0162	0.7059	3309	0.6034	0.0089	0.3610		
1405	1.2095	0.0178	0.7006	3402	0.6977	0.0103	0.3938		
1407	0.7721	0.0113	0.4994	3403	0.2854	0.0042	0.1579		
1501	0.9933	0.0147	0.5112	3404	0.6644	0.0097	0.4327		
1507	0.8761	0.0129	0.5109	3405	0.4127	0.0060	0.2602		
1701	1.1621	0.0173	0.5365	3406	0.3667	0.0053	0.2692		
1702	2.8421	0.0427	0.8830	3407	1.1291	0.0168	0.5071		
1703	1.6898	0.0254	0.4850	3408	0.3120	0.0046	0.2029		
1704	1.1621	0.0173	0.5365	3409	0.2023	0.0029	0.1483		
1801	0.6859	0.0101	0.3588	3410	0.2399	0.0035	0.1897		
1802	1.1261	0.0166	0.6063	3411	0.7320	0.0108	0.3794		
2002	1.2579	0.0185	0.6931	3412	0.9619	0.0143	0.4285		
2004	0.9284	0.0136	0.5935	3414	1.0814	0.0159	0.6117		
2007	0.9561	0.0140	0.6427	3415	1.2304	0.0182	0.6147		
			- ·						

Proposed [68]

Base Rates Effective January 1, ((2016)) <u>2017</u>

Base Rates Effective January 1, ((2016)) <u>2017</u>

	January 1, ((2010)) <u>2017</u>				January 1, ((2010)) <u>2017</u>				
Class	Accident Fund	Stay at Work	Medical Aid Fund	Class	Accident Fund	Stay at Work	Medical Aid Fund		
3501	1.5252	0.0225	0.8591	4803	0.3786	0.0054	0.3855		
3503	0.3986	0.0057	0.3339	4804	0.6443	0.0093	0.5351		
3506	1.3645	0.0203	0.6099	4805	0.4837	0.0070	0.3697		
3509	0.5338	0.0078	0.3830	4806	0.0980	0.0014	0.0965		
3510	0.4558	0.0066	0.3286	4808	0.6372	0.0093	0.4162		
3511	0.9481	0.0139	0.5815	4809	0.4239	0.0061	0.3599		
3512	0.5083	0.0074	0.3612	4810	0.2165	0.0031	0.2106		
3513	0.7906	0.0115	0.5914	4811	0.4485	0.0064	0.4212		
3602	0.1330	0.0019	0.0903	4812	0.5259	0.0076	0.3982		
3603	0.6969	0.0101	0.5006	4813	0.2317	0.0033	0.2085		
3604	0.9507	0.0138	0.7051	4814	0.1394	0.0019	0.1705		
3605	0.8017	0.0118	0.4305	4815	0.2586	0.0036	0.3547		
3701	0.4036	0.0059	0.2254	4816	0.4163	0.0058	0.4743		
3702	0.6520	0.0095	0.4143	4900	0.2883	0.0043	0.1145		
3708	0.9935	0.0146	0.5715	4901	0.0751	0.0011	0.0363		
3802	0.3038	0.0044	0.2170	4902	0.1686	0.0025	0.1057		
3808	0.6381	0.0094	0.3180	4903	0.2406	0.0035	0.1566		
3901	0.1681	0.0024	0.1624	4904	0.0281	0.0004	0.0212		
3902	0.5792	0.0084	0.4424	4905	0.4850	0.0069	0.4809		
3903	1.4429	0.0209	1.1278	4906	0.1581	0.0023	0.0932		
3905	0.1656	0.0024	0.1574	4907	0.0788	0.0011	0.0645		
3906	0.6193	0.0090	0.4719	4908	0.1292	0.0018	0.1180		
3909	0.4212	0.0061	0.3310	4909	0.0519	0.0007	0.0594		
4101	0.4753	0.0070	0.2703	4910	0.6322	0.0093	0.3869		
4103	0.7712	0.0113	0.4903	4911	0.1013	0.0015	0.0566		
4107	0.2558	0.0037	0.1638	5001	13.1762	0.1715	5.1261		
4108	0.2385	0.0035	0.1626	5002	0.9029	0.0133	0.4978		
4109	0.2814	0.0041	0.1861	5003	3.4011	0.0509	1.2099		
4201	1.0902	0.0163	0.4413	5004	1.1077	0.0162	0.7035		
4301	0.9707	0.0141	0.7096	5005	1.1768	0.0174	0.5883		
4302	1.1607	0.0169	0.7700	5006	2.3251	0.0348	0.8760		
4304	1.2214	0.0176	0.9657	5101	1.5376	0.0228	0.7039		
4305	1.9366	0.0288	0.8278	5103	1.0261	0.0149	0.7813		
4401	0.5786	0.0084	0.4264	5106	1.0261	0.0149	0.7813		
4402	1.0447	0.0153	0.6459	5108	1.0931	0.0160	0.7252		
4404	0.6870	0.0100	0.4524	5109	0.9929	0.0148	0.4324		
4501	0.2368	0.0034	0.1771	5201	0.5246	0.0077	0.2903		
4502	0.0718	0.0010	0.0482	5204	1.5790	0.0234	0.7280		
4504	0.1420	0.0020	0.1194	5206	0.6273	0.0093	0.3160		
4802	0.4256	0.0061	0.3364	5207	0.1970	0.0028	0.1706		

[69] Proposed

Base Rates Effective January 1, ((2016)) <u>2017</u>

Base Rates Effective January 1, ((2016)) <u>2017</u>

January 1, ((2010)) <u>2017</u>					Janu	ary 1, ((2010))) <u>2017</u>
Class	Accident Fund	Stay at Work	Medical Aid Fund	Class	Accident Fund	Stay at Work	Medical Aid Fund
5208	1.0786	0.0158	0.6465	6408	0.7330	0.0107	0.4634
5209	0.9984	0.0147	0.5407	6409	1.0069	0.0149	0.5251
5300	0.1443	0.0021	0.0970	6410	0.4597	0.0068	0.2641
5301	0.0481	0.0007	0.0315	6501	0.1773	0.0026	0.1192
5302	0.0168	0.0002	0.0097	6502	0.0424	0.0006	0.0313
5305	0.0694	0.0010	0.0524	6503	0.1112	0.0016	0.0587
5306	0.0601	0.0009	0.0446	6504	0.4104	0.0059	0.3823
5307	1.1204	0.0166	0.5344	6505	0.1656	0.0023	0.1734
5308	0.1321	0.0019	0.0922	6506	0.1612	0.0023	0.1230
6103	0.1122	0.0016	0.1042	6509	0.3893	0.0056	0.3443
6104	0.6899	0.0101	0.4125	6510	0.7005	0.0104	0.3306
6105	0.5769	0.0085	0.3154	6511	0.4974	0.0072	0.3732
6107	0.1573	0.0022	0.1646	6512	0.1623	0.0024	0.0915
6108	0.5007	0.0072	0.4077	6601	0.2900	0.0042	0.1958
6109	0.1546	0.0023	0.0905	6602	0.7300	0.0105	0.5855
6110	0.8297	0.0121	0.5324	6603	0.4235	0.0062	0.2491
6120	0.4743	0.0070	0.2540	6604	0.1141	0.0017	0.0863
6121	0.5252	0.0077	0.2827	6605	0.4171	0.0061	0.2713
6201	0.4551	0.0067	0.2565	6607	0.1878	0.0027	0.1359
6202	1.0257	0.0151	0.6093	6608	1.0871	0.0163	0.3495
6203	0.1297	0.0018	0.1456	6620	4.8971	0.0724	2.4879
6204	0.1719	0.0025	0.1380	6704	0.1649	0.0024	0.1145
6205	0.2757	0.0040	0.2157	6705	0.9212	0.0131	0.8952
6206	0.2743	0.0040	0.2067	6706	0.3764	0.0054	0.3086
6207	1.7120	0.0248	1.3212	6707	7.7372	0.1105	7.1401
6208	0.3102	0.0044	0.2801	6708	9.8205	0.1374	11.4189
6209	0.3796	0.0055	0.3175	6709	0.3508	0.0051	0.2707
6301	0.2005	0.0030	0.0911	6801	1.2517	0.0186	0.5423
6303	0.1002	0.0015	0.0591	6802	0.8867	0.0129	0.6189
6304	0.3680	0.0053	0.3211	6803	1.1875	0.0179	0.3649
6305	0.1302	0.0019	0.1124	6804	0.4082	0.0059	0.3066
6306	0.4757	0.0070	0.2957	6809	7.1619	0.1021	6.7781
6308	0.0939	0.0014	0.0547	6901	0.0000	0.0000	0.0724
6309	0.2666	0.0039	0.1891	6902	1.4694	0.0219	0.5913
6402	0.3658	0.0053	0.2839	6903	11.0791	0.1650	4.6682
6403	0.2208	0.0032	0.1851	6904	1.3383	0.0199	0.5571
6404	0.3489	0.0050	0.2956	6905	0.9098	0.0135	0.4361
6405	0.7437	0.0110	0.4179	6906	0.0000	0.0000	0.4361
6406	0.1498	0.0022	0.1295	6907	1.5819	0.0232	1.0062
6407	0.3302	0.0048	0.2531	6908	0.5471	0.0080	0.3404

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Base Rates Effective January 1, ((2016)) 2017

Base Rates Effective January 1, ((2016)) 2017

	January I, ((2016)) <u>2017</u>				January I, ((2016)) <u>2017</u>			
Class	Accident Fund	Stay at Work	Medical Aid Fund	Class	Accident Fund	Stay at Work	Medical Aid Fund	
6909	0.1667	0.0024	0.1136	<u>0107</u>	1.7006	0.0211	0.6772	
7100	0.0461	0.0007	0.0306	<u>0108</u>	1.8295	0.0227	0.7578	
7101	0.0392	0.0006	0.0207	<u>0112</u>	1.2815	0.0158	0.5869	
7103	1.2067	0.0179	0.5774	<u>0201</u>	<u>2.6509</u>	0.0330	0.9603	
7104	0.0415	0.0006	0.0294	0202	4.5318	0.0562	1.8083	
7105	0.0286	0.0004	0.0194	<u>0210</u>	1.5559	0.0193	0.6048	
7106	0.3237	0.0047	0.2684	<u>0212</u>	2.2337	0.0277	0.8897	
7107	0.3161	0.0045	0.3116	<u>0214</u>	<u>2.2797</u>	0.0283	0.8903	
7108	0.2288	0.0033	0.1917	<u>0217</u>	2.3252	0.0287	1.0175	
7109	0.1747	0.0025	0.1357	<u>0219</u>	1.6025	0.0199	<u>0.6085</u>	
7110	0.5087	0.0075	0.2532	<u>0301</u>	<u>1.1526</u>	<u>0.0140</u>	0.7395	
7111	0.7520	0.0112	0.3008	0302	4.2424	<u>0.0530</u>	1.3361	
7112	1.0311	0.0149	0.7750	<u>0303</u>	3.3597	<u>0.0417</u>	1.2889	
7113	0.5300	0.0077	0.4211	0306	1.5630	<u>0.0194</u>	0.6044	
7114	0.8922	0.0128	0.7940	<u>0307</u>	<u>1.4771</u>	0.0182	0.6587	
7115	0.6259	0.0090	0.5072	0308	0.8341	<u>0.0101</u>	0.6035	
7116	0.8205	0.0120	0.5399	<u>0403</u>	<u>2.9460</u>	0.0363	<u>1.4074</u>	
7117	1.5763	0.0229	1.1192	<u>0502</u>	<u>2.1526</u>	0.0267	<u>0.8678</u>	
7118	2.3664	0.0345	1.5911	<u>0504</u>	<u>3.2428</u>	0.0399	<u>1.6134</u>	
7119	2.1305	0.0313	1.2741	<u>0507</u>	4.6968	0.0574	<u>2.6924</u>	
7120	8.8198	0.1294	5.3400	<u>0508</u>	<u>2.5332</u>	<u>0.0315</u>	<u>0.8716</u>	
7121	8.2248	0.1206	5.0221	<u>0509</u>	<u>1.7971</u>	0.0224	<u>0.6111</u>	
7122	0.5097	0.0074	0.3575	<u>0510</u>	<u>3.5215</u>	0.0432	<u>1.8904</u>	
7200	2.8311	0.0421	1.2377	<u>0511</u>	<u>2.6000</u>	0.0322	<u>1.1059</u>	
7201	2.7347	0.0406	1.2863	<u>0512</u>	<u>2.0333</u>	0.0251	<u>0.9585</u>	
7202	0.0442	0.0007	0.0246	<u>0513</u>	<u>1.4317</u>	0.0177	<u>0.6531</u>	
7203	0.1393	0.0019	0.1765	<u>0514</u>	<u>2.4678</u>	0.0304	<u>1.1964</u>	
7204	0.0000	0.0000	0.0000	<u>0516</u>	<u>2.3940</u>	0.0295	<u>1.0934</u>	
7205	0.0000	0.0000	0.0000	<u>0517</u>	<u>3.2987</u>	<u>0.0406</u>	<u>1.6066</u>	
7301	0.6403	0.0093	0.4662	<u>0518</u>	<u>2.0352</u>	0.0252	0.8089	
7302	1.2874	0.0188	0.8796	<u>0519</u>	<u>2.3835</u>	<u>0.0294</u>	<u>1.0616</u>	
7307	0.5846	0.0085	0.4478	<u>0521</u>	<u>0.7144</u>	0.0087	<u>0.4142</u>	
7308	0.4049	0.0058	0.3519	<u>0601</u>	<u>0.7969</u>	0.0098	<u>0.3761</u>	
7309	0.3367	0.0048	0.2965	<u>0602</u>	1.2512	<u>0.0156</u>	<u>0.3781</u>	
7400	3.2558	0.0484	1.4233))	<u>0603</u>	<u>1.1781</u>	0.0146	<u>0.4489</u>	
<u>0101</u>	2.0580	<u>0.0256</u>	0.7658	<u>0604</u>	<u>1.6168</u>	<u>0.0197</u>	<u>0.9501</u>	
<u>0103</u>	2.5692	<u>0.0316</u>	1.2290	<u>0606</u>	0.8590	<u>0.0105</u>	<u>0.5159</u>	
<u>0104</u>	<u>1.8295</u>	0.0227	0.7578	<u>0607</u>	<u>1.1992</u>	<u>0.0148</u>	0.5792	
<u>0105</u>	<u>1.7703</u>	<u>0.0216</u>	<u>1.0355</u>	<u>0608</u>	<u>0.5663</u>	<u>0.0070</u>	<u>0.2613</u>	
<u>0106</u>	<u>2.9443</u>	0.0362	<u>1.5174</u>	<u>0701</u>	3.2217	0.0405	0.7242	

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Base Rates Effective January 1, ((2016)) <u>2017</u>

Base Rates Effective January 1, ((2016)) <u>2017</u>

	January 1, ((2010)) <u>2017</u>					January 1, ((2010)) <u>2017</u>			
Class	Accident Fund	Stay at Work	Medical Aid Fund	Class	Accident Fund	Stay at Work	Medical Aid Fund		
0803	0.8093	0.0099	0.4283	<u>2105</u>	1.0010	0.0122	0.5764		
<u>0901</u>	2.0352	0.0252	0.8089	<u>2106</u>	0.6200	0.0075	0.4265		
1002	1.3935	0.0171	0.6864	<u>2201</u>	0.3616	0.0044	0.2470		
1003	1.1075	0.0136	<u>0.5685</u>	2202	1.0820	0.0133	0.5606		
1004	0.7763	0.0096	0.3278	<u>2203</u>	0.6663	0.0080	0.4829		
1005	13.7685	0.1707	<u>5.5453</u>	<u>2204</u>	0.3616	0.0044	0.2470		
1006	0.2513	0.0031	<u>0.1414</u>	2401	0.6072	0.0075	0.2902		
1007	0.4917	0.0061	0.2087	2903	1.0102	0.0122	0.7130		
1101	1.3664	0.0168	0.6804	2904	1.0556	0.0130	0.5360		
1102	2.4542	0.0304	1.0118	<u>2905</u>	0.7793	0.0095	0.4917		
1103	1.7373	0.0214	0.8103	<u>2906</u>	0.5638	0.0068	0.4209		
1104	0.9512	0.0116	0.6129	2907	0.6885	0.0084	0.4351		
1105	1.2824	0.0158	0.6345	<u>2908</u>	1.4720	0.0178	1.0336		
1106	0.3966	0.0048	0.3060	2909	0.5631	0.0068	0.3959		
1108	0.7854	0.0096	0.4577	3101	1.1516	0.0141	0.6173		
1109	2.0093	0.0246	1.1530	3102	0.4552	0.0056	0.2386		
<u>1301</u>	0.8954	0.0111	<u>0.3681</u>	<u>3103</u>	0.6917	0.0085	0.3851		
<u>1303</u>	<u>0.4184</u>	0.0051	0.2188	<u>3104</u>	1.0116	0.0124	0.5387		
<u>1304</u>	0.0383	0.0005	0.0197	<u>3105</u>	1.0447	0.0127	0.7018		
<u>1305</u>	0.7221	0.0089	0.3774	<u>3303</u>	0.5822	0.0071	0.3426		
<u>1401</u>	0.3181	0.0038	0.2750	<u>3304</u>	0.7218	0.0087	0.5808		
<u>1404</u>	<u>1.0871</u>	0.0132	0.6630	<u>3309</u>	0.6092	0.0074	0.3781		
<u>1405</u>	<u>1.2451</u>	<u>0.0152</u>	0.6870	<u>3402</u>	0.7221	<u>0.0088</u>	0.4072		
<u>1407</u>	0.7834	0.0095	0.5130	<u>3403</u>	0.2787	0.0034	<u>0.1516</u>		
<u>1501</u>	<u>1.0585</u>	0.0130	0.5079	<u>3404</u>	<u>0.6831</u>	0.0083	<u>0.4385</u>		
<u>1507</u>	<u>0.8995</u>	0.0110	<u>0.5165</u>	<u>3405</u>	<u>0.4263</u>	0.0052	<u>0.2692</u>		
<u>1701</u>	<u>1.1392</u>	0.0141	<u>0.5089</u>	<u>3406</u>	<u>0.3632</u>	0.0044	<u>0.2640</u>		
<u>1702</u>	<u>2.8357</u>	0.0354	<u>0.8684</u>	<u>3407</u>	<u>1.2103</u>	<u>0.0150</u>	<u>0.5370</u>		
<u>1703</u>	<u>1.6782</u>	0.0210	<u>0.4978</u>	<u>3408</u>	<u>0.3161</u>	0.0039	<u>0.1936</u>		
<u>1704</u>	<u>1.1392</u>	0.0141	0.5089	<u>3409</u>	<u>0.2048</u>	0.0025	<u>0.1485</u>		
<u>1801</u>	<u>0.7086</u>	0.0087	0.3479	<u>3410</u>	<u>0.2291</u>	0.0028	<u>0.1784</u>		
<u>1802</u>	<u>1.1395</u>	<u>0.0140</u>	<u>0.6004</u>	<u>3411</u>	<u>0.7626</u>	0.0094	0.3826		
<u>2002</u>	<u>1.3263</u>	<u>0.0163</u>	0.6972	<u>3412</u>	<u>0.9976</u>	0.0123	0.4325		
<u>2004</u>	<u>0.8956</u>	<u>0.0109</u>	0.5803	<u>3414</u>	<u>1.1035</u>	<u>0.0135</u>	0.6097		
<u>2007</u>	<u>1.0127</u>	0.0123	<u>0.6870</u>	<u>3415</u>	<u>1.2440</u>	0.0153	0.6093		
<u>2008</u>	<u>0.5324</u>	<u>0.0065</u>	0.3216	<u>3501</u>	<u>1.5518</u>	<u>0.0190</u>	0.8589		
<u>2009</u>	<u>0.4571</u>	<u>0.0055</u>	0.3371	<u>3503</u>	0.4337	0.0052	<u>0.3374</u>		
<u>2101</u>	0.8593	<u>0.0104</u>	0.6174	<u>3506</u>	<u>1.3183</u>	<u>0.0163</u>	<u>0.6128</u>		
<u>2102</u>	0.9908	<u>0.0121</u>	<u>0.5677</u>	<u>3509</u>	<u>0.5363</u>	<u>0.0065</u>	0.3797		
<u>2104</u>	0.3632	0.0042	<u>0.3946</u>	<u>3510</u>	<u>0.4603</u>	<u>0.0056</u>	0.3368		

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Base Rates Effective January 1, ((2016)) 2017

Base Rates Effective January 1, ((2016)) 2017

	Janu	ary I, ((2016	o)) <u>2017</u>		Janu	ary I, ((2016))) <u>2017</u>
Class	Accident Fund	Stay at Work	Medical Aid Fund	Class	Accident Fund	Stay at Work	Medical Aid Fund
<u>3511</u>	1.0217	0.0125	0.5933	<u>4809</u>	0.4551	0.0054	0.3884
<u>3512</u>	0.5477	0.0066	0.3773	<u>4810</u>	0.2237	0.0026	0.2115
<u>3513</u>	0.7840	0.0094	0.5803	<u>4811</u>	0.4645	0.0055	0.4535
<u>3602</u>	0.1281	0.0016	0.0859	<u>4812</u>	0.5497	0.0066	0.4121
<u>3603</u>	0.7101	0.0086	0.4967	<u>4813</u>	0.2326	0.0027	0.2282
<u>3604</u>	0.9650	0.0117	0.6867	<u>4814</u>	<u>0.1413</u>	0.0016	<u>0.1701</u>
<u>3605</u>	0.8130	<u>0.0100</u>	0.4289	<u>4815</u>	0.2622	0.0030	0.3537
<u>3701</u>	0.4552	<u>0.0056</u>	0.2386	<u>4816</u>	0.4222	0.0049	0.4729
<u>3702</u>	0.6297	0.0077	0.3979	<u>4900</u>	0.2820	<u>0.0035</u>	<u>0.1096</u>
<u>3708</u>	1.0181	<u>0.0124</u>	0.5763	<u>4901</u>	0.0730	0.0009	0.0349
<u>3802</u>	0.2922	<u>0.0035</u>	0.2111	<u>4902</u>	0.1737	<u>0.0021</u>	<u>0.1042</u>
<u>3808</u>	0.6612	0.0081	0.3245	<u>4903</u>	0.2437	0.0030	<u>0.1564</u>
<u>3901</u>	<u>0.1628</u>	0.0019	<u>0.1555</u>	<u>4904</u>	<u>0.0275</u>	0.0003	0.0203
<u>3902</u>	<u>0.6080</u>	0.0073	<u>0.4462</u>	<u>4905</u>	0.4841	0.0057	<u>0.4861</u>
<u>3903</u>	<u>1.4628</u>	<u>0.0176</u>	<u>1.1234</u>	<u>4906</u>	<u>0.1586</u>	0.0019	<u>0.0912</u>
<u>3905</u>	<u>0.1631</u>	0.0019	<u>0.1528</u>	<u>4907</u>	<u>0.0836</u>	<u>0.0010</u>	<u>0.0676</u>
<u>3906</u>	0.6338	<u>0.0076</u>	<u>0.4740</u>	<u>4908</u>	<u>0.1308</u>	<u>0.0016</u>	<u>0.1164</u>
<u>3909</u>	0.3898	0.0047	<u>0.3160</u>	<u>4909</u>	<u>0.0526</u>	0.0006	<u>0.0587</u>
<u>4101</u>	<u>0.4416</u>	0.0054	<u>0.2469</u>	<u>4910</u>	0.6853	0.0084	<u>0.3991</u>
<u>4103</u>	<u>0.7736</u>	0.0094	<u>0.4890</u>	<u>4911</u>	<u>0.1017</u>	0.0012	0.0577
<u>4107</u>	<u>0.2647</u>	0.0032	<u>0.1656</u>	<u>5001</u>	<u>12.6777</u>	0.1337	<u>5.2693</u>
<u>4108</u>	<u>0.2334</u>	0.0028	<u>0.1544</u>	<u>5002</u>	<u>0.9160</u>	0.0112	<u>0.4961</u>
<u>4109</u>	<u>0.2845</u>	0.0034	<u>0.1901</u>	<u>5003</u>	<u>3.4823</u>	0.0434	<u>1.2011</u>
<u>4201</u>	<u>1.1618</u>	<u>0.0144</u>	<u>0.4463</u>	<u>5004</u>	<u>1.1206</u>	0.0136	0.7262
<u>4301</u>	0.9881	0.0119	<u>0.7326</u>	<u>5005</u>	<u>1.1748</u>	0.0145	<u>0.5771</u>
<u>4302</u>	<u>1.2291</u>	<u>0.0149</u>	<u>0.8075</u>	<u>5006</u>	<u>2.3393</u>	0.0291	<u>0.8589</u>
<u>4304</u>	<u>1.2406</u>	0.0149	0.9977	<u>5101</u>	<u>1.5608</u>	0.0193	<u>0.6893</u>
<u>4305</u>	<u>2.0018</u>	0.0248	0.8313	<u>5103</u>	1.0373	0.0125	<u>0.7925</u>
<u>4401</u>	<u>0.5904</u>	<u>0.0071</u>	0.4312	<u>5106</u>	1.0373	0.0125	<u>0.7925</u>
<u>4402</u>	1.0659	0.0130	0.6362	<u>5108</u>	<u>1.1307</u>	0.0138	<u>0.6976</u>
<u>4404</u>	0.6938	<u>0.0084</u>	<u>0.4417</u>	<u>5109</u>	<u>1.0142</u>	<u>0.0126</u>	<u>0.4276</u>
<u>4501</u>	0.2369	<u>0.0029</u>	<u>0.1735</u>	<u>5201</u>	0.4970	<u>0.0061</u>	0.2690
<u>4502</u>	0.0788	<u>0.0010</u>	<u>0.0501</u>	<u>5204</u>	1.5917	<u>0.0197</u>	<u>0.6931</u>
<u>4504</u>	0.1443	<u>0.0017</u>	0.1178	<u>5206</u>	0.6559	0.0081	0.3235
<u>4802</u>	<u>0.4485</u>	<u>0.0054</u>	0.3560	<u>5207</u>	0.2067	<u>0.0025</u>	<u>0.1738</u>
<u>4803</u>	0.3872	<u>0.0046</u>	0.3944	<u>5208</u>	1.0826	0.0132	0.6373
<u>4804</u>	0.7098	<u>0.0085</u>	0.5863	<u>5209</u>	<u>1.0319</u>	<u>0.0127</u>	0.5300
<u>4805</u>	<u>0.5201</u>	0.0063	0.3874	<u>5300</u>	<u>0.1430</u>	0.0017	0.0923
<u>4806</u>	<u>0.1065</u>	0.0013	<u>0.1071</u>	<u>5301</u>	<u>0.0475</u>	<u>0.0006</u>	0.0303
<u>4808</u>	0.6289	0.0076	0.4189	<u>5302</u>	<u>0.0160</u>	0.0002	0.0089

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Base Rates Effective January 1, ((2016)) 2017

Base Rates Effective January 1, ((2016)) 2017

January 1, ((2016)) <u>2017</u>				January 1, ((2016)) <u>2017</u>			
	Accident	Stay at	Medical Aid		Accident	Stay at	Medical Aid
Class	Fund	Work	Fund	Class	Fund	Work	Fund
<u>5305</u>	<u>0.0705</u>	0.0009	<u>0.0512</u>	<u>6503</u>	<u>0.1162</u>	<u>0.0014</u>	<u>0.0616</u>
<u>5306</u>	<u>0.0600</u>	0.0007	<u>0.0447</u>	<u>6504</u>	<u>0.4125</u>	<u>0.0049</u>	<u>0.3872</u>
<u>5307</u>	1.0905	<u>0.0134</u>	<u>0.5053</u>	<u>6505</u>	0.1707	<u>0.0020</u>	0.1783
<u>5308</u>	<u>0.1211</u>	0.0015	<u>0.0886</u>	<u>6506</u>	<u>0.1668</u>	<u>0.0020</u>	<u>0.1236</u>
<u>6103</u>	<u>0.1173</u>	<u>0.0014</u>	<u>0.1035</u>	<u>6509</u>	<u>0.3854</u>	<u>0.0046</u>	<u>0.3315</u>
<u>6104</u>	0.7200	0.0088	<u>0.4293</u>	<u>6510</u>	<u>0.7040</u>	<u>0.0087</u>	0.3334
<u>6105</u>	<u>0.5658</u>	0.0069	<u>0.3116</u>	<u>6511</u>	<u>0.4672</u>	<u>0.0056</u>	0.3445
<u>6107</u>	<u>0.1592</u>	0.0019	<u>0.1710</u>	<u>6512</u>	<u>0.1486</u>	<u>0.0018</u>	0.0845
<u>6108</u>	0.4763	0.0057	<u>0.3824</u>	<u>6601</u>	0.2967	0.0036	<u>0.1942</u>
<u>6109</u>	<u>0.1708</u>	0.0021	<u>0.0912</u>	<u>6602</u>	<u>0.7864</u>	0.0094	<u>0.6139</u>
<u>6110</u>	<u>0.8412</u>	0.0103	<u>0.5082</u>	<u>6603</u>	<u>0.4286</u>	0.0052	0.2483
<u>6120</u>	<u>0.4694</u>	0.0058	<u>0.2521</u>	<u>6604</u>	<u>0.1231</u>	<u>0.0015</u>	0.0865
<u>6121</u>	<u>0.5305</u>	0.0065	<u>0.2732</u>	<u>6605</u>	0.3979	0.0048	<u>0.2524</u>
<u>6201</u>	<u>0.4875</u>	0.0060	<u>0.2614</u>	<u>6607</u>	0.1807	0.0022	<u>0.1310</u>
<u>6202</u>	1.0555	0.0129	<u>0.6137</u>	<u>6608</u>	<u>1.1024</u>	0.0138	0.3469
<u>6203</u>	0.1399	<u>0.0016</u>	<u>0.1530</u>	<u>6620</u>	4.9336	<u>0.0606</u>	2.5142
<u>6204</u>	0.1779	0.0021	<u>0.1353</u>	<u>6704</u>	0.1687	<u>0.0020</u>	0.1130
<u>6205</u>	0.2660	0.0032	0.2093	<u>6705</u>	0.9138	<u>0.0108</u>	0.8519
<u>6206</u>	0.2651	0.0032	<u>0.1974</u>	<u>6706</u>	0.3738	<u>0.0045</u>	0.2996
<u>6207</u>	1.7231	0.0208	<u>1.2551</u>	<u>6707</u>	<u>8.7474</u>	<u>0.1037</u>	<u>8.1717</u>
<u>6208</u>	0.2972	<u>0.0035</u>	0.2848	<u>6708</u>	10.0931	<u>0.1175</u>	11.5318
<u>6209</u>	0.3867	<u>0.0046</u>	<u>0.3154</u>	<u>6709</u>	0.3256	<u>0.0039</u>	0.2582
<u>6301</u>	0.2033	<u>0.0025</u>	0.0894	<u>6801</u>	1.2566	<u>0.0156</u>	0.4938
<u>6303</u>	0.0970	0.0012	0.0549	<u>6802</u>	1.0030	<u>0.0122</u>	0.6336
<u>6304</u>	0.3446	<u>0.0041</u>	<u>0.3107</u>	<u>6803</u>	1.2324	<u>0.0154</u>	0.3474
<u>6305</u>	0.1320	<u>0.0016</u>	<u>0.1074</u>	<u>6804</u>	0.3920	<u>0.0047</u>	0.2888
<u>6306</u>	0.4913	<u>0.0060</u>	<u>0.2951</u>	<u>6809</u>	7.0603	<u>0.0834</u>	6.8958
<u>6308</u>	0.0933	<u>0.0011</u>	0.0537	<u>6901</u>	0.0000	<u>0.0000</u>	0.0708
<u>6309</u>	0.2580	0.0031	<u>0.1841</u>	<u>6902</u>	1.4555	0.0180	0.6015
<u>6402</u>	0.3562	0.0043	0.2788	<u>6903</u>	11.2424	<u>0.1392</u>	4.6570
<u>6403</u>	0.2204	<u>0.0026</u>	<u>0.1777</u>	<u>6904</u>	1.4786	<u>0.0183</u>	0.6115
<u>6404</u>	0.3697	<u>0.0044</u>	<u>0.3143</u>	<u>6905</u>	0.9627	<u>0.0119</u>	0.4552
<u>6405</u>	0.7595	0.0093	<u>0.4209</u>	<u>6906</u>	0.0000	0.0000	0.4553
<u>6406</u>	0.1472	0.0018	<u>0.1243</u>	<u>6907</u>	1.5335	0.0187	0.9519
<u>6407</u>	0.3541	0.0043	<u>0.2533</u>	<u>6908</u>	0.5617	0.0069	0.3365
<u>6408</u>	0.7618	0.0093	<u>0.4677</u>	<u>6909</u>	0.1795	0.0022	0.1192
<u>6409</u>	1.0204	0.0125	<u>0.5240</u>	<u>7100</u>	0.0467	0.0006	0.0303
<u>6410</u>	0.4828	0.0059	0.2697	<u>7101</u>	0.0409	0.0005	0.0208
<u>6501</u>	0.1654	0.0020	<u>0.1060</u>	<u>7103</u>	1.2471	0.0154	0.5832
<u>6502</u>	0.0413	0.0005	0.0288	<u>7104</u>	0.0397	0.0005	0.0275

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Base Rates Effective January 1, ((2016)) <u>2017</u>

Base Rates Effective January 1, ((2016)) <u>2017</u>

Class	Accident Fund	Stay at Work	Medical Aid Fund	Class		cident 'und	Stay at Work	Medical Aid Fund
<u>7105</u>	0.0293	0.0004	0.0186	<u>7308</u>	<u>0.</u>	<u>3816</u>	0.0045	0.3352
<u>7106</u>	0.3201	0.0038	0.2665	<u>7309</u>	<u>0.</u>	<u>3554</u>	0.0042	0.3003
<u>7107</u>	0.3217	0.0038	0.3259	<u>7400</u>	<u>3.</u>	<u> 2913</u>	0.0408	1.3419
<u>7108</u>	<u>0.2385</u>	0.0029	0.1918					
<u>7109</u>	<u>0.1766</u>	0.0021	0.1322			,	Amending V	VSR 15-24-103,
<u>7110</u>	<u>0.5264</u>	0.0065	0.2828	filed 12/1/	15, effectiv	ve 1/1/16)		
<u>7111</u>	<u>0.7514</u>	0.0093	0.2919	WAC	296-17-8	9502 Ind	ustrial insu	rance accident
<u>7112</u>	<u>1.1744</u>	0.0142	0.8422					emental pension
<u>7113</u>	0.5787	0.0070	0.4452	•		•	•	rated classifica-
<u>7114</u>	0.9044	0.0108	0.7814					or classifications
<u>7115</u>	0.6771	0.0081	0.5260	wnose pro worked.	emium raid	es are base	a on units (other than hours
<u>7116</u>	0.8150	0.0099	0.5054	worked.		D D-4 1	F. 66 4:	
<u>7117</u>	<u>1.6565</u>	0.0200	<u>1.1670</u>		J	Base Rates lanuary 1, ((2		
<u>7118</u>	<u>2.4174</u>	0.0294	1.5363		Accident	Stay at	Medical	Supplemental
<u>7119</u>	<u>2.1109</u>	0.0258	1.2557	Class ((0540	Fund 0.0444	Work 0.0007	Aid Fund 0.0188	Pension Fund 0.0008
<u>7120</u>	<u>8.9451</u>	<u>0.1091</u>	5.3213	((0340 0541	0.0444 0.0199	0.0007	0.0188	0.0008
<u>7121</u>	<u>8.3095</u>	0.1013	4.9825	0550	0.0497	0.0007	0.0205	0.0008
<u>7122</u>	<u>0.5505</u>	0.0067	0.3669	0551	0.0241	0.0004	0.0093	0.0008))
<u>7200</u>	<u>2.8620</u>	0.0355	<u>1.1668</u>	<u>0540</u>	0.0408	0.0005	0.0178	0.0008
<u>7201</u>	2.7034	0.0334	1.2130	<u>0541</u>	0.0185	0.0002	0.0087	0.0008
<u>7202</u>	0.0447	0.0005	0.0252	<u>0550</u>	0.0547	0.0007	0.0225	0.0008
<u>7203</u>	0.1397	0.0016	0.1727	<u>0551</u>	0.0254	0.0003	0.0102	0.0008
<u>7204</u>	0.0000	0.0000	0.0000	AMEND	ATODA CI	CTION (A 1: V	WCD 15 24 102
<u>7205</u>	0.0000	0.0000	0.0000		15, effective		Amending v	VSR 15-24-103,
<u>7301</u>	0.6831	0.0082	0.5020					
<u>7302</u>	<u>1.3284</u>	0.0161	0.8846				_	tes. Horse racing
<u>7307</u>	0.5904	0.0071	<u>0.4428</u>	•	ical aid fur			nd, stay at work on fund and com-

Base Rates Effective January 1, ((2016)) 2017

Class	Accident Fund	Stay at Work Fund	Medical Aid Fund	Supplemental Pension Fund	Composite Rate
((6618	80.00*	2.00*	67.00*	1.00*	150.00*
6625	77.40**	1.29**	71.36**	9.52**	159.57**
6626	0.7005***	0.0122***	0.7821***	0.0952***	1.59***
6627	9.7021****	0.1617****	8.9822****	0.7140****	19.56****))
<u>6618</u>	80.00*	<u>2.00*</u>	<u>67.00*</u>	<u>1.00*</u>	<u>150.00*</u>
<u>6625</u>	76.10**	1.05**	70.83**	9.60**	157.58**
<u>6626</u>	0.6998***	0.0091***	0.7351***	0.0960***	1.5400***
<u>6627</u>	9.7975****	0.1347****	8.7478****	0.7200****	19.4000****

^{*}This rate is calculated on a percentage of ownership in a horse or horses.

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- **This rate is calculated per month.
- ***This rate is calculated per horse per day.
- ****This rate is calculated per day.

Note: These rates are not subject to experience rating or retrospective rating.

AMENDATORY SECTION (Amending WSR 15-24-103, filed 12/1/15, effective 1/1/16)

WAC 296-17-920 Assessment for supplemental pension fund. The amount of ((47.6 mils (\$0.0476))) 48.0 mils (\$0.0480) shall be retained by each employer from the earnings of each worker for each hour or fraction thereof the worker is employed. The amount of money so retained from the employee shall be matched in an equal amount by each employer, except as otherwise provided in these rules, all such moneys shall be remitted to the department on or before the last day of January, April, July, and October of each year for the preceding calendar quarter, provided self-insured employers shall remit to the department as provided under WAC 296-15-229. All such moneys shall be deposited in the supplemental pension fund.

((For the purpose of partially funding the Logger Safety initiative, the 47.6 mils (\$0.0476) will be increased by 1.9 mils (\$0.0019) to 49.5 mils (\$0.0495) per hour for each employer and worker for work reported in the forest products risk elassifications: 1002, 1003, 1004, 1005, 2401, 2903, 2904, 2905, 2907, 2909, 5001, 5002, 5003, 5004, 5005, 5006, and 6902. Each of these risk classifications are defined under chapter 296-17A WAC and incorporated here by this reference. (See section 217(6), chapter 4, Laws of 2013 2nd sp. sess.)))

<u>AMENDATORY SECTION</u> (Amending WSR 15-24-103, filed 12/1/15, effective 1/1/16)

WAC 296-17B-540 Determining loss incurred for each claim. (1) Calculating the initial loss incurred:

For each of your claims, we will multiply the case incurred loss by the appropriate discounted loss development factors to determine the initial loss incurred.

If you have a fatality, we will use three hundred ((seven thousand)) sixteen thousand seven hundred dollars as the claim's initial incurred loss for the claim, with two hundred ((seventy-six thousand six)) eighty-three thousand three hundred dollars for accident fund incurred loss and ((thirty)) thirty-three thousand four hundred dollars for the medical aid incurred loss, regardless of the case incurred loss, and before recovery factors if applicable.

(2) Applying the single loss occurrence limit:

The initial loss incurred for a claim will be the amount we use as the loss incurred unless the single loss occurrence limit applies.

The single loss occurrence limit applies when the sum of all initial losses incurred for your claims arising out of a single event is greater than your selected single loss occurrence limit. In that case, each claim's initial loss incurred will be its proportionate share of your single loss occurrence limit.

(3) Applying the expected loss ratio factors:

The preliminary loss incurred for a claim will be the amount of the initial loss incurred, after application of the single loss limit, multiplied by the appropriate expected loss ratio factor. The accident fund and medical aid fund portions

of each claim will have separate expected loss ratio factors applied.

AMENDATORY SECTION (Amending WSR 15-24-103, filed 12/1/15, effective 1/1/16)

WAC 296-17B-900 Retrospective rating plans standard premium size ranges.

RETROSPECTIVE RATING STANDARD PREMIUM SIZE RANGES Effective January 1, ((2016)) 2017

Size Group Number	Standard P	remium 1	Range
	From:		To:
((1	6,070	-	7,089
2	7,090	-	8,029
3	8,030	-	9,029
4	9,030	_	10,119
5	10,120	-	11,279
6	11,280	-	12,519
7	12,520	-	13,839
8	13,840	_	15,249
9	15,250	-	16,739
10	16,740	-	18,309
11	18,310	-	19,979
12	19,980	-	21,769
13	21,770	-	23,659
14	23,660	_	25,659
15	25,660	_	27,769
16	27,770	-	30,019
17	30,020	-	32,389
18	32,390	-	34,909
19	34,910	_	37,559
20	37,560	-	40,379
21	40,380	-	43,379
22	43,380	-	46,559
23	46,560	-	49,929
24	49,930	-	53,519
25	53,520	-	57,329
26	57,330	-	61,389
27	61,390	-	65,699
28	65,700	-	70,299
29	70,300	-	75,189
30	75,190	-	80,419
31	80,420	_	86,009
32	86,010	-	91,999
33	92,000	-	98,429
2.4	09.420		105 200

98.430 -

105,299

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Size Group Number	Standard Prem	ium Range	Size Group Number	Standard Premiu	m Range
	From:	To:		From:	To:
35	105,300 -	112,699	<u>3</u>	<u>8,090 -</u>	<u>9,099</u>
36	112,700 -	120,699	<u>4</u>	<u>9,100 -</u>	<u>10,199</u>
37	120,700 -	129,399	<u>5</u>	<u>10,200</u> <u>-</u>	<u>11,369</u>
38	129,400 -	138,599	<u>6</u>	<u>11,370 -</u>	<u>12,619</u>
39	138,600 -	148,699	<u>7</u>	<u>12,620 -</u>	13,949
40	148,700 -	159,499	<u>8</u>	<u>13,950</u> <u>-</u>	<u>15,369</u>
41	159,500 -	171,099	<u>9</u>	<u>15,370</u> <u>-</u>	16,869
42	171,100 -	183,599	<u>10</u>	<u>16,870</u> -	18,459
43	183,600 -	196,999	<u>11</u>	<u>18,460</u> -	20,139
44	197,000 -	211,799	<u>12</u>	<u>20,140 - </u>	21,939
45	211,800 -	227,599	<u>13</u>	<u>21,940 -</u>	23,849
46	227,600 -	244,799	<u>14</u>	<u>23,850</u> <u>-</u>	25,869
47	244,800 -	263,399	<u>15</u>	<u>25,870</u> <u>-</u>	27,989
48	263,400 -	283,999	<u>16</u>	<u>27,990 -</u>	30,259
49	284,000 -	306,399	<u>17</u>	<u>30,260 - </u>	32,649
50	306,400 -	330,999	<u>18</u>	<u>32,650 - </u>	<u>35,189</u>
51	331,000 -	358,099	<u>19</u>	<u>35,190</u> <u>-</u>	<u>37,859</u>
52	358,100 -	388,399	<u>20</u>	<u>37,860</u> <u>-</u>	40,699
53	388,400 -	422,099	<u>21</u>	<u>40,700</u> <u>-</u>	43,729
54	422,100 -	4 59,699	<u>22</u>	<u>43,730</u> <u>-</u>	46,929
55	459,700 -	501,999	<u>23</u>	<u>46,930 -</u>	50,329
56	502,000 -	550,099	<u>24</u>	<u>50,330</u> <u>-</u>	53,949
57	550,100 -	604,499	<u>25</u>	<u>53,950</u> <u>-</u>	<u>57,789</u>
58	604,500 -	667,199	<u>26</u>	<u>57,790</u> <u>-</u>	<u>61,879</u>
59	667,200 -	739,399	<u>27</u>	<u>61,880 -</u>	66,229
60	739,400 -	823,799	<u>28</u>	<u>66,230</u> <u>-</u>	<u>70,859</u>
61	823,800 -	922,999	<u>29</u>	<u>70,860 -</u>	<u>75,789</u>
62	923,000 -	1,040,999	<u>30</u>	<u>75,790 -</u>	81,059
63	1,041,000 -	1,184,999	<u>31</u>	<u>81,060</u> <u>-</u>	86,699
64	1,185,000 -	1,359,999	<u>32</u>	<u>86,700</u> <u>-</u>	92,739
65	1,360,000 -	1,579,999	<u>33</u>	<u>92,740 -</u>	<u>99,219</u>
66	1,580,000 -	1,864,999	<u>34</u>	<u>99,220</u> <u>-</u>	<u>106,099</u>
67	1,865,000 -	2,239,999	<u>35</u>	<u>106,100</u> -	<u>113,599</u>
68	2,240,000 -	2,763,999	<u>36</u>	<u>113,600 -</u>	<u>121,699</u>
69	2,764,000 -	3,535,999	<u>37</u>	<u>121,700 - </u>	130,399
70	3,536,000 -	4,809,999	<u>38</u>	<u>130,400</u> <u>-</u>	139,699
71	4,810,000 -	7,207,999	<u>39</u>	<u>139,700</u> -	149,899
72	7,208,000 -	13,189,999	<u>40</u>	<u>149,900</u> <u>-</u>	160,799
73	13,190,000 -	33,749,999	<u>41</u>	<u>160,800</u> <u>-</u>	<u>172,499</u>
74	33,750,000 -	and over))	<u>42</u>	<u>172,500</u> <u>-</u>	185,099
<u>1</u>	<u>6,120</u> <u>-</u>	<u>7,149</u>	<u>43</u>	<u>185,100</u> -	<u>198,599</u>
<u>2</u>	<u>7,150</u> <u>-</u>	<u>8,089</u>	<u>44</u>	<u>198,600</u> <u>-</u>	<u>213,499</u>

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Size Group Number	Standard Pr	rem	ium Range
	From:		To:
<u>45</u>	<u>213,500</u>	=	229,399
<u>46</u>	<u>229,400</u>	=	<u>246,799</u>
<u>47</u>	<u>246,800</u>	=	<u>265,499</u>
<u>48</u>	<u>265,500</u>	=	<u>286,299</u>
<u>49</u>	<u>286,300</u>	=	308,899
<u>50</u>	<u>308,900</u>	=	333,599
<u>51</u>	<u>333,600</u>	=	360,999
<u>52</u>	<u>361,000</u>	=	<u>391,499</u>
<u>53</u>	<u>391,500</u>	=	<u>425,499</u>
<u>54</u>	<u>425,500</u>	=	463,399
<u>55</u>	<u>463,400</u>	=	<u>505,999</u>
<u>56</u>	<u>506,000</u>	=	<u>554,499</u>
<u>57</u>	<u>554,500</u>	=	609,299
<u>58</u>	609,300	=	672,499
<u>59</u>	<u>672,500</u>	=	745,299
<u>60</u>	745,300	=	830,399
<u>61</u>	<u>830,400</u>	=	930,399
<u>62</u>	930,400	=	<u>1,048,999</u>
<u>63</u>	1,049,000	=	<u>1,193,999</u>
<u>64</u>	<u>1,194,000</u>	=	1,370,999
<u>65</u>	1,371,000	=	<u>1,592,999</u>
<u>66</u>	1,593,000	=	<u>1,879,999</u>
<u>67</u>	<u>1,880,000</u>	=	<u>2,257,999</u>
<u>68</u>	<u>2,258,000</u>	=	<u>2,785,999</u>
<u>69</u>	<u>2,786,000</u>	=	3,563,999
<u>70</u>	3,564,000	=	<u>4,847,999</u>
<u>71</u>	4,848,000	=	7,265,999
<u>72</u>	7,266,000	=	13,299,999
<u>73</u>	13,300,000	=	34,019,999
<u>74</u>	34,020,000	Ξ	and over

WSR 16-19-079 PROPOSED RULES DEPARTMENT OF HEALTH

(Dental Quality Assurance Commission) [Filed September 20, 2016, 10:31 a.m.]

Original Notice.

Preproposal statement of inquiry was filed as WSR 15-23-005.

Title of Rule and Other Identifying Information: WAC 246-817-550 Acts that may be performed by licensed dental hygienists under general supervision and 246-817-560 Acts that may be performed by licensed dental hygienists under close supervision, the proposed rules add three new tasks

under general supervision, and clarifies when close or general supervision is appropriate for administering local anesthetic.

Hearing Location(s): Department of Health, Point Plaza East, Room 152/153, 310 Israel Road S.E., Tumwater, WA 98501, on October 28, 2016, at 8:05 a.m.

Date of Intended Adoption: October 28, 2016.

Submit Written Comments to: Jennifer Santiago, P.O. Box 47852, Olympia, WA 98504-7852, e-mail https://fortress.wa.gov/doh/policyreview, fax (360) 236-2901, by October 21, 2016.

Assistance for Persons with Disabilities: Contact Jennifer Santiago by October 21, 2016, TTY (800) 833-6388 or 711.

Purpose of the Proposal and Its Anticipated Effects, Including Any Changes in Existing Rules: The proposed rules update the listing of allowable duties a dentist may delegate to a licensed dental hygienist under general and close supervision. The proposed rules add three new tasks to general supervision and duplicate one task from close supervision in general supervision. Close supervision requires the dentist to be physically present in the treatment facility during the performance of a delegated task while general supervision does not.

Reasons Supporting Proposal: Dental hygienists routinely treat patients under general supervision. The commission evaluated and researched dental hygienist education and training related to administering local anesthetic and medical emergencies. The commission determined dental hygienists are properly trained. Adding administering local anesthetic under general supervision will better serve dental patients with consistent treatment and appointment availability. RCW 18.29.050 allows the commission to adopt rules to identify specific allowable impressions that may be performed by dental hygienists.

Statutory Authority for Adoption: RCW 18.32.0365 and 18.29.050.

Statute Being Implemented: RCW 18.32.0365 and 18.29.050.

Rule is not necessitated by federal law, federal or state court decision.

Name of Proponent: Washington state dental quality assurance commission, governmental.

Name of Agency Personnel Responsible for Drafting, Implementation, and Enforcement: Jennifer Santiago, 111 Israel Road S.E., Tumwater, WA 98501, (360) 236-4893.

No small business economic impact statement has been prepared under chapter 19.85 RCW. The proposed rule would not impose more than minor costs on businesses in an industry.

A cost-benefit analysis is required under RCW 34.05.328. A preliminary cost-benefit analysis may be obtained by contacting Jennifer Santiago, P.O. Box 47852, Olympia, WA 98501, phone (360) 236-4893, fax (360) 236-2901, e-mail jennifer.santiago@doh.wa.gov.

September 20, 2016 C. Madden, Chair Dental Quality Assurance Commission

Proposed [78]

AMENDATORY SECTION (Amending WSR 14-12-057, filed 5/30/14, effective 6/30/14)

- WAC 246-817-550 Acts that may be performed by licensed dental hygienists under general supervision. A dentist may allow a dental hygienist licensed under ((the provisions of)) chapter 18.29 RCW to perform the following acts under the dentist's general supervision:
 - (1) Head and neck examination.
- (2) Oral inspection and measuring of periodontal pockets, with no diagnosis.
 - $((\frac{2}{2}))$ (3) Patient education in oral hygiene.
 - (((3))) (4) Take intra-oral and extra-oral radiographs.
- $((\frac{4}{1}))$ (5) Apply topical preventive or prophylactic agents.
- (((5))) (6) Administer local anesthetic agents and adjunctive procedures if all conditions in (a) through (d) of this subsection are met. Adjunctive procedures include local anesthetic reversal agents and buffered anesthetic.
 - (a) The patient is at least eighteen years of age;
- (b) The patient has been examined by the delegating dentist within the previous twelve months;
- (c) There has been no change in the patient's medical history since the last examination. If there has been a change in the patient's medical history within that time, the dental hygienist must consult with the dentist before administering local anesthetics;
- (d) The delegating dentist who performed the examination has approved the patient for the administration of local anesthetics by a dental hygienist under general supervision and documented this approval in the patient's record;
- (e) If any of the conditions in (a) through (d) of this subsection are not met, then close supervision is required.
 - (7) Polish and smooth restorations.
- $((\frac{(6)}{(6)}))$ (8) Oral prophylaxis and removal of deposits and stains from the surfaces of the teeth.
 - $(((\frac{7}{1})))$ (9) Record health histories.
- (((8))) (10) Take and record blood pressure and vital signs.
- (((9))) (11) Perform sub-gingival and supra-gingival scaling.
 - (((10))) (12) Perform root planing.
 - (((11))) (13) Apply sealants.
 - (((12))) (14) Apply topical anesthetic agents.
- (15) Deliver oral antibiotic prophylaxis as prescribed by a dentist.
- (16) Take impressions, bite registration, or digital scans of the teeth and jaws for:
 - (a) Diagnostic and opposing models;
- (b) Fixed and removable orthodontic appliances, occlusal guards, bleaching trays, and fluoride trays; and
- (c) Temporary indirect restorations such as temporary crowns.

AMENDATORY SECTION (Amending WSR 06-14-018, filed 6/23/06, effective 7/24/06)

WAC 246-817-560 Acts that may be performed by licensed dental hygienists under close supervision. In addition to the acts ((performed under)) allowed in WAC 246-817-520 and 246-817-550, a dentist may allow a dental

hygienist licensed under ((the provisions of)) chapter 18.29 RCW to perform the following acts under the dentist's close supervision:

- (1) Perform soft-tissue curettage.
- (2) ((Give injections of a local anesthetic.)) Administer local anesthetic agents and adjunctive procedures.
- (a) General supervision is allowed if all conditions in WAC 246-817-550 (6)(a) through (d) are met.
- (b) Adjunctive procedures include local anesthetic reversal agents and buffered anesthetic.
- (3) Place restorations into the cavity prepared by the dentist, and thereafter could carve, contour, and adjust contacts and occlusion of the restoration.
 - (4) Administer nitrous oxide analgesia.
 - (5) Place antimicrobials.

WSR 16-19-080 PROPOSED RULES SUPERINTENDENT OF PUBLIC INSTRUCTION

[Filed September 20, 2016, 12:04 p.m.]

Original Notice.

Preproposal statement of inquiry was filed as WSR 16-16-081.

Title of Rule and Other Identifying Information: Finance—Special allocations, WAC 392-140-973 Salary bonus for teachers and other certificated staff who hold current certification by the national board—Eligibility.

Hearing Location(s): Office of Superintendent of Public Instruction (OSPI), Policy Conference Room, 600 Washington Street S.E., Olympia, WA 98501, on October 26, 2016, at 11:00 a.m.

Date of Intended Adoption: October 28, 2016.

Submit Written Comments to: Ross Bunda, OSPI, P.O. Box 47200, Olympia, WA 98504, e-mail ross.bunda@k12.wa.us, fax (360) 664-3638, by October 26, 2016.

Assistance for Persons with Disabilities: Contact Kristin Murphy by October 19, 2016, TTY (360) 664-3631 or (360) 725-6133.

Purpose of the Proposal and Its Anticipated Effects, Including Any Changes in Existing Rules: These rule revisions provide updates regarding which new schools operating during their first year may qualify as challenging, high poverty schools for purposes of the national board bonus.

Statutory Authority for Adoption: RCW 28A.150.-290(1).

Statute Being Implemented: RCW 28A.405.415.

Rule is not necessitated by federal law, federal or state court decision.

Name of Agency Personnel Responsible for Drafting: Ross Bunda, OSPI, (360) 725-6308; Implementation and Enforcement: T. J. Kelly, OSPI, (360) 725-6301.

No small business economic impact statement has been prepared under chapter 19.85 RCW. Not applicable - no small business impact; no school district fiscal impact.

A cost-benefit analysis is not required under RCW 34.05.328. The superintendent of public instruction is not

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subject to RCW 34.05.328 per subsection (5)(a)(i). Additionally, this rule is not a significant legislative rule per subsection (5)(c)(iii).

September 20, 2016 Randy Dorn State Superintendent of Public Instruction

AMENDATORY SECTION (Amending WSR 15-18-078, filed 8/28/15, effective 9/28/15)

- WAC 392-140-973 Salary bonus for teachers and other certificated instructional staff who hold current certification by the national board—Eligibility. Staff that are eligible for the bonus shall be limited to those meeting the following requirements:
- (1) Hold current certification by the national board for professional teaching standards during the entire school year, unless otherwise specified in the state Biennial Operating Appropriations Act; and
 - (2) Who are:
- (a) Teachers and other certificated instructional staff employed full time or part time under written contract by Washington public school districts or educational service districts pursuant to RCW 28A.405.210; ((or))
- (b) Teachers and other certificated instructional staff employed full time or part time by a contractor pursuant to WAC 392-121-188 and 392-121-206 (2)(a); ((or))
- (c) Teachers and other certificated instructional staff employed full time or part time by the Washington school for the deaf or Washington school for the blind; or
- (d) Teachers and other certificated instructional staff employed full time or part time by a charter school.
- (3) In addition to bonuses provided by subsection (2) of this section, teachers and other certificated instructional staff shall be eligible for additional bonuses if in an instructional assignment in challenging, high poverty schools, subject to the following conditions and limitations:
- (a) Challenging, high poverty schools are schools where, for the prior year, the student headcount enrollment eligible for the federal free or reduced price lunch program was at least:
 - (i) 70 percent for elementary schools;
 - (ii) 60 percent for middle schools; or
- (iii) 50 percent for high schools; as determined by the October 1st count of the comprehensive education data and research system (CEDARS) or successor data collection and reporting systems, of the office of superintendent of public instruction, on May 1st of that prior year: Provided, That schools operating during the current school year as their first year may qualify as challenging, high poverty schools based upon current year data, as determined by the October 1st count on May 1st of the current year.
- (b) For purposes of the national board challenging, high poverty schools bonus, a school shall be categorized based upon the highest grade served as follows:
- (i) A school whose highest grade served is 6th grade or lower shall be considered an elementary school;
- (ii) A school whose highest grade served is either 7th, 8th, or 9th grade shall be considered a middle school;

- (iii) A school whose highest grade served is either 10th, 11th, or 12th grade shall be considered a high school.
- (c) A school shall be considered only if it serves thirty or more students, or is the largest school in the district serving its designated category.
- (d) Schools that provide institutional education programs pursuant to WAC 392-122-205 shall be designated as challenging, high poverty schools with the student headcount enrollment eligible for the federal free or reduced price lunch program at one hundred percent and shall not be subject to the requirement in this subsection of serving thirty or more students
- (e) The student enrollment data used shall include the state-funded students in kindergarten through twelfth grade, plus prekindergarten students in special education.
- (f) Teachers and other certificated instructional staff that meet the qualifications for the challenging, high poverty schools bonus under this subsection who are assigned for less than one full school year or less than full time for the school year shall receive the challenging, high poverty schools bonus in a prorated manner, subject to the following conditions and limitations:
- (i) The portion of the employee's assignment to challenging, high poverty schools shall be determined as of June 15th of the school year.
- (ii) If the employee's assignment to challenging, high poverty schools is less than 1.0 full-time equivalent, the proration shall use the methodology in WAC 392-121-212 and shall be rounded to three decimal places.

WSR 16-19-081 PROPOSED RULES SUPERINTENDENT OF PUBLIC INSTRUCTION

[Filed September 20, 2016, 12:11 p.m.]

Original Notice.

Preproposal statement of inquiry was filed as WSR 16-16-080

Title of Rule and Other Identifying Information: Chapter 392-141 WAC, Transportation—State allocation for operations.

Hearing Location(s): Office of Superintendent of Public Instruction (OSPI), Policy Room, 600 South Washington, Olympia, WA 98504-7200, on October 26, 2016, at 10:00 a.m.

Date of Intended Adoption: October 28, 2016.

Submit Written Comments to: Glenn Gorton, Director, OSPI, Student Transportation, P.O. Box 47200, Olympia, WA 98504-7200, e-mail glenn.gorton@k12.wa.us, by October 26, 2016.

Assistance for Persons with Disabilities: Contact Kristin Murphy by October 19, 2016, TTY (360) 664-3631 or (360) 725-6133.

Purpose of the Proposal and Its Anticipated Effects, Including Any Changes in Existing Rules: Revisions have been made to this chapter to include language for the trans-

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portation of students in foster care as required in ESEA section 1112 (c)(5)(B).

Statutory Authority for Adoption: RCW 28A.150.290.

Statute Being Implemented: ESEA section 1112 (c)(5)(B).

Rule is not necessitated by federal law, federal or state court decision.

Name of Agency Personnel Responsible for Drafting and Implementation: Glenn Gorton, OSPI, Student Transportation, (360) 725-6121; and Enforcement: Ken Kanikeberg, OSPI, Chief of Staff, (360) 725-6115.

No small business economic impact statement has been prepared under chapter 19.85 RCW. No small business impact and no school district fiscal impact.

A cost-benefit analysis is not required under RCW 34.05.328. OSPI is not subject to RCW 30.05.328 per subsection (5)(a)(i). Additionally, this rule is not a significant legislative rule under subsection (5)(c)(iii).

September 20, 2016
Randy Dorn
State Superintendent
of Public Instruction

AMENDATORY SECTION (Amending WSR 16-05-062, filed 2/12/16, effective 3/14/16)

- WAC 392-141-310 **Definitions.** The definitions in this section apply throughout this chapter unless the context clearly requires otherwise:
- (1) "Superintendent" means the superintendent of public instruction.
- (2) "District" means either a school district or an educational service district.
- (3) "Charter school" means a public school operating under the provisions of chapter 28A.710 RCW.
- (4) The definition of "school" includes learning centers or other agencies where educational services are provided.
- (5) "Eligible student" means any student served by a district or charter school transportation program either by bus, district car, or individual arrangements meeting one or more of the following criteria:
- (a) A student whose route stop is outside the walk area of the student's enrollment school site; or
- (b) A student whose disability is defined by RCW 28A.155.020 and who is either not ambulatory or not capable of protecting his or her own welfare while traveling to or from school.

Districts determine which students are provided with transportation services; however, only eligible students qualify for funding under the operations allocation.

(6) "To and from transportation" means all transportation between route stops and schools both before and after the school day. To and from transportation includes transportation between home and school and transportation between schools, commonly referred to as shuttles. Transportation not authorized for state allocations under this definition includes, but is not limited to, transportation for students participating in nonacademic extended day programs, field trips, and extracurricular activities.

- (7) "Home to school transportation" means all student transportation between route stops and schools both before and after the school day. Home to school transportation does not include transportation between schools.
- (8) "Basic program transportation" means students transported between home and school for their basic education. Basic program transportation includes those students who qualify under RCW 28A.155.020 for special services and are capable of protecting his or her own welfare while traveling to or from school and those students who are enrolled in gifted or bilingual programs or homeless students that do not require specialized transportation. Also included in basic program transportation is transportation required to comply with the school choice provisions of the Elementary and Secondary Education Act (ESEA).
- (9) "Special program transportation" means home to school transportation for one of the following specialized programs:
- (a) Special education programs provided for by chapter 28A.155 RCW and where transportation as a related service is included on the student's individual education plan or where transportation is required under the provisions of Section 504 of the Rehabilitation Act of 1973; or
- (b) Students who require special transportation to a bilingual program in a centralized location; or
- (c) Students who require special transportation to a gifted program in a centralized location; or
- (d) Students who require special transportation to their school of origin as required by the provisions of the McKinney-Vento Homeless Assistance Act or the foster care provisions in the ESEA Section 1112 (c)(5)(B); or
- (e) Students who require special transportation to a district operated head start, district operated early childhood education assistance program, or other district operated early education program.
- (10) "Private party contract" means the provision of home to school transportation service using a private provider (not in a school bus). Private party contracts shall require criminal background checks of drivers and other adults with unsupervised access to students and assurances that any students transported be provided with child safety restraint systems that are age and weight appropriate. Vehicles used must meet school bus specifications established in chapter 392-143 WAC if they have a manufacturer's design capacity of greater than ten passengers, including the driver. However, a vehicle manufactured to meet the federal specifications of a multifunction school activity bus may be used.
- (11) "In lieu transportation" means a contract to provide home to school transportation with a parent, guardian or adult student, including transportation on rural roads to access a school bus stop.
- (12) "Count period" is the three consecutive school day window used for establishing the reported student count on home to school routes.
- (13) The school year is divided into three "report periods," as follows: September October, November January, and February April. These report periods are also referred to respectively as the fall, winter and spring reports. The count period must not fall within five school days of the end of the report period.

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- (14) "Combined student count" is the total number of basic program or special program eligible student riders reported during each report period. The combined student counts for the determination of funding consist of the prorated basic program and special program student counts from the prior year's spring report and the current year's fall and winter reports. The prior school year's fall, winter and spring student counts are used for the determination of the efficiency rating. The combined student counts are prorated based on the number of months in the respective report period. For a charter school in the first year of operation, the current year fall count shall be used as the prior year spring count to determine the combined student count.
- (15) "Average distance to school" means the average of the distances from each school bus stop measured by the shortest road path to the assigned student's school of enrollment.
- (16) "Prorated average distance" is calculated by taking the average distance to school weighted by the number of months in the corresponding report period. The prorated average distance used in calculating district allocation consists of the prorated average distance from the prior year's spring report and the current year's fall and winter reports. The prior school year's fall, winter and spring average distances are used for the determination of the efficiency rating.
- (17) "Prorated number of destinations" is calculated by taking the number of learning centers a school district provides with home-to-school transportation service weighted by the number of months in the corresponding report period. The prorated number of destinations used in calculating district allocation consists of the prorated number of destinations from the prior year's spring report and the current year's fall and winter reports. The prior school year's fall, winter, and spring number of destinations are used for the determination of the efficiency rating.
- (18) "Land area" is the area of the school district in square miles, excluding water and public lands, as determined by the superintendent. For educational service districts, the land area value will be determined by the superintendent from the contiguous area provided with transportation service.
- (19) "Roadway miles" refers to the number of public roadway miles within the land area of the school district, as determined by the superintendent. For educational service districts, the roadway mile value will be determined by the superintendent from the roadway miles within the contiguous area provided with transportation service.
- (20) "Walk area" is defined as the area around a school where the shortest safe walking route to school is less than one mile.
- (21) "District car route" means to and from school transportation where a district motor pool vehicle (not a school bus) is used to transport an eligible student or students. Any regularly scheduled home to school transportation in a district car is required to be driven by an authorized school bus driver
- (22) "District car allocation" is calculated by multiplying the total annual district car route mileage by the rate of reimbursement per mile that is authorized for state employees for

- the use of private motor vehicles in connection with state business in effect on September 1st of each year.
- (23) A "low ridership district" is defined as a district with an annual student count less than two hundred eighteen students.
- (24) A "nonhigh" district is defined as a district meeting the eligibility requirements for a nonhigh district as established by the superintendent of public instruction's school apportionment and financial services section.
- (25) A "transportation cooperative" is defined as two or more districts sharing transportation operations administrative functions. An interdistrict agreement for the provision of maintenance services on school buses does not constitute a transportation cooperative for the purposes of this chapter, regardless if the agreement qualifies as a transportation cooperative under the provisions of chapter 392-346 WAC, unless shared operations administrative functions are also included in the interdistrict agreement. A transportation cooperative has the option of reporting as a single entity.
- (26) "Alternate funding system" means an additional funding system as provided in RCW 28A.160.191, defined by OSPI to adjust the allocation for low enrollment school districts, nonhigh school districts, school districts participating in interdistrict transportation cooperatives, and educational service districts operating special transportation services.
- (27) "Prior year expenditures" means the total of school district transportation operations costs for to-and-from transportation for the prior school year. All revenue reported in transportation except for the state allocation for transportation operations is deducted from reported costs, including in lieu of depreciation allocations under the provisions of WAC 392-142-245 for districts contracting transportation services. Any adjustments as a result of audits or other adjustments to prior year costs shall not be included unless those adjustments are correcting the actual cost of transportation operations for the prior year. The basis for the prior year expenditures shall be the district financial statement. School districts are only required to report adjustments not reflected in the annual financial statement.
- (28) "Expected allocation" means the initial amount of funding resulting from the regression analysis calculation.
- (29) "Adjusted allocation" means the expected allocation plus any alternate funding system, calendar, or legislative adjustments.
- (30) For a district, "actual allocation" means the lesser of the prior year expenditures including adjustments by the legislature or the adjusted allocation. For a charter school, the actual allocation is a final amount to be allocated for transportation services using the process described in this chapter, plus any funding provided under chapter 392-142 WAC.
- (31) "Efficiency evaluation" refers to the statistical evaluation of efficiency of a school district's transportation operation using linear programming of the data required by the funding formula and the number of buses used on home-to-school routes. Each school district is separately compared to an individualized statistical model of a district having similar site characteristics. The efficiency evaluation is expressed as a percentage efficiency rating.

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- (32) A district's "transportation funding percentage" is calculated by dividing the district's actual allocation by the district's prior year expenditures.
- (33) The "state median percent funded" is determined by calculating each district's transportation funding percentage and taking the median value by sorting the total number of reporting districts in descending order and selecting the middle value. If there is an even number of districts, the bottom value in the top half shall be used.

AMENDATORY SECTION (Amending WSR 16-05-062, filed 2/12/16, effective 3/14/16)

WAC 392-141-320 Reporting requirements. (1) Reports shall be submitted by each district or charter school to the superintendent no later than the last business day in October, the first business day in February, and the first business day in May. These reports shall reflect to the extent practical the planned student transportation program for the entire report period and which is in operation during the ridership count period. The superintendent shall have the authority to make modifications or adjustments in accordance with the intent of RCW 28A.160.150. Each district or charter school shall submit the data required on a timely basis as a condition to the continuing receipt of student transportation allocations.

- (2) In each report period, districts shall report such operational data and descriptions, as required by the superintendent to determine the operations allocation for each district, including:
 - (a) School bus route information;
 - (b) Student count information; and
- (c) An update to the estimated total car mileage for the current school year.
- (3) For the fall report, districts shall report to the superintendent as required:
- (a) An annual school bus mileage report including the total to and from school bus miles for the previous school year, and other categories as requested;
- (b) An annual report of each type of fuel purchased for student transportation service for the previous school year, including quantity and cost. This report shall be considered part of the district's annual financial statement for the purposes of RCW 28A.160.170(2); and
- (c) An annual report as required by RCW 28A.300.540 of the number of students transported to their school of origin as required by the McKinney-Vento Homeless Assistance Act and the foster care provisions in the ESEA Section 1112 (c)(5)(B) for the previous school year, and the total mileage and additional cost of such transportation. These costs may include, but are not limited to:
- (i) Transportation service that serves only student(s) under McKinney-Vento and the foster care provisions in the ESEA Section 1112 (c)(5)(B). Districts may determine costs based upon route mileage and an average per mile cost for operation of the bus or vehicle. Driver time may be taken from actual driver costs records if such records are maintained, or may be determined using an average driver costs factor.
- (ii) Incremental revisions in route at the start or end of a route to accommodate McKinney-Vento and foster care

transportation, if separately identified, may be included based upon route mileage and an average per mile cost for operation of the bus or vehicle.

- (iii) Costs for public transportation or other contracted services for transporting McKinney-Vento <u>and foster care</u> student(s).
- (iv) Nondriver transportation staff positions whose job duties are predominately overseeing or routing services to McKinney-Vento and foster care students. If the position duties encompass other non-McKinney-Vento and foster care areas, then only the costs directly related to McKinney-Vento and foster care transportation shall be included and such costs shall be determined using federal time and effort reporting procedures.

No indirect or allocated costs may be included in this reporting.

(4) In each report period, charter schools shall report student counts.

WSR 16-19-088 PROPOSED RULES DEPARTMENT OF SOCIAL AND HEALTH SERVICES

(Aging and Long-Term Support Administration)
[Filed September 20, 2016, 4:05 p.m.]

Original Notice.

Preproposal statement of inquiry was filed as WSR 16-16-013.

Title of Rule and Other Identifying Information: The department is proposing to add new WAC 388-71-0723 What is the adult day center's responsibility in the use of medical devices and restraints?, in chapter 388-71 WAC, Home and community services and programs, specifically related to adult day health and adult day care.

Hearing Location(s): Office Building 2, DSHS Head-quarters, 1115 Washington, Olympia, WA 98504 (public parking at 11th and Jefferson. A map is available at https://www.dshs.wa.gov/sesa/rules-and-policies-assistance-unit/driving-directions-office-bldg-2), on October 25, 2016, at 10:00 a.m.

Date of Intended Adoption: Not earlier than October 26, 2016.

Submit Written Comments to: DSHS Rules Coordinator, P.O. Box 45850, Olympia, WA 98504, e-mail DSHSRPAU RulesCoordinator@dshs.wa.gov, fax (360) 664-6185, by 5:00 p.m., October 25, 2016.

Assistance for Persons with Disabilities: Contact Jeff Kildahl, DSHS rules consultant, by October 11, 2016, phone (360) 664-6092, TTY (360) 664-6178, or e-mail KildaJA@dshs.wa.gov.

Purpose of the Proposal and Its Anticipated Effects, Including Any Changes in Existing Rules: The department is proposing to add a new section in chapter 388-71 WAC to define client rights regarding restraints, including physical restraints, chemical restraints, involuntary seclusion, and the use of medical devices.

[83] Proposed

Reasons Supporting Proposal: Refer to purpose statement above.

Statutory Authority for Adoption: RCW 74.08.090, 74.09.520.

Statute Being Implemented: RCW 74.39A.400.

Rule is not necessitated by federal law, federal or state court decision.

Name of Proponent: Department of social and health services, governmental.

Name of Agency Personnel Responsible for Drafting, Implementation, and Enforcement: Erika Parada, P.O. Box 45600, Olympia, WA 98504-5600, (360) 725-2450.

No small business economic impact statement has been prepared under chapter 19.85 RCW. The preparation of a small business economic impact statement is not required, as no new costs will be imposed on small businesses or nonprofits as a result of this rule amendment.

A cost-benefit analysis is not required under RCW 34.05.328. Rules are exempt per RCW 34.05.328 (5)(b)(v), rules the content of which is explicitly and specifically dictated by statute.

September 16, 2016 Katherine I. Vasquez Rules Coordinator

NEW SECTION

WAC 388-71-0723 What is the adult day center's responsibility in the use of medical devices and restraints? (1) Medical devices. Before the adult day center may use a medical device for any client, the adult day center must:

- (a) Review the client's assessment to determine the client's need for and use of a medical device;
- (b) Ensure the client's negotiated care plan includes the client's use of a medical device or devices;
- (c) Provide the client and family with enough information about the significance and level of safety risk associated with the use of the device to enable them to make an informed decision on whether or not to use the device; and
- (d) Ensure the medical device will not be used as a physical restraint for discipline or convenience.
- (2) **Physical restraints**. The adult day center must ensure that each client has a right to be free from physical restraints used for discipline or convenience.
 - (3) Chemical restraints.
- (a) For the purposes of this section, "chemical restraint" means the administration of any drug to manage a vulnerable adult's behavior in a way that reduces the safety risk to the vulnerable adult or others, has a temporary effect of restricting the vulnerable adult's freedom, and is not standard treatment for the vulnerable adult's medical or psychiatric condition.
- (b) The adult day center must ensure that each resident is free from chemical restraints.
- (4) **Involuntary seclusion**. The adult day center must ensure a resident's right to be free from involuntary seclusion or isolation against his or her will.
 - (5) **Prevention of abuse**. The adult day center must:
 - (a) Meet the requirements of chapter 74.34 RCW;

- (b) Ensure each resident's right to be free from abandonment, verbal, sexual, physical, and mental abuse, exploitation, financial exploitation, neglect, and involuntary seclusion:
- (c) Protect each resident who is an alleged victim of abandonment, verbal, sexual, physical, and mental abuse, exploitation, financial exploitation, neglect, and involuntary seclusion; and
- (d) Prevent future potential abandonment, verbal, sexual, physical, and mental abuse, exploitation, financial exploitation, neglect, and involuntary seclusion.

WSR 16-19-089 PROPOSED RULES NOXIOUS WEED CONTROL BOARD

[Filed September 20, 2016, 5:33 p.m.]

Original Notice.

Preproposal statement of inquiry was filed as WSR 16-50-090 [16-15-090].

Title of Rule and Other Identifying Information: Chapter 16-750 WAC, State noxious weed list and schedule of monetary penalties, the Washington state noxious weed control board (WSNWCB) is proposing to amend the state noxious weed list for 2017.

Specifically, the board is considering: To reclassify Ravenna grass, *Saccharum ravennae*, from a Class A to a Class B noxious weed, to be designated for control in regions.

Designate the two Class B noxious weeds hawkweeds in the Meadow subgenus and meadow knapweed in Pierce County.

Undesignate the Class B noxious weed myrtle spurge in Pierce County.

Hearing Location(s): The Confluence Technology Center, 285 Technology Center Way, Wenatchee, WA 98801, on November 1, 2016, at 1:00 - 2:00 p.m.

Date of Intended Adoption: November 30, 2016.

Submit Written Comments to: Alison Halpern, WSN-WCB, P.O. Box 42560, Olympia, WA 98504-2560, e-mail ahalpern@agr.wa.gov or noxiousweeds@agr.wa.gov, fax (360) 902-2094, by October 31, 2016.

Assistance for Persons with Disabilities: Contact Kittanya Locken, KLocken@agr.wa.gov, by October 28, 2016, TTY (800) 833-6388.

Purpose of the Proposal and Its Anticipated Effects, Including Any Changes in Existing Rules: The Washington state noxious weed list provides the basis for noxious weed control efforts for county noxious weed control boards and other entities. It also provides guidelines for WSNWCB. This proposal makes a few amendments to WAC 16-750-005 and 16-750-011.

Reasons Supporting Proposal: WSNWCB is charged with updating the state noxious weed list on an annual basis to ensure it accurately reflects the noxious weed control priorities and noxious weed distribution.

Statutory Authority for Adoption: Chapter 17.10 RCW. Statute Being Implemented: Chapter 17.10 RCW.

Proposed [84]

Common Name

floating primrose-willow

eggleaf spurge

flowering rush

garlic mustard

giant hogweed

Johnsongrass

meadow clary

oriental clematis

purple starthistle

((Ravenna grass

reed sweetgrass

ricefield bulrush

sage, Mediterranean

sage, clary

knapweed, bighead

knapweed, Vochin

goatsrue

hydrilla

kudzu

false brome

Scientific Name

Euphorbia oblongata

Ludwigia peploides

Butomus umbellatus

Alliaria petiolata

Galega officinalis

Hydrilla verticillata

Sorghum halepense

Centaurea nigrescens

Pueraria montana var.

Salvia pratensis

Clematis orientalis

Glyceria maxima

Salvia sclarea

Salvia aethiopis

Centaurea calcitrapa

Saccharum ravennae))

Schoenoplectus mucronatus

lobata

Centaurea macrocephala

Brachypodium sylvaticum

Heracleum mantegazzia-

Rule is not necessitated by federal law, federal or state court decision.

Name of Proponent: WSNWCB, governmental.

Name of Agency Personnel Responsible for Drafting, Implementation, and Enforcement: Alison Halpern, 1111 Washington Street S.E., Olympia, WA 98504, (360) 902-2053.

No small business economic impact statement has been prepared under chapter 19.85 RCW. RCW 19.85.030 (1)(a) requires that an agency prepare a small business economic impact statement for proposed rules that impose more than a minor cost on businesses in an industry. An analysis of the direct economic effects of the proposed rule amendments indicates that costs to small businesses would be reduced for the reclassification of Ravenna grass, and reduced, negligible, or none at all for the three Class B designation changes in Pierce County. A copy of the analysis can be obtained by contacting Alison Halpern, WSNWCB, P.O. Box 42560, Olympia, WA 98504-2560.

A cost-benefit analysis is not required under RCW 34.05.328. WSNWCB is not one of the agencies listed in this section.

> September 20, 2016 Alison Halpern **Executive Secretary**

AMENDATORY SECTION (Amending WSR 14-24-103, filed 12/2/14, effective 1/2/15)

WAC 16-750-005 State noxious weed list—Class A r

WAC 16-750-005 State noxious weed list—Class A noxious weeds.		silverleaf nightshade	Solanum elaeagnifolium	
Common Name Scientific Name		spurge flax	Thymelaea passerina	
		Syrian bean-caper	Zygophyllum fabago	
broom, French	Genista monspessulana	Texas blueweed	Helianthus ciliaris	
broom, Spanish	Spartium junceum	thistle, Italian	Carduus pycnocephalus	
common crupina	Crupina vulgaris	thistle, milk	Silybum marianum	
cordgrass, common	Spartina anglica		•	
cordgrass, dense-flowered	Spartina densiflora	thistle, slenderflower	Carduus tenuiflorus	
cordgrass, salt meadow	Spartina patens	variable-leaf milfoil	Myriophyllum heterophyl- lum	
cordgrass, smooth	Spartina alterniflora	wild four o'clock	Mirabilis nyctaginea	
dyer's woad	Isatis tinctoria		,	

AMENDATORY SECTION (Amending WSR 15-24-078, filed 11/30/15, effective 12/31/15)

WAC 16-750-011 State noxious weed list—Class B noxious weeds.

	Name		Will be a "Class B designate" in all lands lying within:
(1)	blueweed, Echium vulgare	(a)	regions 1, 2, 3, 4, 6
		(b)	region 5, except Spokane County
(2)	Brazilian elodea, Egeria densa	(a)	region 1, except Grays Harbor and Pacific counties
		(b)	region 2, except Kitsap and Snohomish counties
		(c)	King County of region 2, except lakes Dolloff, Fenwick, Union, Washington, and Sammamish, and the Sammamish River

[85] Proposed

Will be a "Class B designate" in all

lands lying within: Name (d) region 3, except Wahkiakum County (e) regions 4, 5, and 6 (3) bugloss, annual, Anchusa arvensis (a) regions 1, 2, 3, 4, and 6 region 5, except Spokane County (b) **(4)** bugloss, common, Anchusa offici-(a) regions 1, 2, 3, and 6 nalis (b) All of region 4 except those areas lying within the Entiat River Valley between the Columbia River confluence and Stormy Creek in Chelan County region 5, except Spokane County (c) (5)butterfly bush, Buddleja davidii The portion of Thurston County lying below the ordinary (a) high-water mark of the Nisqually River in region 2 (b) Cowlitz County of region 3 (6)camelthorn, Alhagi maurorum regions 1, 2, 3, 4, and 5 (a) (b) region 6, except Walla Walla County (7)common fennel, Foeniculum vulregion 1, except Jefferson County (a) gare (except bulbing fennel, F. vul-(b) region 2, except King and Skagit counties gare var. azoricum) (c) region 3, except Clark County regions 4, 5, and 6 (d) (8)common reed, Phragmites austraregions 1, 2, 3, and 4 (a) lis (nonnative genotypes only) (b) region 5, except Grant County (c) Asotin, Columbia, and Garfield counties of region 6 (9)Dalmatian toadflax, Linaria dalregions 1 and 2 (a) matica ssp. dalmatica region 3, except Cowlitz County (b) Adams and Lincoln counties of region 5 (c) Benton and Walla Walla counties of region 6 (d) (10)Eurasian watermilfoil, Myriophylregion 1, except Pacific and Mason counties (a) lum spicatum (b) Island and San Juan counties of region 2 Clark and Cowlitz counties of region 3 (c) (d) Chelan and Okanogan counties, and all lakes with public boat launches except Fan Lake in Pend Oreille County of region 4 Adams and Lincoln counties of region 5 (e) Asotin, Columbia, and Garfield counties of region 6 (f) (11)fanwort, Cabomba caroliniana regions 2, 4, 5, and 6 (a) (b) region 1, except Grays Harbor region 3, except Cowlitz County (c) region 1, except Grays Harbor and Pacific counties (12)gorse, *Ulex europaeus* (a) (b) regions 2, 3, 4, 5, 6 (13)grass-leaved arrowhead, Sagitregion 1, except Mason County (a) taria graminea (b) region 2, except Snohomish County regions 3, 4, 5, and 6 (c) (14)hairy willow-herb, Epilobium hir-(a) regions 1, 3, and 4 sutum (b) region 2, except Thurston and Whatcom counties

Proposed [86]

	Name		Will be a "Class B designate" in all
	Name	(a)	lands lying within: region 5, except Klickitat County
		(c) (d)	Asotin, Columbia, and Garfield counties of region 6
(15)	hawkweed oxtongue, Picris hiera-		regions 1, 2, 4, 5, and 6
(13)	cioides	(a) (b)	region 3, except Skamania County
(16)			regions 1, 3, and 6
(16)	hawkweed, orange, <i>Hieracium</i> aurantiacum	(a)	
		(b)	region 2, except Whatcom County
		(c)	region 4, except Pend Oreille and Stevens counties
(17)	1 d	(d)	region 5, except Kittitas and Spokane counties
(17)	hawkweeds: All nonnative species and hybrids of the Meadow subge-	(a)	region 1
	nus (<i>Pilosella</i>), including, but not	(b)	region 2, except ((Pierce and)) Thurston ((counties)) County
	limited to, mouseear (Hieraci-	(c)	region 3, except Cowlitz County
	umpilosella), pale (H. lactucella),	(d)	Chelan, Douglas, and Okanogan counties of region 4
	queen-devil (<i>H. glomeratum</i>), tall	(e)	region 5, except Klickitat and Spokane counties
sum), and yellow-devil (H. x fa	flagellare), yellow (H. caespitosum), and yellow-devil (H. x floribundum)	(f)	region 6
(18)	hawkweeds: All nonnative species	(a)	regions 1, 3, 5, and 6
	and hybrids of the Wall subgenus	(b)	region 2, except King, Skagit and Whatcom counties
lachenalii), European (H. sabaudum), polar (H. atra smooth (H. laevigatum), s (H. maculatum), and wall	limited to, common (Hieracium	(c)	region 4, except Stevens County
(19)	herb-Robert, Geranium robertia- num	(a)	regions 4, 5, and 6
(20)	hoary alyssum, Berteroa incana	(a)	regions 1, 2, 3, and 6
		(b)	region 4, except Pend Oreille County and those areas lying north of highway 20 in Ferry County
		(c)	region 5, except Klickitat County
(21)	houndstongue, Cynoglossum offic-	(a)	regions 1, 2, and 3
	inale	(b)	Chelan County of region 4
		(c)	Yakima, Grant and Adams counties of region 5
		(d)	Benton County of region 6
(22)	indigobush, Amorpha fruticosa	(a)	regions 1, 2, and 4
		(b)	Lewis and Skamania counties of region 3
		(c)	region 5, except Klickitat County
(23)	knapweed, black, Centaurea nigra	(a)	regions 1, 2, 3, 4, 5, and 6
(24)	knapweed, brown, Centaurea jacea	(a)	regions 1, 2, 3, 4, 5, and 6
(25)	knapweed, diffuse, Centaurea dif-	(a)	region 1, except Mason County
	fusa	(b)	region 2
		(c)	region 3, except Cowlitz County
		(c)	region 3, except Cowlitz County

[87] Proposed

Will be a "Class B designate" in all lands lying within:

Name			lands lying within:		
		(d)	Adams County of region 5		
(26)	knapweed, meadow, Centaurea x	(a)	regions 1 and 4		
	moncktonii	(b)	region 2, except ((Pierce and)) Whatcom ((eounties)) County		
		(c)	Thurston County of region 2, except below the ordinary high water mark of the Nisqually River		
		(d)	region 3, except Cowlitz County		
		(e)	region 5, except Kittitas and Klickitat counties		
		(f)	region 6, except Franklin and Walla Walla counties		
(27)	knapweed, Russian, Acroptilon	(a)	regions 1, 2, and 3		
	repens	(b)	Ferry and Pend Oreille counties of region 4		
		(c)	Lincoln, Spokane, and Whitman counties of region 5		
		(d)	Adams County of region 5, except for the area west of Highway 17 and north of Highway 26		
		(e)	Asotin and Garfield counties of region 6		
(28)	knapweed, spotted, Centaurea	(a)	region 1, except Grays Harbor		
	stoebe	(b)	region 2, except Whatcom County		
		(c)	region 3, except Cowlitz County		
		(d)	Ferry County of region 4		
		(e)	Adams, Grant and Yakima counties of region 5		
		(f)	region 6, except Columbia and Walla Walla counties		
(29)	knotweed, Bohemian, Polygonum	(a)	Island County of region 2		
	x bohemicum	(b)	Skamania County of region 3		
		(c)	region 4, except Stevens County		
		(d)	region 5, except Whitman and Yakima counties		
		(e)	region 6		
(30)	knotweed, giant, Polygonum	(a)	region 2, except King, Pierce, and Snohomish counties		
	sachalinense	(b)	region 3, except Cowlitz and Lewis counties		
		(c)	regions 4, 5, and 6		
(31)	knotweed, Himalayan, Polygonum	(a)	region 1, except Pacific County		
	polystachyum	(b)	region 2, except King and Pierce counties		
		(c)	Cowlitz, Lewis and Skamania counties of region 3		
		(d)	region 4, except Stevens County		
		(e)	regions 5 and 6		
(32)	knotweed, Japanese, Polygonum	(a)	Island, San Juan, and Whatcom counties of region 2		
	cuspidatum	(b)	Skamania County of region 3		
		(c)	region 4, except Okanogan and Stevens counties		
		(d)	region 5, except Spokane County		
		(e)	region 6		
(33)	kochia, Kochia scoparia	(a)	regions 1, 2, and 3		
		(b)	Stevens and Pend Oreille counties of region 4		
		(c)	Adams County of region 5		
(34)	lesser celandine, Ficaria verna	(a)	Snohomish County of region 2		
		(b)	Skamania County of region 3		

Proposed [88]

	Name		Will be a "Class B designate" in all lands lying within:
		(c)	Pend Oreille and Stevens counties of region 4
(35)	loosestrife, garden, <i>Lysimachia</i> vulgaris	(a)	regions 1, 2, 3, 4, 5, 6
(36)	loosestrife, purple, Lythrum sali-	(a)	Clallam and Jefferson counties of region 1
	caria	(b)	region 2, except Kitsap, Pierce, Skagit, and Snohomish counties
		(c)	Clark, Lewis, and Skamania counties of region 3
		(d)	region 4, except Douglas County
		(e)	region 5, except Grant and Spokane counties
		(f)	Columbia, Garfield, and Walla Walla counties of region 6
(37)	loosestrife, wand, Lythrum virga-	(a)	Clallam and Jefferson counties of region 1
	tum	(b)	region 2, except Kitsap, Pierce, Skagit, and Snohomish counties
		(c)	Clark, Lewis, and Skamania counties of region 3
		(d)	region 4, except Douglas County
		(e)	region 5, except Grant and Spokane counties
		(f)	Columbia, Garfield, and Walla Walla counties of region 6
(38)	parrotfeather, Myriophyllum	(a)	region 1, except Pacific County
	aquaticum	(b)	regions 2, 4, 5, and 6
		(c)	Clark and Skamania counties of region 3
(39)	perennial pepperweed, Lepidium	(a)	regions 1, 2, and 4
	latifolium	(b)	region 3, except Clark and Cowlitz counties
		(c)	Kittitas, Lincoln and Spokane counties of region 5
		(d)	Columbia and Garfield counties of region 6
(40)	poison hemlock, Conium macula-	(a)	Clallam, Mason, and Pacific counties of region 1
	tum	(b)	region 2, except King, Skagit, and Whatcom counties
		(c)	Clark and Skamania counties of region 3
		(d)	Chelan and Pend Oreille counties of region 4
		(e)	Grant, Kittitas and Lincoln counties of region 5
(41)	policeman's helmet, Impatiens	(a)	region 1, except Pacific County
	glandulifera	(b)	region 2, except Pierce, Thurston, and Whatcom counties
		(c)	region 3, except Clark County
		(d)	regions 4, 5, and 6
(42)	puncturevine, Tribulus terrestris	(a)	regions 1, 2, and 3
		(b)	Ferry, Pend Oreille, and Stevens counties of region 4
		(c)	region 5, except Grant, Klickitat, and Yakima counties
(43)	Ravenna grass, Saccharum raven-	<u>(a)</u>	Cowlitz County of region 3
	<u>nae</u>	<u>(b)</u>	region 4, except Chelan County
		<u>(c)</u>	region 5, except Grant and Yakima counties
		<u>(d)</u>	region 6, except Benton County
<u>(44)</u>	rush skeletonweed, Chondrilla	(a)	regions 1 and 3
	juncea	(b)	region 2, except Kitsap County

[89] Proposed

Will be a "Class B designate" in all lands lying within:

	Name		Will be a "Class B designate" in all lands lying within:
		(c)	region 4, except all areas of Stevens County south of Township 29
		(d)	Kittitas and Yakima counties of region 5, and Adams County, except those areas lying east of Sage Road, the western border of Range 36
		(e)	Asotin County of region 6
(((44)))	saltcedar, Tamarix ramosissima	(a)	regions 1, 3, 4, and 5
<u>(45)</u>	(unless intentionally planted prior	(b)	region 2, except King and Thurston counties
	to 2004)	(c)	region 6, except Benton and Franklin counties
(((45)))	Scotch broom, Cytisus scoparius	(a)	regions 4 and 6
<u>(46)</u>		(b)	region 5, except Klickitat County
(((46)))	shiny geranium, Geranium	(a)	regions 1, 2, 4, 5, and 6
<u>(47)</u>	lucidum	(b)	region 3, except Clark County
(((47)))	spurge laurel, Daphne laureola	(a)	region 1, except Clallam and Jefferson counties
<u>(48)</u>		(b)	region 2, except King, Kitsap, and Pierce counties
		(c)	region 3, except Skamania County
		(d)	regions 4, 5, and 6
(((48)))	spurge, leafy, Euphorbia esula	(a)	regions 1, 2, 3, and 4
<u>(49)</u>		(b)	region 5, except Spokane and Whitman counties
		(c)	region 6, except Columbia and Garfield counties
(((49)))	spurge, myrtle, Euphorbia myrsin-	(a)	region 1, except Clallam and Jefferson counties
<u>(50)</u>	ites	(b)	region 2, except King, Kitsap, Pierce, and Whatcom counties
		(c)	regions 3, 5, and 6
		(d)	region 4, except Okanogan and Stevens counties
(((50)))	sulfur cinquefoil, Potentilla recta	(a)	region 1
<u>(51)</u>		(b)	region 2, except Pierce and Thurston counties
		(c)	region 3, except Lewis and Skamania counties
		(d)	Adams, Grant, Lincoln, and Whitman counties of region 5
		(e)	region 6, except Asotin County
(((51)))	tansy ragwort, Senecio jacobaea	(a)	Island and San Juan counties of region 2
<u>(52)</u>		(b)	Clark and Wahkiakum counties of region 3
		(c)	regions 4 and 6
		(d)	region 5, except Klickitat County
(((52)))	thistle, musk, Carduus nutans	(a)	regions 1, 2, 3, and 6
<u>(53)</u>		(b)	region 4, except Douglas and Ferry counties
		(c)	region 5, except Kittitas County
(((53)))	thistle, plumeless, Carduus acan-	(a)	regions 1, 2, 3, 5, 6
<u>(54)</u>	thoides	(b)	region 4, except those areas north of State Highway 20 in Stevens County
(((54)))	thistle, Scotch, Onopordum acan-	(a)	regions 1, 2, and 3
<u>(55)</u>	thium	(b)	region 4, except Douglas County
		(c)	region 5, except Spokane and Whitman counties

Proposed [90]

Will be a "Class B designate"	in	all
lands lying within:		

			vin be a Class B designate in an
	Name		lands lying within:
(((55)))	velvetleaf, Abutilon theophrasti	(a)	regions 1, 2, 3, and 4
<u>(56)</u>		(b)	region 5, except Yakima County
		(c)	region 6, except Franklin County
(((56)))	water primrose, Ludwigia hexa-	(a)	regions 1, 2, 4, 5, and 6
<u>(57)</u>	petala	(b)	region 3, except Cowlitz County
(((57)))	white bryony, Bryonia alba	(a)	regions 1, 2, 3, and 4
<u>(58)</u>		(b)	region 5, except Whitman County
		(c)	Benton County of region 6
(((58)))	wild chervil, Anthriscus sylvestris	(a)	regions 1, 4, and 6
<u>(59)</u>		(b)	region 2, except Island and Whatcom counties
		(c)	Wahkiakum and Lewis counties of region 3
		(d)	region 5, except Whitman County
(((59)))	yellow archangel, Lamiastrum	(a)	Clallam County of region 1
<u>(60)</u>	galeobdolon	(b)	Island, San Juan, Skagit, and Whatcom counties of region 2
		(c)	Skamania and Wahkiakum counties of region 3
		(d)	regions 4, 5, and 6
(((60)))	yellow floating heart, Nymphoides	(a)	regions 1, 2, and 6
<u>(61)</u>	peltata	(b)	region 3, except Cowlitz County
		(c)	region 4, except Stevens County
		(d)	region 5, except Spokane County
(((61)))	yellow nutsedge, Cyperus esculen-	(a)	regions 1, 3, and 4
(62)	tus	(b)	region 2, except Skagit and Thurston counties
		(c)	region 5, except Klickitat and Yakima Counties
		(d)	region 6, except Franklin and Walla Walla counties
(((62)))	yellow starthistle, Centaurea sol-	(a)	regions 1, 2, and 3
(63)	stitialis	(b)	region 4, except T36 R38 in the area contained within Hwy 395/Hwy 20, Pingston Creek Road, and Highland Loop Road in Stevens County
		(c)	region 5, except Klickitat, and Whitman counties

WSR 16-19-094 PROPOSED RULES DEPARTMENT OF AGRICULTURE

[Filed September 21, 2016, 8:17 a.m.]

Original Notice.

Preproposal statement of inquiry was filed as WSR 16-15-098.

Title of Rule and Other Identifying Information: Chapter 16-86 WAC, Cattle and bison diseases in Washington state.

Hearing Location(s): Department of Agriculture, Conference Room 238, 21 North First Avenue, Yakima, WA 98902, on October 26, 2016, at 11:00 a.m.; and at the Department of Agriculture, Conference Room 259, 1111 Washington Street S.E., Olympia, WA 98504, on October 27, 2016, at 10:00 a.m.

Date of Intended Adoption: November 18, 2016.

Submit Written Comments to: Henri Gonzales, P.O. Box 42560, Olympia, WA 98504-2560, e-mail WSDARules Comments@agr.wa.gov, fax (360) 902-2092, by 5:00 p.m., October 27, 2016.

Assistance for Persons with Disabilities: Contact Washington state department of agriculture (WSDA) receptionist by October 17, 2016, TTY (800) 833-6388 or 711.

Purpose of the Proposal and Its Anticipated Effects, Including Any Changes in Existing Rules: The department is proposing to amend chapter 16-86 WAC to abolish Q fever testing requirements for raw milk dairies, update the adult vaccination tattoo definition, and modify the language to increase clarity and conform with current industry practices.

[91] Proposed

Reasons Supporting Proposal: Currently, Q fever testing required by the animal health program detects antibodies to Coxiella Burnetii. Antibody tests only determine past exposure to the agent rather than active shedding status. The testing does not determine if the animal is actively infected, and/or if the animal is shedding the organism in the milk. The risk of transmission is much more likely through contact with placental fluids and aborted fetuses than raw milk. Currently, there are no tests for Q fever commercially available that give reliable definitive results. No other states require Q fever testing.

Raw milk dairies will still be required to test their animals annually for brucellosis and tuberculosis. The department's food safety and consumer services division will still require product testing under chapter 15.36 RCW.

Statutory Authority for Adoption: RCW 16.36.040 and chapter 34.05 RCW.

Statute Being Implemented: Chapter 16.36 RCW.

Rule is not necessitated by federal law, federal or state court decision.

Name of Proponent: WSDA, governmental.

Name of Agency Personnel Responsible for Drafting and Implementation: Dr. Scott Haskell, Olympia, (360) 725-5762; and Enforcement: David Bangart, Olympia, (360) 902-1946.

No small business economic impact statement has been prepared under chapter 19.85 RCW. RCW 19.85.030(1) requires that WSDA prepare a small business economic impact statement (SBEIS) if proposed rules will impose more than minor costs on affected businesses or industry. The department has analyzed the economic effects of the proposed revisions and has concluded that they do not impose more than minor costs on small businesses in the regulated industry, and, therefore, a formal SBEIS is not required. The proposed amendments reduce requirements and eliminate costs for producers.

A cost-benefit analysis is not required under RCW 34.05.328. WSDA is not a listed agency in RCW 34.05.328 (5)(a)(i).

September 21, 2016 Lynn M. Briscoe Assistant Director

AMENDATORY SECTION (Amending WSR 16-01-132, filed 12/18/15, effective 1/18/16)

WAC 16-86-005 Definitions. In addition to the definitions found in RCW 16.36.005, the following definitions apply to this chapter:

"Accredited veterinarian" means a veterinarian licensed to practice veterinary medicine, surgery, and dentistry in the state of Washington and approved by the United States Department of Agriculture (USDA) Veterinary Services to participate in state-federal cooperative programs.

"Adult vaccination tattoo" means a tattoo in the right ear with the letters ((RAV)) RA, the United States registered V-shield, followed by the last digit of the year in which the vaccination was administered with RB-51 *Brucella* vaccine. An example is RAV2 for an adult vaccinated in 2012.

"Breed registry tattoo" means individual registry tattoos issued by breed associations.

"Brucellosis vaccine" means only those *Brucella abortus* products that are approved by and produced under license of the USDA for injection into cattle to enhance their resistance to brucellosis.

"Calfhood vaccination tattoo" means a tattoo in the right ear consisting of an R, the United States registered V-shield, and the last digit of the year in which the animal was vaccinated with RB-51 *Brucella* vaccine. An example is RV-shield2 for a calf vaccinated in 2012.

"Department" means the Washington state department of agriculture (WSDA).

"Director" means the director of WSDA or the director's authorized representative.

"Herd plan" means a written management agreement between the animal owner and the state veterinarian, with possible input from a private accredited veterinarian designated by the owner, in which each participant agrees to undertake actions specified in the herd plan to control the spread of infectious, contagious, or communicable disease within and from an infected herd and to work toward eradicating the disease in the infected herd.

"Official calfhood vaccinate" means female cattle between four and twelve months of age that are vaccinated with brucellosis vaccine at a calfhood dose (2cc subcutaneously) and officially individually identified.

"Official individual identification" means identifying an animal using USDA-approved devices or methods or an alternative form of identification agreed upon by the sending and receiving states, such as unique breed registry tattoos when accompanied by registration documentation. A group of animals may be identified by registered brands when accompanied by a certificate of inspection from a brand inspection authority recognized by the director when agreed upon by the sending and receiving states.

"Official Washington adult vaccinate" means female cattle over the age of twelve months that have resided in Washington state for ninety days or more and are vaccinated with a dose of brucellosis vaccine (2cc subcutaneously) under directions issued by the director.

"Premises" means a location where livestock are kept.

"Timed events" means competitive events that take place where time elapsed is the factor that determines the placing of individuals competing in the event.

"USDA" means the United States Department of Agriculture.

"Virgin bull" means a sexually intact male bovine less than eighteen months of age, as determined by dentition inspection by an accredited veterinarian or verified by breed registration documents, that is confirmed by a statement and the signature of the owner or the owner's designee as having had no breeding contact with female cattle.

AMENDATORY SECTION (Amending WSR 08-01-094, filed 12/17/07, effective 1/17/08)

WAC 16-86-008 Forms used in this chapter. Forms used in this chapter may be obtained from the department at:

Proposed [92]

Animal Services Division
Washington State Department of Agriculture
1111 Washington St. S.E.
Olympia, WA 98504-2560
E-mail: ahealth@agr.wa.gov

Phone: 360-902-1878.

AMENDATORY SECTION (Amending WSR 16-01-132, filed 12/18/15, effective 1/18/16)

WAC 16-86-116 Duties of certified, accredited veterinarians—Training requirement for veterinarians performing trichomoniasis testing in cattle. (1) Effective January 1, 2011, accredited veterinarians may not perform official trichomoniasis testing of bulls in Washington state until they are certified to do so by having successfully completed training and passed a proficiency examination provided by the department.

- (2) All official trichomoniasis testing of bulls in Washington state shall be performed by a certified, accredited veterinarian.
- (3) Information on training opportunities is available by contacting the department at:

Washington State Department of Agriculture

Animal Services Division

1111 Washington Street S.E.

P.O. Box 42577

Olympia, Washington 98504-2577

E-mail: ahealth@agr.wa.gov

Phone: 360-902-1878

- (4) Certified veterinarians shall utilize only official laboratories recognized by the state veterinarian for testing trichomoniasis samples. Positive test results will be sent to the department by the next business day.
- (5)(a) Quantitative polymerase chain reaction (qPCR) is the test method for official tests accepted by the department.
- (b) An official test is one in which the sample is collected by a certified veterinarian and received in the official laboratory in good condition within forty-eight hours of collection. Samples in transit for more than forty-eight hours or have been frozen or exposed to high temperatures will not be accepted for official testing. All samples shipped to the laboratory must be in a transport medium approved by the testing laboratory. All sampling will be obtained by pipette scrapings from the prepuce and glans of a bull.
- (6) Each sampled bull shall have a current-year Washington trichomoniasis tag and a USDA-approved official identification tag applied. If a bull already bears an official identification tag at the time of sampling, the individual identification number on that device shall be recorded. Both tag numbers should be recorded on the laboratory submission form so that testing and results can be verified by either number. Additional official individual identification must not be applied.
- (7) A trichomoniasis testing year is defined as September 1st through August 31st.

AMENDATORY SECTION (Amending WSR 09-03-019, filed 1/9/09, effective 2/9/09)

WAC 16-86-125 Duties of accredited veterinarians—Training requirement for veterinarians performing tuberculosis testing in cattle and bison. (1) All testing of cattle or bison in Washington state for tuberculosis shall be performed by a veterinarian accredited by the United State Department of Agriculture, Animal and Plant Health Inspection Service (USDA APHIS). In addition, all accredited veterinarians testing cattle or bison in Washington state for tuberculosis are required to successfully complete training in tuberculosis testing procedures provided by USDA or the department. Accredited veterinarians who have not successfully completed the training by April 30, 2010, may not perform official tuberculosis testing of cattle or bison in Washington state. ((A sehedule of)) Training opportunities ((is)) are available by contacting the department at:

Washington State Department of Agriculture Animal Services Division
1111 Washington Street S.E.
P.O. Box 42577
Olympia, Washington 98504-2577
E-mail: ahealth@agr.wa.gov

Phone: 360-902-1878.

(2) The department may review the testing results and other records associated with tuberculosis testing of cattle or bison by accredited veterinarians in Washington state. In the event that the response rates reported by an accredited veterinarian do not meet the response rates standards established in Appendix C of the *Bovine Tuberculosis Eradication Uniform Methods and Rules*, effective January 1, 2005 (adopted in WAC 16-86-120), the director may require additional training or may refuse to accept the testing of cattle or bison for tuberculosis performed by that veterinarian.

AMENDATORY SECTION (Amending WSR 08-01-094, filed 12/17/07, effective 1/17/08)

- WAC 16-86-150 Tuberculosis quarantine and release. (1) Any herd of cattle or bison in which tuberculosis reactors are found will be quarantined. The sale or removal of any animal out of a quarantined herd is prohibited except for removal for immediate slaughter.
- (2) Herds in which no gross lesions reactors occur and in which no evidence of *Mycobacterium bovis* infection has been disclosed may be released from quarantine after a sixty-day negative caudal fold tuberculosis retest of the entire herd.

Herds containing one or more suspects to the caudal fold tuberculosis test will be quarantined until the suspect animals are:

- (a) Retested by the comparative-cervical tuberculosis test within ten days of the caudal fold injection; or
- (b) Retested by the gamma interferon tuberculosis test and the tuberculosis status of the suspect has been determined; or
- (c) Retested by the comparative-cervical tuberculosis test after sixty days and the tuberculosis status of the suspect has been determined; or

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- (d) Shipped under permit directly to slaughter in accordance with state ((or)) and federal laws and regulations and the tuberculosis status of the suspect has been determined.
- (3) Herds in which *Mycobacterium bovis* infection has been confirmed and the herd has not been depopulated will remain under quarantine and must pass two tuberculin tests at intervals of at least sixty days and one additional test after six months from the previous negative test. Following the release from quarantine, these herds will also be subject to five annual tests on the entire herd.

REPEALER

The following section of the Washington Administrative Code is repealed:

WAC 16-86-110 Q fever testing requirements for raw milk dairies.

WSR 16-19-095 PROPOSED RULES DEPARTMENT OF AGRICULTURE

[Filed September 21, 2016, 8:18 a.m.]

Original Notice.

Preproposal statement of inquiry was filed as WSR 16-15-096.

Title of Rule and Other Identifying Information: Chapter 16-71 WAC, Equine diseases in Washington state.

Hearing Location(s): Department of Agriculture, Conference Room 238, 21 North First Avenue, Yakima, WA 98902, on October 26, 2016, at 11:00 a.m.; and at the Department of Agriculture, Conference Room 259, 1111 Washington Street S.E., Olympia, WA 98504, on October 27, 2016, at 10:00 a.m.

Date of Intended Adoption: November 18, 2016.

Submit Written Comments to: Henri Gonzales, P.O. Box 42560, Olympia, WA 98504-2560, e-mail WSDARules Comments@agr.wa.gov, fax (360) 902-2092, by 5:00 p.m., October 27, 2016.

Assistance for Persons with Disabilities: Contact the Washington state department of agriculture (WSDA) receptionist by October 17, 2016, TTY (800) 833-6388 or 711.

Purpose of the Proposal and Its Anticipated Effects, Including Any Changes in Existing Rules: The department is proposing to amend chapter 16-71 WAC to reduce the number of days equine with vesicular stomatitis are held in quarantine after the last documented observation of new lesions.

Reasons Supporting Proposal: It has been determined that infected animals shed virus for only a few days after they develop lesions, even in cases when the lesions are slow to heal. Reducing the number of days equine with vesicular stomatitis are held after the last appearance of new lesions on an infected premises is considered a safe quarantine period, after which there would be a high degree of confidence that no virus would be shedding from the quarantined animals.

Statutory Authority for Adoption: RCW 16.36.040 and chapter 34.05 RCW.

Statute Being Implemented: Chapter 16.36 RCW.

Rule is not necessitated by federal law, federal or state court decision. Title 9 Code of Federal Regulations.

Name of Proponent: WSDA, governmental.

Name of Agency Personnel Responsible for Drafting and Implementation: Dr. Scott Haskell, Olympia, (360) 725-5762; and Enforcement: David Bangart, Olympia, (360) 902-1946.

No small business economic impact statement has been prepared under chapter 19.85 RCW. RCW 19.85.030(1) requires that WSDA prepare a small business economic impact statement (SBEIS) if proposed rules will impose more than minor costs on affected businesses or industry. The department has analyzed the economic effects of the proposed revisions and has concluded that they do not impose more than minor costs on small businesses in the regulated industry, and, therefore, a formal SBEIS is not required. The proposed amendment reduces the number of days equine must be held hence reducing requirements and potential costs.

A cost-benefit analysis is not required under RCW 34.05.328. WSDA is not a listed agency in RCW 34.05.328 (5)(a)(i).

September 21, 2016 Lynn M. Briscoe Assistant Director

AMENDATORY SECTION (Amending WSR 10-13-056, filed 6/10/10, effective 7/11/10)

WAC 16-71-015 Forms used in this chapter. Forms used in this chapter may be obtained from the department at:

Animal Services Division
Washington State Department of Agriculture
1111 Washington St. S.E.
Olympia, WA 98504-2560
E-mail: ahealth@agr.wa.gov

Phone: 360-902-1878.

<u>AMENDATORY SECTION</u> (Amending WSR 10-13-056, filed 6/10/10, effective 7/11/10)

WAC 16-71-110 Vesicular stomatitis. Equine that have been diagnosed with vesicular stomatitis will be held in quarantine with all exposed and susceptible species at the location where livestock were diagnosed until ((twenty-one)) fourteen days following the ((eessation of all elinical signs of disease)) last documented observation of new lesions in animals at that location.

WSR 16-19-096 PROPOSED RULES DEPARTMENT OF AGRICULTURE

[Filed September 21, 2016, 8:19 a.m.]

Original Notice.

Preproposal statement of inquiry was filed as WSR 16-15-095.

Proposed [94]

Title of Rule and Other Identifying Information: Chapter 16-54 WAC, Animal importation.

Hearing Location(s): Department of Agriculture, Conference Room 238, 21 North First Avenue, Yakima, WA 98902, on October 26, 2016, at 11:00 a.m.; and at the Department of Agriculture, Conference Room 259, 1111 Washington Street S.E., Olympia, WA 98504, on October 27, 2016, at 10:00 a.m.

Date of Intended Adoption: November 18, 2016.

Submit Written Comments to: Henri Gonzales, P.O. Box 42560, Olympia, WA 98504-2560, e-mail WSDARules Comments@agr.wa.gov, fax (360) 902-2092, by 5:00 p.m., October 27, 2016.

Assistance for Persons with Disabilities: Contact the Washington state department of agriculture (WSDA) receptionist by October 17, 2016, TTY (800) 833-6388 or 711.

Purpose of the Proposal and Its Anticipated Effects, Including Any Changes in Existing Rules: The department proposes to amend chapter 16-54 WAC to:

- Modify the feral swine definition;
- Add timed events to definitions to be consistent with chapter 16-86 WAC;
- Remove the requirement that owners of swine must sign the certificate of veterinary inspection for porcine epidemic diarrhea virus origination or effected [affected] premises;
- Modify the exemption to import test requirements for dogs, cats and ferrets to allow traveling into Washington by means other than private conveyance;
- Reference the statutory authority for wild and exotic animals;
- Update prohibited entries to include current regulation from the Washington department of health; and
- Modify language to increase clarity and conform with current industry practices.

Reasons Supporting Proposal: These rule amendments are necessary to prevent the spread of infectious and communicable diseases in Washington animals, lessen requirements for producers, and increase clarity.

Statutory Authority for Adoption: RCW 16.36.040 and chapter 34.05 RCW.

Statute Being Implemented: Chapter 16.36 RCW.

Rule is not necessitated by federal law, federal or state court decision. Title 9 Code of Federal Regulations.

Name of Proponent: WSDA, governmental.

Name of Agency Personnel Responsible for Drafting and Implementation: Dr. Scott Haskell, Olympia, (360) 725-5762; and Enforcement: David Bangart, Olympia, (360) 902-1946.

No small business economic impact statement has been prepared under chapter 19.85 RCW. RCW 19.85.030(1) requires that WSDA prepare a small business economic impact statement (SBEIS) if proposed rules will impose more than minor costs on affected businesses or industry. The department has analyzed the economic effects of the proposed revisions and has concluded that they do not impose more than minor costs on small businesses in the regulated industry, and, therefore, a formal SBEIS is not required. The

proposed amendments offer affected businesses more options and lessen requirements.

A cost-benefit analysis is not required under RCW 34.05.328. WSDA is not a listed agency in RCW 34.05.328 (5)(a)(i).

September 21, 2016 Lynn M. Briscoe Assistant Director

AMENDATORY SECTION (Amending WSR 16-01-133, filed 12/18/15, effective 1/18/16)

WAC 16-54-010 Definitions. In addition to the definitions found in RCW 16.36.005, the following definitions apply to this chapter:

"Accredited free state" means a state that has been determined by United States Department of Agriculture (USDA) Animal and Plant Health Inspection Service (APHIS) to have a zero prevalence of cattle and bison herds affected with bovine tuberculosis as listed in Title 9 C.F.R. Part 77.7 (January 1, 2014).

"Approved veterinary laboratory" means a laboratory that has been approved by National Veterinary Services Laboratories or other USDA, APHIS-approved facility.

"Certificate of veterinary inspection" means a legible veterinary health inspection certificate on an official form (electronic or paper) from the state of origin or from USDA, APHIS executed by a licensed and accredited veterinarian or a veterinarian approved by USDA, APHIS. The certificate of veterinary inspection is also known as an "official health certificate."

"Class free and Class A, B, and C states" means states that are classified for brucellosis by USDA, APHIS in Title 9 C.F.R. Part 78.41 (January 1, 2014).

"Consigned" means to deliver for custody or sale.

"Dairy cattle" means all cattle, regardless of age or sex or current use, that are of a breed used to produce milk or other dairy products for human consumption including, but not limited to, Ayrshire, Brown Swiss, Holstein, Jersey, Guernsey, and Milking Shorthorn.

"Department" means the Washington state department of agriculture (WSDA).

"Director" means the director of WSDA or the director's authorized representative.

"Domestic bovine" means domesticated cattle, including bison.

"Domestic equine" means horses, donkeys, mules, ponies, and other animals in the *Equidae* family.

"Entry permit" means prior written permission issued by the director to admit or import animals or animal reproductive products into Washington state.

"Exotic animal" means species of animals that are not native to Washington state but exist elsewhere in the world in the wild state.

"Feral swine" means animals included in any of the following categories:

- Animals of the genus *Sus* that are free roaming on public or private lands and do not appear to be domesticated;
- Swine ((from domesticated stocks)) that have ((escaped or)) been released or born into the wild state;

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- European wild hogs and their hybrid forms (also known as European wild boars or razorbacks), regardless of whether they are free roaming or kept in confinement; or
- Animals of the family *Tayassuidae* such as peccaries and javelinas, regardless of whether they are free roaming or kept in confinement.

"Immediate slaughter" means livestock will be delivered to a federally inspected slaughter facility within twelve hours of entry into Washington state.

"Mature vaccinate" means a female bovine over the age of twelve months that has been vaccinated, under directions issued by the state of origin, with a mature dose of brucellosis vaccine.

"Modified accredited state" means a state that has been determined by USDA, APHIS to have a prevalence of bovine tuberculosis of less than 0.1 percent of the total number of herds of cattle and bison as listed in Title 9 C.F.R. Part 77.11 (January 1, 2014).

"Movement permit" means an entry permit that is valid for six months and permits the entry of domestic equine into Washington state.

"NPIP" means the National Poultry Improvement Plan.

"Official brucellosis test" means the official test defined by Title 9 C.F.R. Part 78.1 (January 1, 2014).

"Official brucellosis vaccinate" means an official adult vaccinate or official calfhood vaccinate as defined by Title 9 C.F.R. Part 78.1 (January 1, 2014).

"Official individual identification" means identifying an animal using USDA-approved devices or methods, or an alternative form of identification agreed upon by the sending and receiving states, such as unique breed registry tattoos when accompanied by registration documentation. A group of animals may be identified by registered brands when accompanied by a certificate of inspection from a brand inspection authority recognized by the director when agreed upon by the sending and receiving states.

"Poultry" means chickens, turkeys, ratites, waterfowl, game birds, pigeons, doves, and other domestic fowl.

"Psittacine" means birds belonging to the family *Psittacidae* including, but not limited to, parrots, macaws, and parakeets.

"Restricted feedlot" means a feedlot holding a permit issued under chapter 16--30~WAC.

"Restricted holding facility" means an isolated area approved and licensed by the director, as advised by the state veterinarian.

"Stage I, II, III, IV, or V pseudorabies state" means states as classified by the Pseudorabies Eradication State-Federal-Industry Program Standards (November 1, 2003).

"Timed events" means competitive events that take place where time elapsed is the factor that determines the placing of individuals competing in the event.

"USDA, APHIS" means the United States Department of Agriculture Animal and Plant Health Inspection Service.

"Virgin bull" means a sexually intact male bovine less than eighteen months of age, as determined by dentition inspection by an accredited veterinarian or verified by breed registration documents, that is confirmed by a statement and the signature of the owner or the owner's designee as having had no breeding contact with female cattle. "Wild animals" is defined in RCW 77.08.010(((61))).

AMENDATORY SECTION (Amending WSR 15-02-025, filed 12/30/14, effective 1/30/15)

WAC 16-54-030 Certificate of veterinary inspection, and entry permit requirements. (1) All animals entering Washington state must comply with the requirements of USDA, APHIS regulations found at Title 9 C.F.R. (January 1, 2014) for movement or importation from foreign countries.

(2) Certificate of veterinary inspection:

- (a) A certificate of veterinary inspection must accompany all animals entering Washington state, except where specifically exempted in ((Title 9 C.F.R. Part 86 (January 1, 2014) and)) this chapter. Certificates of veterinary inspection expire thirty days from the date of issuance.
- (b) The certificate of veterinary inspection must show that all livestock listed have been examined and found in compliance with vaccination, testing and identification requirements under Title 9 C.F.R. Part 86 (January 1, 2014).
- (c) Livestock entering Washington state for veterinary care or as part of a veterinary research project where there will be constant veterinary care or supervision for the duration of the time spent in Washington state are exempt from import test requirements and certificate of veterinary inspection requirements. An entry permit is required.
- (d) Any exemption to the requirement for a certificate of veterinary inspection may be suspended during an emergency disease condition declared by the director.
- (e) Unless an emergency rule is in effect, a certificate of veterinary inspection is not required for domestic bovine that are:
- (i) Consigned to federally inspected slaughter facilities for immediate slaughter; or
- (ii) Consigned to state-federal approved livestock markets for sale for immediate slaughter only; or
- (iii) Consigned to no more than one approved livestock market where import requirements can be met; or
- (iv) Consigned to a category 2 restricted holding facility, unless originating from a state or country with less than free status; or
- (v) Cattle moving interstate from contiguous states on grazing permits, as long as testing and vaccination requirements are met, as required by each state veterinarian.
 - (3) Entry permit: An entry permit is required on:
- (a) All domestic bovine (including Mexican cattle, Canadian cattle, and bison);
 - (b) Swine;
 - (c) Rams;
- (d) Equine identified on a certificate similar to the Washington Equine Certificate of Veterinary Inspection and Movement Permit (form AGR-3027);
- (e) Equine from states or countries where the diseases listed in WAC 16-54-071 have been diagnosed;
- (f) Intact male equine that test positive to equine viral arteritis; ((and))
- (g) Equine reproductive products from donors that test positive to equine viral arteritis; and
 - (h) Wild and exotic animals.

Proposed [96]

(4) Entry permits are granted at the discretion of the director and may be obtained from:

Washington State Department of Agriculture

Animal Services Division

1111 Washington Street S.E.

P.O. Box 42577

Olympia, Washington 98504-2577

E-mail: ahealth@agr.wa.gov

Phone: 360-902-1878.

AMENDATORY SECTION (Amending WSR 15-02-025, filed 12/30/14, effective 1/30/15)

- WAC 16-54-032 Certificate of veterinary inspection—Required information. (1) A certificate of veterinary inspection must meet the requirements in Title 9 C.F.R Part 86 (January 1, 2014) and contain the following information:
 - (a) An entry permit number, when required;
 - (b) Date of inspection;
- (c) Names and physical addresses of the consignor and consignee;
 - (d) Shipment information, including:
- (i) Physical addresses of origin and destination of shipment;
 - (ii) Anticipated shipment date;
 - (iii) Number of animals in the shipment; and
 - (iv) Purpose for which the animals are to be moved.
- (e) Certification that the animals are free from clinical signs or known exposure to any infectious or communicable disease;
 - (f) Test or vaccination status, when required;
 - (g) Description of each animal by:
 - (i) Identifying species;
 - (ii) Breed;
 - (iii) Age;
 - (iv) Sex of the animal;
 - (v) Color; and
 - (vi) Official individual identification.
- $(2)((\frac{(a)}{(a)}))$ Copies of all certificates of veterinary inspection must be ((reviewed by the animal health official of the state of origin and a copy must be immediately)) forwarded within seven calendar days from date of issuance to:

Washington State Department of Agriculture

Animal Services Division

1111 Washington Street S.E.

P.O. Box 42577

Olympia, Washington 98504-2577((;

(b) By)) E-mail ((to)): ahealth@agr.wa.gov

Fax: 360-902-2087.

AMENDATORY SECTION (Amending WSR 15-02-025, filed 12/30/14, effective 1/30/15)

- WAC 16-54-065 Prohibited entries. (1) Any animal that is infected with or exposed to any infectious or communicable disease is prohibited from entering Washington state.
- (2) Livestock susceptible to vesicular stomatitis that have been in contact with any premises within the past thirty

days under quarantine or investigation for vesicular stomatitis are prohibited from entering Washington state.

- (3) The following animals are prohibited from entering Washington state for any purpose:
 - (a) Cattle originating from Mexican dairies;
 - (b) Feral swine;
- (c) Domestic swine from herds where brucellosis is known to exist;
- (d) Deleterious exotic wildlife, as defined by RCW 77.08.010 and designated at WAC 232-12-017, except as provided in WAC 232-12-017.
- (4) The Washington state department of health under WAC 246-100-197 ((animals, birds, pets, measures to prevent human disease,)) prohibits certain animals including bats, skunks, foxes, raccoons, and coyotes from being imported into Washington state except for exhibition by bona fide public or private zoological parks or research facilities.
- (5) Entry permits allowing bona fide public or private zoological parks or research facilities to import bats, skunks, foxes, raccoons, and coyotes may be issued by the director in consultation with the secretary of the Washington state department of health.

AMENDATORY SECTION (Amending WSR 15-02-025, filed 12/30/14, effective 1/30/15)

WAC 16-54-071 Domestic equine and equine reproductive products—Importation requirements. Import health requirements.

- (1)(a) In addition to the other requirements of this chapter, all domestic equine and equine reproductive products entering Washington state must be accompanied by a certificate of veterinary inspection.
- (b) Equine vaccinated against equine viral arteritis (EVA) must be accompanied by a vaccination certificate.
- (c) Reproductive products from donors that test positive for EVA must be accompanied by an application and entry permit.
- (d) Domestic equine from the western states of Oregon, Idaho, California, Nevada, Utah, Arizona, Montana, Wyoming, Colorado, and New Mexico may enter Washington state for shows, rides, or other events either with a certificate of veterinary inspection or with a document similar to the Equine Certificate of Veterinary Inspection and Movement Permit. Individual trips cannot exceed ninety days.
- (e) An itinerary of interstate travel must be filed with the department within fourteen days of the expiration of the movement permit.
- (2) All certificates and forms may be obtained from and sent to:

Washington State Department of Agriculture Animal Services Division

1111 Washington Street S.E.

P.O. Box 42577

Olympia, Washington 98504-2577

E-mail: ahealth@agr.wa.gov

Fax: 360-902-2087.

Import test requirements. Equine infectious anemia (EIA).

[97] Proposed

(3) All domestic equine, except foals under six months of age accompanying their negative tested dams, must have a negative test for equine infectious anemia (EIA) within twelve months before entering Washington state.

Exemptions to EIA test requirements.

(4) Domestic equine moving to Washington from Idaho or Oregon are excluded from EIA test requirements.

Equine viral arteritis (EVA).

- (5) Intact males over six months of age and equine reproductive products from donors that test positive for EVA may enter Washington state only if accompanied by an entry permit and a statement on the certificate of veterinary inspection verifying that the consignee:
- (a) Has been advised of the positive antibody test results and the associated risks of EVA infection;
- (b) Agrees to follow the recommendations of the Office International des Epizooties of the World Organization of Animal Health regarding EVA and USDA recommendations found in the *Equine Viral Arteritis Uniform Methods and Rules*, effective April 19, 2004; and
 - (c) Consents to the shipment.
- (6) Intact males that test antibody positive for EVA are required to have an entry permit and may be subject to quarantine or a hold order.
- (7) Equine semen and embryos require an entry permit and must originate from donors that have proof of vaccination or a negative antibody test for EVA during the current breeding season.
- (8) Equine semen and embryos from antibody positive donors must be used or implanted only in vaccinated or sero-positive mares. These mares must be isolated for twenty-one days following insemination or implantation.
- (9) Additional testing for EVA may be required during emergency disease conditions declared by the director.

Piroplasmosis.

- (10) Any equine that has ever tested positive for piroplasmosis may not enter Washington state.
- (11) Any equine that has originated from a country or state where piroplasmosis is endemic must be negative to a C-ELISA test within thirty days before entry into Washington state, and are subject to a quarantine order upon arrival and retested within sixty to ninety days. Horses that test positive on the post-arrival C-ELISA test are not permitted to remain in the state and must be removed.

AMENDATORY SECTION (Amending WSR 16-01-133, filed 12/18/15, effective 1/18/16)

- WAC 16-54-086 Bovine trichomoniasis requirements. (1) Bulls (except bison) may be imported into the state of Washington if they meet the following requirements:
- (a) The bulls originate from a herd wherein all bulls have tested negative for bovine trichomoniasis since they were removed from female cattle; or
- (b) The bulls have tested negative to a bovine trichomoniasis quantitative polymerase chain reaction (qPCR) test within sixty days before import and have had no contact with female cattle from the time of the test to the time of import; or
- (c) Rodeo bulls for timed events and bucking bulls have tested negative for bovine trichomoniasis within the past

- twelve months and have a statement on the certificate of veterinary inspection certifying that the bulls have had no female breeding contact; or
- (d) If the bulls originate from a herd where one or more bulls or cows have been found infected with bovine trichomoniasis within the past twelve months, the bulls must have two negative qPCR tests one week apart. The samples for each test must be collected within thirty days before cattle are imported into Washington state, and an import permit must be obtained from the director and include a certifying statement that the bulls originated from an infected herd.
- (2) Laboratory pooled qPCR samples collected from up to five bulls will be accepted if the following conditions are met:
- (a) Bulls are eighteen months of age and older that cannot be exempted as virgin bulls under WAC 16-54-010, and which have had no breeding contact with female cattle; and
- (b) Bulls originate from a herd where there is no history of trichomoniasis infection, and are part of a single herd, not assembled cattle; and
- (c) Bulls are sampled for a diagnostic test without regulatory implications or are not part of a trichomoniasis investigation.
- (3) Before arrival at their destination in Washington state, all imported bulls must be identified with official identification or an official trichomoniasis bangle tag.
- (4) Bulls that enter Washington state without meeting the bovine trichomoniasis requirements of this section will be subject to a quarantine order or a hold order at the owner's expense until they have had two negative qPCR tests one week apart.
- (5)(a) Any bull or cow that is positive to a trichomoniasis test, and any herd in which one or more bulls or cows are found infected with trichomoniasis is considered infected.
- (b) In the case of bulls testing positive to trichomoniasis, the herd shall be subject to a quarantine order or a hold order pending an epidemiological investigation to determine the source of the infection, and as long as infection persists in the herd.
- (c) Infected bulls will be subject to a quarantine order or a hold order and will not be used for breeding. They must be slaughtered, sold for slaughter, or sent to a restricted feedlot or category 2 restricted holding facility to remain in slaughter channels.
- (6) Certification and proficiency testing and types of tests. The state veterinarian will determine trichomoniasis training for veterinarians and laboratories, and the types of tests used to determine trichomoniasis infection. All sampling will be obtained by pipette scrapings from the prepuce and glans of a bull.
- (a) All trichomoniasis testing of bulls in Washington state shall be performed by a veterinarian accredited by the USDA APHIS. In addition, all accredited veterinarians testing bulls in Washington state for trichomoniasis are required to successfully complete training and pass a trichomoniasis testing procedure proficiency examination provided by the department. Effective January 1, 2011, accredited veterinarians may not perform official trichomoniasis testing of bulls in Washington state until they have successfully completed the training and passed the proficiency examination.

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A schedule of training opportunities is available by contacting the department at:

Washington State Department of Agriculture

Animal Services Division

1111 Washington Street S.E.

P.O. Box 42577

Olympia, Washington 98504-2577

E-mail: ahealth@agr.wa.gov

Phone: 360-902-1878.

- (b) Registered veterinarians shall only utilize official laboratories recognized by the state veterinarian for testing of trichomoniasis samples.
- (c) Registered veterinarians collecting samples in the state of Washington shall submit results of all trichomoniasis tests and all official identification on official trichomoniasis test and report forms to the animal services division within five business days of receiving test results from an approved laboratory.
- (d)(i) Polymerase chain reaction is accepted as an official test when completed by an approved laboratory and when the sample is received by the laboratory within forty-eight hours of collection.
- (ii) Other tests for trichomoniasis may be approved as official tests by the state veterinarian after the tests have been proven effective by research, have been evaluated sufficiently to determine efficacy, and a protocol for use of the test has been established.
- (iii) An official test is one in which the sample is received in the approved laboratory in good condition within forty-eight hours of collection. Samples in transit for more than forty-eight hours will not be accepted for official testing and must be discarded. Samples that have been frozen or exposed to high temperatures must also be discarded.

Exemptions to bovine trichomoniasis test requirements.

(7) **Virgin bulls**, as defined in WAC 16-54-010 are exempt from bovine trichomoniasis test requirements.

AMENDATORY SECTION (Amending WSR 15-02-025, filed 12/30/14, effective 1/30/15)

WAC 16-54-111 Swine—Importation and testing requirements. Import health requirements.

- (1) All swine entering Washington state must be accompanied by an entry permit, a certificate of veterinary inspection, and official individual identification.
- (2) The certificate of veterinary inspection must contain the following certification: "To the best of my knowledge, swine represented on this certificate have not originated from a premises known to be affected by Porcine Epidemic Diarrhea virus (PEDv), and have not been exposed to PEDv within the last 30 days." ((The certification must be signed by both the owner of the swine and the certifying veterinarian.))
 - (3) Feral swine are prohibited in Washington state.

Import test requirements.

(4) **Brucellosis.** All intact male and intact female swine more than six months of age must be tested negative for brucellosis within thirty days before entering Washington state or must originate from a USDA validated brucellosis free

herd or state (Swine Brucellosis Control/Eradication State-Federal-Industry Uniform Methods and Rules, April 1998).

- (5) **Pseudorabies.** No test is required from states recognized as Stage IV or Stage V by Pseudorabies Eradication State-Federal-Industry Program Standards, November 1, 2003.
- (6) A negative pseudorabies test within thirty days before entry is required for swine from any state or area that loses Stage IV or Stage V status.

Exemptions to import test requirements.

(7) Swine shipped directly to a federally inspected slaughter facility for immediate slaughter are exempt from testing requirements.

Swine semen and embryos.

- (8)(a) Swine semen and swine embryos entering Washington state for insemination of swine or implantation into swine shall be accompanied by a certificate of veterinary inspection issued by an accredited veterinarian stating that the donor swine are not known to be infected with or exposed to pseudorabies, were negative to an official pseudorabies serologic test within thirty days prior to the collection of the semen or embryos or were members of a qualified pseudorabies negative herd, and had not been exposed to pseudorabies within thirty days prior to the collection of the semen or embryos.
- (b) Brucellosis testing is not required on donor swine from brucellosis validated free states.
- (c) Pseudorabies testing is not required on donor swine from pseudorabies Stage IV or Stage V states.

<u>AMENDATORY SECTION</u> (Amending WSR 15-02-025, filed 12/30/14, effective 1/30/15)

- WAC 16-54-170 Dogs, cats, and ferrets—Importation and testing requirements. (1) Dogs, cats, or ferrets entering Washington state require a certificate of veterinary inspection.
- (2) The certificate of veterinary inspection for dogs, cats, or ferrets must identify each animal and certify that each animal at the time of entry is current on rabies vaccination according to the manufacturer's label, and does not originate from an area under quarantine for rabies.
- (3) Dogs six months of age or older must be tested negative for heartworm or are currently on a heartworm preventative.

Exemptions to import health requirements.

- (4) Dogs, cats, or ferrets less than ninety days of age do not require a rabies vaccination.
- (5) ((Dogs and eats that originate in Washington state and visit Canada for thirty days or less are exempt from a certificate of veterinary inspection.
- (6))) Dogs, cats, or ferrets that are family pets and have current rabies vaccination certificates and are traveling ((by private conveyance)) with their owners with no sale, trade, or other change of ownership intended are exempt from a certificate of veterinary inspection.

Exemptions to import test requirements.

 $(((\frac{7}{)}))$ (6) Dogs that have been owned by the same owner for more than one month prior to entering the state, and are not going to be sold or have a change of ownership, and are

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traveling ((by private conveyance)) with their owner are exempt from the heartworm test requirement.

AMENDATORY SECTION (Amending WSR 15-02-025, filed 12/30/14, effective 1/30/15)

WAC 16-54-180 Wild and exotic animals—Importation and testing requirements. Import health requirements.

- (1) Wild and exotic animals entering Washington state must be accompanied by a certificate of veterinary inspection issued by an accredited veterinarian licensed in the state of origin, or accompanied by an international certificate of health unless the animals are prohibited under chapter 16.30 RCW or 232-12 WAC.
- (2) All wild and exotic animals must be accompanied by an entry permit.

Import test requirements.

(3) **Brucellosis:** Within thirty days before entering Washington state, negative serologic testing must be conducted on the following categories of captive wild or exotic animals that are more than six months of age:

Table 1.
Wild and exotic animals that must be tested for brucellosis

Tested For	Species Scientific Name	Common Name Examples
Brucella abortus	Camelidae	Vicuna
		Guanaco
		• Camel
	Cervidae	• Elk
		• Caribou
		• Moose
		Reindeer
		• Deer
	Giraffidae	• Giraffe
		• Okapi
	Bovidae	Wild cattle
		(gaur, banteng,
		kaupre, yak)
		• Bison (American bison, Euro-
		pean bison)
		Buffalo (Asian
		water buffalo,
		tamaraw, lowland
		anoa, mountain anoa, African buf-
		falo)

Tosted For	Species Scientific Name	Common Name
Tested For		Examples
	Ovidae, Capridae	Wild sheep (bighorn sheep, Dall's sheep, mouflon, argoli, uriol, blue sheep, barbary sheep, red sheep) Wild goats (Rocky Mountain goat, ibex, walia ibex, west Caucasian tur, east Caucasian tur, Spanish ibex, markhor)
Brucella suis	Suidae	• Wild swine (European wild boar, bearded pig, Jovan pig, pygmy hog, wart hog, giant forest pig, East Indian swine or Babirusa, African bush pig, peccaries)
Brucella suis biovar 4	Cervidae	Caribou Reindeer
Brucella ovis	Ovidae, Capridae	• All wild sheep and goats must be tested and found negative to <i>Brucella ovis</i> within thirty days before entering Washington state

- (4) **Tuberculosis** (Mycobacterium bovis and Mycobacterium tuberculosis):
- (a) Animals less than six months of age that are nursing negative tested dams may be excluded from tuberculosis test requirements.
- (b) Within thirty days before entering Washington state, the animals listed in the following table must test negative for *M. bovis* and *M. tuberculosis* by a skin test or other approved test that follows federal tuberculosis protocols:

Table 2.
Wild and exotic animals that must be tested for tuberculosis

Species Scientific Name

Ceropithecidae

((Elephantidae

Hylobotidae

Common Name Examples

Old world primates

Elephants¹))

Gibbons

Lessor apes

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Species Scientific Name Common Name Examples Pongidae • Great apes Elephantidae • Elephants¹ Bovidae • Wild cattle Ovidae, Capridae • Wild sheep Wild goats • Elk Cervidae, Giraffidae Caribou • Moose Reindeer • Deer • Giraffe Okapi

¹Negative trunk wash or other USDA-validated tuberculosis test every twelve months.

- (c) *Cervidae*, such as elk, deer, caribou, moose, and reindeer and *Giraffidae*, such as giraffe and okapi, must be from herds not known to be infected with, exposed to, or affected by tuberculosis. They must also test negative for *M. bovis* using the testing requirements defined in Title 9 C.F.R. Part 77.33 (January 1, 2014).
- (d) For all captive wild or exotic animals not listed in Table 2 ((in subsection (2)(b))) of this section, the following statement signed by the animal's owner or agent must be placed on the official certificate of veterinary inspection:

"To my knowledge, the animals listed on this certificate are not infected with tuberculosis and have not been exposed to animals infected with tuberculosis during the past twelve months."

- (5) **Pseudorabies:** All wild swine imported for zoos, exhibitions or to a research facility must test negative for pseudorabies no more than thirty days before entry into Washington state and must be held in quarantine for thirty to sixty days pending a postentry retest.
- (6) **Equine infectious anemia:** All wild horses, donkeys, and hybrids of the family *Equidae* must test negative on an approved test for equine infectious anemia no more than six months before entry into Washington state.
- (7) **Elaphostrongylinae** (Parelophostrongylus tenvis (meningeal worm) and Elaphostrongylus cervis (muscle worm)): Before entering Washington state, all Cervidae must be examined for Elaphostrongylinae infection in the absence of anthelminthic treatment that could mask detection of the parasite.
- (a) All Cervidae residing for at least six months west of a line through the eastern boundaries of North Dakota, South Dakota, Nebraska, Kansas, Oklahoma, and Texas or geographical boundaries as otherwise designated by the state veterinarian must have a negative fecal exam for dorsal-spined larvae made by an approved laboratory using the Baermann technique. Animals must be certified that they have not been treated with or exposed to anthelminthics for at least thirty days before testing.
- (b) All Cervidae residing for less than six months west of a line through the eastern boundaries of North Dakota,

- South Dakota, Nebraska, Kansas, Oklahoma, and Texas or geographical boundaries as otherwise designated by the state veterinarian or from east of that line must be held in a preentry quarantine for thirty to sixty days and have two fecal tests for dorsal-spined larvae made by an approved laboratory using the Baermann technique.
- (i) The first test must be conducted at least thirty days and not more than forty days before the second test.
- (ii) Fecal samples of at least thirty grams per sample are to be collected by an accredited veterinarian from the animal's rectum and identified by the animal's official identification number.
- (iii) During the thirty-day testing period, test animals must be held in quarantine and isolated from all other *Cervidae* not included in the shipment.
- (iv) If any animal tests positive to either of the two fecal tests, neither that animal nor any other animal held in quarantine with the infected animal may be imported into Washington state.
- (c) All imported *Cervidae* must be held for one hundred eighty days in an on-site quarantine and be available for inspection by the director during this time.
- (d) Every thirty, sixty, ninety, one hundred twenty, one hundred fifty, and one hundred eighty days after arrival, fecal samples from the animals must be tested by the Baermann technique in an approved laboratory and be found negative for dorsal-spined larvae. Animals that test positive for dorsal-spined larvae must either be removed from Washington state or destroyed.
- (e) To prevent the presence of the gastropod intermediate hosts of *Elaphostrongylinae* larvae, the quarantine site must be prepared and inspected before the imported animals enter. Preparation includes:
- (i) Providing a hard surface, such as asphalt or concrete, on which to keep the animals;
- (ii) Spraying the quarantine area with an EPA-registered molluscicide; and
- (iii) Spraying a four-meter wide tract around the perimeter of the holding compound with an EPA-registered molluscicide. This perimeter tract must be treated once every five days and within twenty-four hours of precipitation (10 mm or more) to ensure that the gastropod population is kept to zero within the compound.
- (8) **Rabies:** Any carnivorous mammal taken from the wild is prohibited from entering Washington state if rabies has been diagnosed in the state of origin during the past twelve months.

WSR 16-19-097 PROPOSED RULES DEPARTMENT OF AGRICULTURE

[Filed September 21, 2016, 8:19 a.m.]

Original Notice.

Preproposal statement of inquiry was filed as WSR 16-15-092.

Title of Rule and Other Identifying Information: Chapter 16-29 WAC, Animal disease traceability.

[101] Proposed

Hearing Location(s): Department of Agriculture, Conference Room 238, 21 North First Avenue, Yakima, WA 98902, on October 26, 2016, at 11:00 a.m.; and at the Department of Agriculture, Conference Room 259, 1111 Washington Street S.E., Olympia, WA 98504, on October 27, 2016, at 10:00 a.m.

Date of Intended Adoption: November 18, 2016.

Submit Written Comments to: Henri Gonzales, P.O. Box 42560, Olympia, WA 98504-2560, e-mail WSDARules Comments@agr.wa.gov, fax (360) 902-2092, by 5:00 p.m., October 27, 2016.

Assistance for Persons with Disabilities: Contact the Washington state department of agriculture (WSDA) receptionist by October 17, 2016, TTY (800) 833-6388 or 711.

Purpose of the Proposal and Its Anticipated Effects, Including Any Changes in Existing Rules: The department is proposing to amend chapter 16-29 WAC to:

- Clarify the data that slaughter facilities must report to the department;
- Add an alternative to reporting when certain conditions are met; and
- Clarify penalties associated with reporting violations.

Reasons Supporting Proposal: Proposed amendments provide clarity to slaughter facilities on data that must be reported and penalties associated with reporting violations. Proposed amendments also include the addition of an alternative for reporting; this will allow slaughter facilities another option if conditions are met.

Statutory Authority for Adoption: RCW 16.36.150 and chapter 34.05 RCW.

Statute Being Implemented: Chapter 16.36 RCW.

Rule is not necessitated by federal law, federal or state court decision. Title 9 Code of Federal Regulations.

Name of Proponent: WSDA, governmental.

Name of Agency Personnel Responsible for Drafting: David Hecimovich, Olympia, (360) 725-5493; Implementation: Dr. Scott Haskell, Olympia, (360) 725-5493; and Enforcement: David Bangart, Olympia, (360) 902-1946.

No small business economic impact statement has been prepared under chapter 19.85 RCW. The clarifying portions of the proposed rule meet the exemption in RCW 19.85.025 (3)/34.05.310 (4)(d), it adds clarifying language of a rule without changing its effect.

The added alternative to reporting when certain conditions are met is an option rather than a requirement on businesses. The alternative to reporting will decrease the reporting required for certain businesses. It does not impose more than minor costs on any business.

A cost-benefit analysis is not required under RCW 34.05.328. WSDA is not a listed agency in RCW 34.05.328 (5)(a)(i).

September 21, 2016 Lynn M. Briscoe Assistant Director AMENDATORY SECTION (Amending WSR 15-02-024, filed 12/30/14, effective 7/1/15)

WAC 16-29-015 Levy and collection of assessment. (1) An assessment of \$0.23 per head is levied on all cattle sold or slaughtered in the state or transported out of the state except for:

- (a) An assessment of \$0.05 per head is levied on all immediate slaughter cattle.
- (b) No assessment is paid on cattle slaughtered and retained by the owner for personal consumption.
- (2) Collection of assessments will be collected in the same manner as the livestock inspection fees under RCW 16.57.223 and 16.65.090 except for subsection (1)(a) of this section. For immediate slaughter cattle or cattle originating from a certified feedlot, the assessments will be collected by the slaughter facility and remitted to the department by the fifteenth day of the month following the month the transaction occurred.

((In addition to the assessment collected by the slaughter facility, the slaughter facility shall furnish the department a list of all cattle slaughtered during any given month.))

- (3) Assessments owed from private individual sales, trades, gifting, barter, or any other action that constitutes a change of ownership of livestock per WAC 16-610-020(3), not occurring at a public livestock market or special sale licensed under chapters 16.65 RCW and 16-610 WAC or a slaughter facility, will be collected:
- (a) When a change of ownership livestock inspection is conducted or when the transaction is reported through an electronic livestock movement reporting system per chapter 16-610 WAC.
- (b) When utilizing the "green tag" as provided in RCW 16.57.160(3). The assessment will be added to the purchase price of each tag.
- (4) Assessments are collected at a federally inspected slaughter facility when:
- (a) Cattle are sold and slaughtered concurrently. This is considered a one assessment event and one fee shall be collected per head from the seller.
- (b) Cattle originate from a certified feedlot licensed under chapter 16.58 RCW. The assessments will be collected by the slaughter facility and remitted to the department by the fifteenth day of the month following the month the transaction occurred.
- (c) Cattle are slaughtered and no change of ownership has occurred, the per head fee shall be collected from the owner of the animal.
- (5) Collection of assessments for custom slaughtering occurs when utilizing custom slaughter beef tags per WAC 16-610-100. The assessment will be added to the purchase price of each tag.
- (6) Collection of assessments at public livestock markets and special sales licensed under chapter 16.65 RCW will be considered one assessment event, charged to the seller, when:
- (a) Cattle are purchased and destined to an out-of-state location by the buyer.
- (b) Cattle are purchased and destined for slaughter to an in-state federally inspected slaughter facility.
- (7) When Washington origin cattle are transported for sale to an out-of-state market where the director conducts

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inspections of Washington origin cattle by agreement with the host state, it shall be considered one assessment event and one fee shall be collected per head from the Washington seller.

- (8) Collection of assessments for out-of-state movement occurs when:
- (a) Cattle are purchased and destined to an out-of-state location by the buyer. This is considered a one assessment event and one fee shall be collected per head from the seller.
- (b) Cattle are moving out-of-state with no change of ownership.

NEW SECTION

WAC 16-29-017 Reporting requirements. (1) Slaughter facilities shall furnish the department a report of all cattle slaughtered by individual consignment. The report is due by the fifteenth day of the month following the month the transaction occurred. The report must include:

- (a) Slaughter date;
- (b) Number of head slaughtered;
- (c) Type: Beef, dairy, or condemned;
- (d) Sex;
- (e) Name of owner/seller;
- (f) State of origin; and
- (g) Any other information the director deems necessary.
- (2) As an alternative to the report described in subsection (1) of this section, the department will accept a completed affidavit (AGR Form 402-3093) only when the following conditions are met:
- (a) All USDA inspected cattle slaughtered during the month were inspected by either a department livestock inspector or a department certified accredited veterinarian approved to conduct livestock inspections;
- (b) No out-of-state cattle were slaughtered during the month; and
- (c) No cattle originating from a department certified feedlot were slaughtered during the month.
- (3) The report or affidavit may be submitted to the department by e-mail to adtwa@agr.wa.gov, by fax to 360-902-2087, or by mail to Washington State Department of Agriculture, Animal Disease Traceability Program, P.O. Box 42577, Olympia, Washington 98504-2577.

AMENDATORY SECTION (Amending WSR 15-02-024, filed 12/30/14, effective 7/1/15)

WAC 16-29-025 Penalty outline and schedule. (1) If any person fails to comply with the requirements of RCW 16.36.150 ((and this ehapter)), the director may issue that person a notice of infraction and may assess a penalty.

- (2) Each violation is a separate and distinct offense. Penalties may be assessed per violation or per head.
- (3) The following is the base penalty, not including statutory assessments.

Violation	Base Penalty
RCW 16.36.150	Failing to pay the
	traceability fee
First offense	\$50.00

Violation	Base Penalty
Second offense within three years	\$125.00
Third and subsequent offenses within three years	\$250.00

(4) If any person fails to comply with the reporting requirements described in WAC 16-29-017, the penalties will be assessed according to chapter 16-90 WAC.

WSR 16-19-100 PROPOSED RULES LIQUOR AND CANNABIS BOARD

[Filed September 21, 2016, 10:27 a.m.]

Supplemental Notice to WSR 16-15-031.

Preproposal statement of inquiry was filed as WSR 14-21-182.

Title of Rule and Other Identifying Information: WAC 314-12-215 Alcohol impact areas—Definition—Guidelines.

Hearing Location(s): Washington State Liquor Control [and Cannabis] Board, Board Room, 3000 Pacific Avenue S.E., Olympia, WA 98504, on November 2, 2016, at 10:00 a.m.

Date of Intended Adoption: November 16, 2016.

Submit Written Comments to: Karen McCall, P.O. Box 43080, Olympia, WA 98504, e-mail rules@lcb.wa.gov, fax (360) 664-9689, by November 2, 2016.

Assistance for Persons with Disabilities: Contact Karen McCall by November 2, 2016, (360) 664-1631.

Purpose of the Proposal and Its Anticipated Effects, Including Any Changes in Existing Rules: This rule making is a result of a stakeholder request. Clarification of requirements for an alcohol impact area are requested.

Reasons Supporting Proposal: Alcohol impact areas are becoming more popular with local jurisdictions. Clarification of requirements will ensure that all stakeholders understand what is required for the board to recognize an alcohol impact area and to continue to keep the alcohol impact area in force.

Statutory Authority for Adoption: RCW 66.08.030.

Rule is not necessitated by federal law, federal or state court decision.

Name of Proponent: Washington state liquor and cannabis board, governmental.

Name of Agency Personnel Responsible for Drafting: Karen McCall, 3000 Pacific Avenue S.E., Olympia, WA 98504, (360) 664-1631; Implementation: Becky Smith, Licensing Director, 3000 Pacific Avenue S.E., Olympia, WA 98504, (360) 664-1615; and Enforcement: Justin Nordhorn, Chief Enforcement, 3000 Pacific Avenue S.E., Olympia, WA 98504, (360) 664-1729.

No small business economic impact statement has been prepared under chapter 19.85 RCW. A small business economic impact statement was not required.

A cost-benefit analysis is not required under RCW 34.05.328. A cost-benefit analysis was not required.

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September 21, 2016 Jane Rushford Chairman

AMENDATORY SECTION (Amending WSR 10-19-065, filed 9/15/10, effective 10/16/10)

WAC 314-12-215 Alcohol impact areas—Definition—Guidelines. (1) What is an alcohol impact area((, and how is it different))?

- (a) An alcohol impact area is a geographic area located within a city, town or county, and that is adversely affected by chronic public inebriation or illegal activity associated with liquor sales or consumption.
- (b) The board may place special conditions or restrictions upon off-premises sales privileges, liquor products, applicants, license assumptions or licensees that sell liquor for off-premises consumption (see subsection (3) of this section).
- (c) The board applies a unique investigative and review process when evaluating liquor license applications, license assumptions or renewals for businesses located in an alcohol impact area.
- (2) How is an alcohol impact area formed? A local authority (that is, a city, town or county) must first designate an alcohol impact area by ordinance and make good faith efforts for at least six months to mitigate the effects of chronic public inebriation with such ordinance before petitioning the board to recognize an alcohol impact area. The board must recognize an alcohol impact area before any unique review process, condition or restriction described in this rule may be applied. A local authority must meet certain conditions to achieve board recognition of an alcohol impact area.
- (a) The geographic area of an alcohol impact area must not include the entire ((territory)) geographic area under the jurisdiction of a local authority. However, when a local authority designates a street as a boundary, the board encourages that the local authority include both sides of the street for greater effectiveness.
- (b) <u>The l</u>ocal authority ordinance must explain the rationale of the proposed boundaries, and describe the boundaries in such a way that:
- (i) The board can determine which liquor licensees are in the proposed alcohol impact area; and
- (ii) The boundaries are understandable to the public at large.
 - (c) A local authority must:
- (i) Submit findings of fact that demonstrate a need for an alcohol impact area and how chronic public inebriation or illegal activity associated with liquor sales or consumption within a proposed alcohol impact area:
- (A) Contributes to the deterioration of the general quality of life within an alcohol impact area; or
- (B) Threatens the welfare, health, peace or safety of an alcohol impact area's visitors or occupants;
- (ii) Submit findings of fact that demonstrate a pervasive pattern of public intoxication or public consumption of liquor as documented in: Crime statistics, police reports, emergency medical response data, detoxification reports, sanitation

reports, public health records, ((other similar records,)) community group petitions, public testimony or testimony by current or former chronic public ((inebriants;

(iii))) inebriates.

(d) Minimum requirements for an alcohol impact area petition packet:

- (i) Litter/trash survey and documented results. A litter/trash survey must be conducted within the proposed alcohol impact area boundaries for at least a four week period. Litter/trash surveys must be completed a minimum of twice a week. Use a GIS data map, or similar tool, to point out the "hot spots" of heavy alcohol consumption based on the litter/trash survey. Provide a list of alcohol products found in the litter/trash survey.
- (ii) Photographic evidence of litter and drinking in public.
- (iii) Law enforcement testimonial(s). Law enforcement testimonial must be from at least one law enforcement officer who frequently works within the proposed alcohol impact area boundaries. A testimonial must discuss the impact of high alcohol content or volume products within the proposed alcohol impact area boundaries and how implementation of an alcohol impact area would benefit the community.
- (iv) Letters of support submitted by neighborhood councils, local agencies, schools or universities, business associations, fire departments, local businesses, or private citizens in the community.
- (v) Crime statistics and police reports. Crime statistics and police reports must show the statistics for alcohol-related criminal activity within the proposed alcohol impact area boundaries, and must show evidence linking specific products with chronic public inebriation activity.
- (e) After reviewing the alcohol impact area petition packet, the board may request supplemental materials to prove the necessity of an alcohol impact area. The supplemental materials may include:
- (i) Additional testimonials submitted by citizens who would be directly affected by the proposed alcohol impact area.
- (ii) Emergency medical response data. This information must provide evidence that chronic inebriation within the proposed alcohol impact area requires an abnormally high amount of medical emergency care.
- (iii) Sanitation reports. This information must provide evidence that chronic inebriation within the proposed alcohol impact area boundaries creates an abnormally high amount of sanitation problems.
- (iv) Detoxification reports. This information must provide evidence that chronic inebriation within the proposed alcohol impact area requires an abnormally high amount of detoxification services.
- (f) Submit documentation that demonstrates a local authority's past good faith efforts to control the problem through voluntary measures (see subsection (4) of this section)((:
- (iv) Explain why past voluntary measures failed to sufficiently resolve the problem; and
 - (v))). The voluntary compliance report must:
- (i) Provide an executive summary of the results of the voluntary compliance period;

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- (ii) Provide evidence of the local authorities' efforts to control the problem through voluntary measures; and
- (iii) Explain why the voluntary measures were not effective and how mandatory restrictions will help address the problem.
- (g) Request additional conditions or restrictions and explain how the conditions or restrictions will reduce chronic public inebriation or illegal activity associated with off-premises sales or liquor consumption (see subsection (3) of this section).
- (3) What conditions or restrictions may the board recognize for an alcohol impact area?
 - (a) Restrictions may include, but are not limited to:
- (i) <u>Limitations on b</u>usiness hours of operation for offpremises liquor sales;
- (ii) <u>Restrictions on off-premises</u> sale of certain liquor products within an alcohol impact area; ((or)) <u>and</u>
- (iii) <u>Restrictions on c</u>ontainer sizes available for offpremises sale.
- (b) The board has adopted a standardized list of products that will be banned in alcohol impact areas. The list can be found on the WSLCB web site. The list contains products that are banned in the majority of current alcohol impact areas. Requests for additional product restrictions (for example, prohibition of sale of certain liquor products or container sizes) must originate from a local authority's law enforcement agency or public health authority, whereas restrictions affecting business operations (for example, hours of operation) may originate from a local authority's law enforcement agency, public authority or governing body. (((e))) Product restrictions must be reasonably linked to problems associated with chronic public inebriation or illegal activity. Reasonable links include, but are not limited to: Police, fire or emergency medical response statistics; photographic evidence; law enforcement, citizen or medical-provider testimonial; testimony by current or former chronic public ((inebriants)) inebriates; litter pickup; or other statistically documented evidence ((that a reasonable person may rely upon to determine whether a product is associated with chronic public inebriation or illegal activity.
- (d) Restricted beer and wine products must have minimum alcohol content of five and seven-tenths percent by volume and twelve percent by volume, respectively.
- (e) Upon board approval and upon an individual product by individual product basis, a local authority may restrict a product that is already restricted in another board-recognized alcohol impact area provided that a product is significantly materially similar (for example, comparable alcohol percent content, container size or liquor category such as alcoholic energy drinks) to products already restricted in its own alcohol impact area. Upon board approval and upon an individual product by individual product basis, a local authority may also restrict a product that is significantly materially similar to products already restricted in its own alcohol impact area. In both cases, a local authority must demonstrate to the board, in writing, the material similarities and need for product inclusion, but the board will not require a local authority to submit extensive documented evidence as described in (c) of this subsection.

(f)))<u>.</u>

- (c) After the board has recognized an alcohol impact area the local authority may request the board approve additional products to their banned products list provided that the products are reasonably linked to the problems associated with chronic public inebriation or illegal activity. Reasonable links include, but are not limited to: Police, fire or emergency medical response statistics; photographic evidence; law enforcement, citizen or medical-provider testimonial; testimony by current or former chronic public inebriates; litter pickup; or other statistically documented evidence.
- (d) A local authority may propose the removal of a condition, restriction or product from its alcohol impact area's restricted product list provided that a local authority demonstrates its reason (such as, a product is no longer produced or bottled) to the board in writing.
- (4) What types of voluntary efforts must a local authority attempt before the board will recognize an alcohol impact area?
- (a) A local authority must notify all off-premises sales licensees in a proposed alcohol impact area that:
- (i) Behavior associated with liquor sales and associated illegal activity is impacting chronic public inebriation; and
- (ii) Existing voluntary options are available to them to remedy the problem.
- (b) A local authority's efforts must include additional voluntary actions. Examples include, but are not limited to:
- (i) Collaborative actions with neighborhood citizens, community groups or business organizations to promote business practices that reduce chronic public inebriation;
- (ii) Attempts to achieve voluntary agreements with offpremises sales licensees to promote public welfare, health, peace or safety;
- (iii) <u>Requesting licensees to voluntarily ((discontinuing to sell a))</u> <u>discontinue selling products that are considered contributing to the problem;</u>
- (iv) Distribution of educational materials to chronic public inebriants or licensees;
 - (v) Detoxification services;
- (vi) Business incentives to discourage the sale of problem products; or
 - (vii) Change in land use ordinances.
- (c) A local authority must implement these voluntary agreements for at least six months before a local authority may present documentation to the board that voluntary efforts failed to adequately mitigate the effects of chronic public inebriation and need augmentation.
- (5) What will the board do once it recognizes an alcohol impact area?
- (a) The board will notify, in a timely manner, the appropriate liquor distributors of the product restrictions.
- (b) ((No state liquor store or agency located within an alcohol impact area may sell that alcohol impact area's restricted products.
- (e)) The board will notify, in a timely manner, all off-premises sales licensees in a proposed or existing alcohol impact area whenever the board recognizes, or recognizes changes to, an alcohol impact area (see subsection (7) of this section).

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- (6) What is the review process for liquor license applications, license assumptions, and renewals inside an alcohol impact area?
- (a) When the board receives an application for a new liquor license or a license assumption that includes an off-premises sales privilege, the board will establish an extended time period of sixty calendar days for a local authority to comment upon the application.
- (i) A local authority may, and is encouraged to, submit comment before the end of a comment period. A local authority may request an extension of a comment period when unusual circumstances, which must be explained in the request, require additional time for comment.
- (ii) A local authority will notify a licensee or applicant when a local authority requests the board to extend a sixtyday comment period.
- (b) For renewals, the board will notify a local authority at least ninety calendar days before a current license expires. The same requirements in (a)(i) and (ii) of this subsection apply to the ninety-day comment period for problem renewals. For the purposes of this section, a problem renewal means a licensee, a licensed business or a licensed location with a documented history of noncompliance or illegal activity.
- (7) When and for how long will an alcohol impact area be in effect, and may an alcohol impact area be changed?
- (a) An alcohol impact area takes effect on the day that the board passes a resolution to recognize an alcohol impact area. However, product prohibitions take effect no less than thirty calendar days after the board passes such resolution in order to give retailers and distributors sufficient time to remove products from their inventories.
 - (b) An alcohol impact area remains in effect until:
- (i) A local authority repeals the enabling ordinance that defines an alcohol impact area;
- (ii) A local authority requests that the board revoke its recognition of an alcohol impact area;
- (iii) The board repeals its recognition of an alcohol impact area of its own initiative and following a public hearing; or
- (iv) A local authority fails to comply with subsection (8) of this section.
- (c) A local authority may petition the board to modify an alcohol impact area's geographic boundaries, repeal or modify an existing condition or restriction, or create a new condition or restriction. The board may agree to do so provided that a local authority shows good cause and submits supporting documentation (((see))) as contained in subsections (2) and (3) of this section(((sec)))).
- (d) Prohibition of a new product added to an existing prohibited products list takes effect no ((less)) sooner than thirty calendar days following the board's recognition of a modified prohibited products list.
- (8) Reporting requirements and five-year assessments.
- (a) A year after the implementation of the alcohol impact area a local authority shall submit ((annual)) a report(s) to the board that clearly demonstrates the intended effectiveness of an alcohol impact area's conditions or restrictions. The

- report((s are)) is due no later than sixty calendar days following ((each anniversary of the board's recognition of an)) the first anniversary of the implementation of the alcohol impact area. The report must include the same categories of information and statistics that were originally used to request the alcohol impact area.
- (b) The board will conduct an assessment of an alcohol impact area once every five years following the fifth, tenth, fifteenth, et cetera, anniversary of the board's recognition of ((an)) the alcohol impact area. The five-year assessment process is as follows:
- (i) Within ((ten)) twenty calendar days of receiving a local authority's fifth, tenth, fifteenth, et cetera, ((annual)) report, the board shall notify affected parties of the upcoming assessment, whereupon an affected party has twenty calendar days to comment upon, or petition the board to discontinue its recognition of, an alcohol impact area (see (d) of this subsection). Affected parties may include, but are not limited to: Liquor licensees, citizens or neighboring local authorities.
- (ii) An affected party may submit a written request for one twenty calendar-day extension of the comment/petition period, which the board may grant provided that an affected party provides sufficient reason why he or she is unable to meet the initial twenty-day deadline.
- (iii) The board will complete an assessment within sixty calendar days following the close of the final comment/petition period.
 - (c) An assessment shall include an analysis of:
- (i) The same categories of information and statistics that were originally used to request the alcohol impact area; and
- (ii) Comments or petitions submitted by affected parties((; and
- (ii) Each annual report submitted during a five-year period)).

An assessment ((shall)) <u>may</u> also include modifications that a local authority must make to an alcohol impact area as required by the board, or the board's reasons for revoking recognition of an alcohol impact area.

- (d) To successfully petition the board to discontinue its recognition of an alcohol impact area, an affected party must:
- (i) Submit findings of fact that demonstrate how chronic public inebriation((τ)) or illegal activity associated with liquor sales or consumption((τ)) within a proposed alcohol impact area does not or no longer:
- (A) Contributes to the deterioration of the general quality of life within an alcohol impact area; or
- (B) Threatens the welfare, health, peace or safety of an alcohol impact area's visitors or occupants;
- (ii) Submit findings of fact that demonstrate the absence of a pervasive pattern of public intoxication or public consumption of liquor as documented in crime statistics, police reports, emergency medical response data, detoxification reports, sanitation reports, public health records or similar records; and
- (iii) Demonstrate how the absence of conditions or restrictions will ((reduce)) affect chronic public inebriation or illegal activity associated with off-premises sales or liquor consumption (see subsection (3) of this section).
- (e) An affected party may submit a written request for one twenty-day extension of the comment period, which the

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board may grant provided that an affected party provides sufficient reason why he or she is unable to meet the twenty-day deadline.

WSR 16-19-101 PROPOSED RULES LIQUOR AND CANNABIS BOARD

[Filed September 21, 2016, 10:56 a.m.]

Original Notice.

Preproposal statement of inquiry was filed as WSR 16-09-118.

Title of Rule and Other Identifying Information: WAC 314-35-010 Vapor products—Introduction, 314-35-020 Vapor product licenses required—Licensing requirements, denials, suspensions, and revocations, 314-35-030 Vapor product licensee recordkeeping requirements, and 314-35-040 Age-restricted vapor products retailer licensed locations.

Hearing Location(s): Washington State Liquor and Cannabis Board (WSLCB), Board Room, 3000 Pacific Avenue S.E., Olympia, WA 98504, on November 2, 2016, at 10:00 a.m.

Date of Intended Adoption: On or after November 2, 2016.

Submit Written Comments to: Joanna Eide, Policy and Rules Coordinator, P.O. Box 43080, Olympia, WA 98504, e-mail rules@lcb.wa.gov, fax (360) 664-9689, by November 2, 2016.

Assistance for Persons with Disabilities: Contact Joanna Eide by October 26, 2016, (360) 664-1622.

Purpose of the Proposal and Its Anticipated Effects, Including Any Changes in Existing Rules: The purpose of this rule making is to create a new chapter in Title 314 WAC, chapter 314-35 WAC, to implement ESSB 6328 relating to vapor products regulation passed during the 2016 legislative session, codified mostly in chapter 70.345 RCW. Rules address administrative provisions regarding how WSLCB will handle licensing, including when to approve or deny a license, as well as records-generating [record-generating] and records keeping [recordkeeping] requirements, and reporting on age-restricted vapor products retail locations.

Reasons Supporting Proposal: Rule changes are necessary to implement changes made to statute by the legislature during the 2016 legislative session creating a new regulatory scheme for vapor products. The new rules proposed as part of this rule making supplement the laws created by the legislature, mostly found in chapter 70.345 RCW and are necessary to regulate the new vapor product licenses created. WSLCB needs these rules in place to ensure the proper administration of vapor products licenses and to ensure licensees comply with state law regarding vapor products.

Statutory Authority for Adoption: RCW 70.345.020 and 70.345.090.

Statute Being Implemented: RCW 70.345.020 and 70.345.090.

Rule is not necessitated by federal law, federal or state court decision.

Name of Proponent: WSLCB, governmental.

Name of Agency Personnel Responsible for Drafting: Joanna Eide, Rules/Policy Coordinator, 3000 Pacific Avenue S.E., Olympia, WA 98504, (360) 664-1622; Implementation and Enforcement: Justin Nordhorn, Chief Enforcement, 3000 Pacific Avenue S.E., Olympia, WA 98504, (360) 664-1726.

A small business economic impact statement has been prepared under chapter 19.85 RCW.

Small Business Economic Impact Statement

A small business economic impact statement (SBEIS) has been prepared under chapter 19.85 RCW for the proposed new chapter concerning vapor products rules, chapter 314-35 WAC.

1. Description of Reporting, Recordkeeping and Other Compliance Requirements of the Proposed Rule: The proposed new chapter in Title 314 WAC regarding vapor products is in response to ESSB 6328 passed by the legislature during the 2016 legislative session and codified primarily in chapter 70.345 RCW. The proposed rules in this rule making are in addition to the requirements in chapter 70.345 RCW. This rule making is aimed primarily at the creation [of] administrative provisions relating to vapor products license applications, and how WSLCB will handle applications, renewals, suspensions, and revocations of vapor products licenses.

The proposed new rules include record-generation requirements [and] a new five-year recordkeeping requirement for vapor products licensees in new WAC 314-35-030. Record-generation requirements are designed to mirror those records that are generally created in the normal course of business operations. Recordkeeping requirements are proposed so WSLCB enforcement officers may inspect records to ensure vapor products licensees are adhering to state law requirements that vapor products licensees only purchase from or sell to other vapor products licensees unless selling directly to the end consumer. Licensees may maintain records in any form they wish, so long as the records are available at the licensed location for inspection. The recordkeeping requirements included in this rule making are similar to those requirements for other licensees WSLCB regulates, including tobacco licensees.

The proposed new rules also include a reporting requirement should a vapor products retailer license applicant or holder of a license wish to have an age-restricted location in new WAC 314-35-040. This reporting may be accomplished at the time of application for a vapor products retail license, or at a later date should a licensed vapor products retailer choose to change the retail location to an age-restricted location so long as the licensee gives WSLCB ten days advance notice. Retailers may revert back to an unrestricted location if they so choose, but likewise must report this change at least ten days prior to doing so. The reporting requirement allows a vapor products licensee to report using an online form made available by WSLCB.

2. Kinds of Professional Services That a Small Business is Likely to Need in Order to Comply with Such Requirements: Applicants for vapor products licenses and vapor products licensees will not likely need professional ser-

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vices to comply with the requirements in proposed new chapter 314-35 WAC.

3. Costs of Compliance for Businesses, Including Costs of Equipment, Supplies, Labor and Increased Administrative Costs: There should be little to no costs associated with complying with the proposed record-generation requirements in this rule making. Businesses generally produce invoices or receipts when selling products, and this rule making is intended to require records creation similar to those records that businesses would generate in the normal course of business.

The proposed records keeping [recordkeeping] requirements in this rule making may have some minor costs associated with compliance as licensees will have to keep and maintain records for potential inspection by WSLCB staff. However, this requirement is flexible and licensees will have the option to choose the recordkeeping method that is most cost-effective for the licensee.

The reporting requirement for age-restricted vapor products retail locations should have little to no costs for compliance since reporting will be done either at the time of application for a license or at a later date should a license holder wish to change the age-restricted status of their business location. Additionally, reporting at a time later than the application for the license may be done via a form that WSLCB will make available online, thus facilitating the ease of reporting and reducing costs as much as possible.

- 4. Will Compliance with the Rules Cause Businesses to Lose Sales or Revenue? WSLCB does not anticipate that the new requirements proposed in this rule making will impact sales or revenue generated from those sales.
- 5. Costs of Compliance for Small Businesses Compared with the Cost of Compliance for the Ten Percent of Businesses That are the Largest Businesses Required to Comply with the Proposed Rules Using One or More of the Following as a Basis for Comparing Costs:
 - a. Cost per employee;
 - b. Cost per hour of labor; or
 - c. Cost per one hundred dollars of sales:

Many vapor products businesses are small businesses. However, these businesses vary in size, costs per employee, costs per hour of labor, and costs per one hundred dollars in sales for a multitude of reasons, including the business type. These businesses have not been regulated thus far by WSLCB - new chapter 70.345 RCW imposed by the 2016 legislature created the first regulatory scheme for vapor products businesses beyond standard business requirements in preexisting laws and rules. Because these businesses did not have any reporting requirements or a licensing requirement with WSLCB prior to the creation of chapter 70.345 RCW, WSLCB has little data on the sizes of the businesses that deal in vapor products. Efforts are being made to assess these businesses as we move forward in the new regulatory construct, and through WSLCB's ongoing education and outreach efforts with these businesses.

Costs will vary depending on the level of activity the licensee engages in, the location they are situated in, and other business decisions that individual licensees make. The costs for compliance with baseline records creation and maintenance requirements, though they may vary based on

individual choices by businesses and the size of the business, are expected to be minor regardless of business size. Larger businesses may have more costs associated with compliance than smaller businesses as they will generate more records if they deal in larger volumes of products and sales.

- 6. Steps Taken by the Agency to Reduce the Costs of the Rule on Small Businesses, or Reasonable Justification for Not Doing So: WSLCB has reduced the amount of costs on small businesses through maintaining flexibility in records keeping [recordkeeping] and records generation [record-generation] requirements in proposed rules and by attempting to use standard business practices as a basis for proposed records-generation requirements. Additionally, the reporting requirements for age-restricted businesses are designed to be as easy as possible to comply with through allowing a business to report age-restricted status at the time of application for a vapor products license or through the use of a WSLCB created form that will be available online should a license holder wish to change its age-restricted status at a later date.
- 7. A Description of How the Agency Will Involve Small Businesses in the Development of the Rule: Most vapor products businesses are small businesses. They are invited to provide feedback to the rules during the rule-making process. WSLCB enforcement staff is also conducting a large, ongoing educational effort to inform these previously unregulated businesses of the new requirements in state law due to the passage of ESSB 6328 (codified mostly in chapter 70.345 RCW). WSLCB met with stakeholder groups to discuss the new requirements imposed by chapter 70.345 RCW and will continue to work with stakeholder groups and vapor products businesses to share information and ensure businesses have what they need to comply with the new requirements in state law and this rule-making proposal.
- 8. A List of Industries That Will Be Required to Comply with the Rule: Businesses who engage in the manufacturing, sale, and distribution of vapor products, including stand-alone vapor retail locations, gas stations and convenience stores, manufacturing businesses, and distribution businesses.
- 9. An Estimate of the Number of Jobs That Will Be Created or Lost as a Result of Compliance with the Proposed Rule: The changes in this rule making are not likely to result in the loss or creation of jobs.

A copy of the statement may be obtained by contacting Joanna Eide, Policy and Rules Coordinator, Washington State Liquor and Cannabis Board, 3000 Pacific Avenue S.E., Olympia, WA 98504, phone (360) 664-1622, fax (360) 664-9689, e-mail Joanna.Eide@lcb.wa.gov.

A cost-benefit analysis is not required under RCW 34.05.328.

September 21, 2016 Jane Rushford Chair

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Chapter 314-35 WAC

VAPOR PRODUCTS

NEW SECTION

WAC 314-35-010 Vapor products—Introduction. This chapter provides rules that apply in addition to those requirements regarding the manufacturers, distributors, and retail sellers of vapor products provided in chapter 70.345 RCW. Penalties for violations of this chapter and for violations of chapter 70.345 RCW are provided in chapter 70.345 RCW.

NEW SECTION

WAC 314-35-020 Vapor product licenses required—Licensing requirements, denials, suspensions, and revocations. (1) The vapor product license types are: Vapor product retailer's license, vapor product distributor's license, and vapor product delivery sale license. A vapor product retailer's license, vapor product distributor's license, or a vapor product delivery sale license is required to perform the functions of a vapor product retailer, vapor product distributor, or a vapor product delivery seller, respectively, whether or not the vapor product contains nicotine.

- (2) A vapor product retailer's license, vapor product distributor's license, or a vapor product delivery sale license cannot be issued to a location that is a domicile.
- (3) A person or entity must meet certain qualifications to receive a vapor product license, and must continue to meet those qualifications to maintain the license.
- (4) No more than one license of each vapor product license type may be issued at a single location.
- (5) A licensed location must be separated from other vapor product businesses and not accessible through neighboring businesses.
- (6) For the purpose of reviewing an initial or renewal application for a vapor product license or considering the denial of a license application, the WSLCB may consider prior criminal conduct of the applicant and criminal history record within the five years prior to the date the application is received by the WSLCB. The WSLCB uses the following point system to determine a person's qualification for a license. The WSLCB will not normally issue a vapor product license to a person or entity that has accumulated eight or more points as determined in (a) through (e) of this subsection. If a case is pending for an alleged offense that would earn eight or more points in total for the applicant, the WSLCB will hold the application until the final disposition of the pending case. If the case does not reach final disposition within ninety days of application, the WSLCB may administratively close the application.
- (a) Felony conviction within the five years immediately prior to application: Twelve points.
- (b) Gross misdemeanor conviction for violation of chapter 82.24 or 82.26 RCW within the five years immediately prior to application: Twelve points.
- (c) Other gross misdemeanor conviction within three years immediately prior to application: Five points.

- (d) Misdemeanor conviction within three years immediately prior to application: Four points.
- (e) Nondisclosure of any of the above: Four points each in addition to underlying points.
- (7) For the purpose of reviewing an initial or renewal application for a vapor product license and considering the denial of a vapor product license application, the WSLCB will conduct an investigation of all applicants' liquor and cigarette and tobacco products law and rule administrative violation history. The WSLCB will not normally issue a vapor product license to a person or entity that has four or more violations within the two years prior to the date the application is received by the WSLCB.
- (8) If the WSLCB makes an initial decision to deny a vapor product license or renewal, or suspend or revoke a license, for the reasons listed above or as provided in chapter 70.345 RCW, the applicant or licensee may request a hearing subject to the applicable provisions under chapter 34.05 RCW. Appeals under this section will be conducted under a brief adjudicative proceeding pursuant to WAC 314-42-110 through 314-42-130, and RCW 34.05.482 through 34.05.494.

NEW SECTION

WAC 314-35-030 Vapor product licensee record-keeping requirements. (1) Vapor product distributors and manufacturers must keep complete and accurate records, including itemized invoices, at each place of business for that place of business of vapor products held, purchased, manufactured, brought in or caused to be brought in from without the state, or shipped or transported to retailers in this state, and of all sales of vapor products made. These records must show the names and addresses of purchasers, the inventory of all vapor products, and other pertinent papers and documents relating to the purchase, sale, or disposition of vapor products. All invoices and other records required by this section to be kept must be preserved for a period of five years from the date of the invoices or other documents or the date of the entries appearing in the records.

- (2) Vapor product licensees must render with each sale of vapor products to persons other than ultimate consumers itemized invoices showing the seller's name and address, the purchaser's name and address, the date of sale, and all prices. Vapor product licensees must preserve legible copies of all such invoices for five years from the date of sale.
- (3) Every licensed vapor product retailer must procure itemized invoices of all vapor products purchased. The invoices must show the seller's name and address, the date of purchase, and all prices and discounts.
- (4) The licensed vapor product retailer must keep at each retail outlet copies of complete, accurate, and legible invoices for that retail outlet or place of business. All invoices required to be kept under this section must be preserved for five years from the date of purchase.

NEW SECTION

WAC 314-35-040 Age-restricted vapor products retailer licensed locations. (1) Age-restricted vapor products retailer licensed locations must register as such with the WSLCB by indicating at the time of application or within ten

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days prior to becoming an age-restricted location. A vapor product retail licensee must inform the WSLCB in writing ten business days prior to a change in the age-restriction status. The appropriate form is available on the WSLCB web site.

(2) Holders of a vapor product retailer license where entry into the licensed premises is age-restricted to persons eighteen years of age or older must post signs provided by the WSLCB at each entrance point to indicate the premises is age-restricted. Such signs must not be removed at any time during opening hours of the licensed vapor products retail establishment.

WSR 16-19-108 PROPOSED RULES DEPARTMENT OF LICENSING

[Filed September 21, 2016, 11:30 a.m.]

Original Notice.

Preproposal statement of inquiry was filed as WSR 16-13-043.

Title of Rule and Other Identifying Information: WAC 308-13-055 Do I need a stamp or seal?

Hearing Location(s): Department of Licensing, 405 Black Lake Boulevard S.W., Room 2105, Olympia, WA 98502, on October 26, 2016, at 1:00 p.m.

Date of Intended Adoption: October 27, 2016.

Submit Written Comments to: Julie Konnersman, Board of Licensure for Landscape Architects, P.O. Box 9012, Olympia, WA 98507-9012, e-mail landscape@dol.wa.gov, fax (360) 570-7098, by October 25, 2016.

Assistance for Persons with Disabilities: Contact Jenni Lingle by October 25, 2016, TTY (360) 664-0116 or (360) 664-1564.

Purpose of the Proposal and Its Anticipated Effects, Including Any Changes in Existing Rules: The proposed rule change will replace the current required stamp design with a new design that has been presented by the landscape architecture industry and approved by the board of licensure for landscape architects. Only individuals licensed after the effective date of this rule will be required to obtain the new stamp.

Reasons Supporting Proposal: The regulated entities requested a change to the board-authorized seal/stamp.

Statutory Authority for Adoption: RCW 18.96.060.

Statute Being Implemented: RCW 18.96.150.

Rule is not necessitated by federal law, federal or state court decision.

Name of Proponent: Department of licensing, governmental

Name of Agency Personnel Responsible for Drafting: Julie Konnersman, 405 Black Lake Boulevard, Building 2, Olympia, (360) 664-1507; Implementation and Enforcement: Lorin Doyle, 405 Black Lake Boulevard, Building 2, Olympia, (360) 664-1386.

No small business economic impact statement has been prepared under chapter 19.85 RCW. Exempt under RCW 19.85.030 (1)(a) and 19.85.020(2). This rule will impose no costs on current licensees. Only individuals that get licensed

on or after the effective date of this rule will be required to obtain the new stamp.

A cost-benefit analysis is not required under RCW 34.05.328. The department of licensing is exempt from this requirement under RCW 34.05.328 (5)(a).

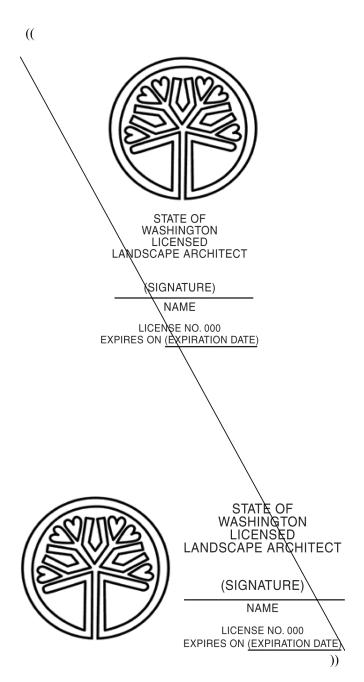
September 21, 2016 Damon Monroe Rules Coordinator

<u>AMENDATORY SECTION</u> (Amending WSR 10-12-116, filed 6/2/10, effective 7/3/10)

WAC 308-13-055 Do I need a stamp or seal? If you were issued your license on or after ((July 1, 2010)) January 1, 2017, you must have a seal/stamp of the design authorized by the board, bearing your name, license number and the legend "Licensed landscape architect, state of Washington." The size of the seal/stamp may be ((used in a horizontal or vertical format)) adjusted provided it remains readable. Other deviations are not allowed. Examples of the board-authorized seal/stamp appear below.

If you were licensed before ((July 1, 2010)) January 1, 2017, you may continue to use your existing registration stamp.

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- (1) Your seal/stamp must include your signature and your license expiration date.
 - (2) You must seal/stamp the following:
- (a) All technical submissions required for building permits, regulatory approvals and/or construction drawings that are filed with authorities having jurisdiction;
 - (b) Drawings prepared by you on each sheet;
- (c) Specifications and other technical submissions need only be sealed/stamped on the cover, title page, and all pages of the table of contents.

Your seal/stamp shall not be affixed to any drawings not prepared by you or your regularly employed subordinates, or not reviewed by you. If you seal/stamp drawings or specifications that you have reviewed, you shall be responsible to the same extent as if those drawings or specifications were prepared by you.

Without exception, these sealing/stamping requirements for landscape architects shall apply to all work prepared or supervised by the landscape architect.

- (3) The terms "signature" or "signed" as used in chapter 18.96 RCW and this chapter, shall mean the following:
- (a) A handwritten identification or a digital representation of your handwritten identification that represents the act of putting your name on a document to attest to its validity. The handwritten or digital identification must be:
- (i) Original and written by hand, or a scanned image of an original, handwritten identification;
- (ii) Permanently affixed to the document(s) being certified;
 - (iii) Applied to the document by the identified licensee;
 - (iv) Placed adjacent to the seal/stamp of the licensee;
- (b) A digital identification that is an electronic authentication process attached to or logically associated with an

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electronic document. The digital identification may include a scanned or digitized signature. The digital identification must be:

- (i) Unique to the licensee using it;
- (ii) Capable of independent verification;
- (iii) Under the exclusive control of the licensee using it;
- (iv) Linked to a document in such a manner that the digital identification is invalidated if any data in the document is changed.

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