

UTAH STATE BULLETIN

OFFICIAL NOTICES OF UTAH STATE GOVERNMENT
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The *Utah State Bulletin (Bulletin)* is an official noticing publication of the executive branch of Utah state government. The Division of Administrative Rules, part of the Department of Administrative Services, produces the *Bulletin* under authority of Section 63G-3-402.

The Portable Document Format (PDF) version of the *Bulletin* is the official version. The PDF version of this issue is available at <http://www.rules.utah.gov/publicat/bulletin.htm>. Any discrepancy between the PDF version and other versions will be resolved in favor of the PDF version.

Inquiries concerning the substance or applicability of an administrative rule that appears in the *Bulletin* should be addressed to the contact person for the rule. Questions about the *Bulletin* or the rulemaking process may be addressed to: Division of Administrative Rules, PO Box 141007, Salt Lake City, Utah 84114-1007, telephone 801-538-3764. Additional rulemaking information and electronic versions of all administrative rule publications are available at <http://www.rules.utah.gov/>.

The information in this *Bulletin* is summarized in the *Utah State Digest (Digest)* of the same volume and issue number. The *Digest* is available by e-mail subscription or online. Visit <http://www.rules.utah.gov/publicat/digest.htm> for additional information.

Division of Administrative Rules, Salt Lake City 84114

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EDITOR'S NOTES

Legislation Affecting Administrative Rulemaking

During the 2014 General Session, the Legislature passed the following bills that affect rulemaking.

H.B. 14, Administrative Rulemaking Amendments (Rep. C. Oda)

H.B. 14, entitled "Administrative Rulemaking Amendments", passed. H.B. 14 amends Section 63G-3-305, which deals with the five-year review requirement.

H.B. 14 provides that after review, if the agency determines that a rule should be repealed, the rule analysis for the repeal must include a statement that the repeal is the result of the agency's five-year review. The Division is required to make reasonable effort to notify the agency that a rule is due for review at least 180 days before the review deadline. The statute allows an agency to file one 120-day extension if it finds that it will not be able to meet the review deadline. Most significantly, if an agency does not comply with the requirement to file the review and does not file an extension, the rule *automatically* expires on the day immediately after the date of the missed deadline. After a rule expires, the division is then required to publish a notice that the rule has expired and is no longer enforceable, remove the rule from the code, and notify the agency that the rule has expired.

The Governor signed H.B. 14; it takes effect on July 1, 2014. Questions about H.B. 14 and the five-year review process may be directed to Ken Hansen, 801-538-3777. Additional information about H.B. 14 is available on the Legislature's web site at <http://le.utah.gov/~2014/bills/static/hb0014.html>.

S.B. 35, Administrative Rules Reauthorization (Sen. H. Stephenson)

S.B. 35, entitled "Administrative Rules Reauthorization", passed. S.B. 35 is the legislation required annually by Subsection 63G-3-502(3). The bill reauthorizes all administrative rules. The Governor signed S.B. 35; under the terms of Section 2 of the bill, it takes effect on May 1, 2014.

The law governing the reauthorization of administrative rules is found at Section 63G-3-502. Questions about the reauthorization process may be directed to Ken Hansen, 801-538-3777. Additional information about S.B. 35 is available on the Legislature's web site at <http://le.utah.gov/~2014/bills/static/sb0035.html>.

Information about legislation affecting administrative rulemaking can be found on the Division of Administrative Rules' web site at <http://www.rules.utah.gov/law/legislation.htm>.

End of the Editor's Notes Section

SPECIAL NOTICES

Health Health Care Financing, Coverage and Reimbursement Policy

Notice for May 2014 Medicaid Rate Changes

Effective May 1, 2014, Utah Medicaid will adjust its rates consistent with approved methodologies. Rate adjustments include new codes priced consistent with approved Medicaid methodologies as well as potential adjustments to existing codes. All rate changes are posted to the web and can be viewed at: <http://health.utah.gov/medicaid/stplan/bcrp.htm>.

Health Health Care Financing, Coverage and Reimbursement Policy

Annual Rebasing Update to the Medicaid State Plan

The Division of Medicaid and Health Financing (DMHF) is updating its Medicaid State Plan through the following State Plan Amendments (SPAs):

SPA 14-014-UT Reimbursement for Home Health Services;
SPA 14-015-UT Reimbursement for Physician and Anesthesia Services;
SPA 14-016-UT Reimbursement for Optometry Services;
SPA 14-017-UT Reimbursement for Speech Pathology Services;
SPA 14-018-UT Reimbursement for Audiology Services;
SPA 14-019-UT Reimbursement for Chiropractic Services;
SPA 14-020-UT Reimbursement for Eyeglasses Services;
SPA 14-021-UT Reimbursement for Clinic Services;
SPA 14-022-UT Reimbursement for Physical Therapy and Occupational Therapy;
SPA 14-023-UT Reimbursement for Rehabilitative Mental Health Services;
SPA 14-024-UT Reimbursement for Licensed Practitioner Services; and
SPA 14-025-UT Reimbursement for Transportation Services.

Based on the existing State Plan requirement to annually rebase pricing of physician codes, these amendments update the State Plan by changing the effective date of the pricing to July 1, 2014.

DMHF anticipates these changes to be budget neutral.

The proposed changes are pending Centers for Medicare and Medicaid Services approval. A copy of the changes may be obtained from Craig Devashrayee (801-538-6641), or by writing the Technical Writing Unit, Utah Department of Health, PO Box 143102, Salt Lake City, UT 84114-3102. Comments are welcome at the same address. Copies of the changes are also available at local county health department offices.

End of the Special Notices Section

NOTICES OF PROPOSED RULES

A state agency may file a **PROPOSED RULE** when it determines the need for a substantive change to an existing rule. With a **NOTICE OF PROPOSED RULE**, an agency may create a new rule, amend an existing rule, repeal an existing rule, or repeal an existing rule and reenact a new rule. Filings received between March 15, 2014, 12:00 a.m., and April 01, 2014, 11:59 p.m. are included in this, the April 15, 2014, issue of the *Utah State Bulletin*.

In this publication, each **PROPOSED RULE** is preceded by a **RULE ANALYSIS**. This analysis provides summary information about the **PROPOSED RULE** including the name of a contact person, anticipated cost impact of the rule, and legal cross-references.

Following the **RULE ANALYSIS**, the text of the **PROPOSED RULE** is usually printed. New rules or additions made to existing rules are underlined (example). Deletions made to existing rules are struck out with brackets surrounding them (~~example~~). Rules being repealed are completely struck out. A row of dots in the text between paragraphs (.) indicates that unaffected text from within a section was removed to conserve space. Unaffected sections are not usually printed. If a **PROPOSED RULE** is too long to print, the Division of Administrative Rules may include only the **RULE ANALYSIS**. A copy of each rule that is too long to print is available from the filing agency or from the Division of Administrative Rules.

The law requires that an agency accept public comment on **PROPOSED RULES** published in this issue of the *Utah State Bulletin* until at least May 15, 2014. The agency may accept comment beyond this date and will indicate the last day the agency will accept comment in the **RULE ANALYSIS**. The agency may also hold public hearings. Additionally, citizens or organizations may request the agency hold a hearing on a specific **PROPOSED RULE**. Section 63G-3-302 requires that a hearing request be received by the agency proposing the rule "in writing not more than 15 days after the publication date of the proposed rule."

From the end of the public comment period through August 13, 2014, the agency may notify the Division of Administrative Rules that it wants to make the **PROPOSED RULE** effective. The agency sets the effective date. The date may be no fewer than seven calendar days after the close of the public comment period nor more than 120 days after the publication date of this issue of the *Utah State Bulletin*. Alternatively, the agency may file a **CHANGE IN PROPOSED RULE** in response to comments received. If the Division of Administrative Rules does not receive a **NOTICE OF EFFECTIVE DATE OR A CHANGE IN PROPOSED RULE**, the **PROPOSED RULE** lapses.

The public, interest groups, and governmental agencies are invited to review and comment on **PROPOSED RULES**. *Comment may be directed to the contact person identified on the **RULE ANALYSIS** for each rule.*

PROPOSED RULES are governed by Section 63G-3-301, Rule R15-2, and Sections R15-4-3, R15-4-4, R15-4-5a, R15-4-9, and R15-4-10.

The Proposed Rules Begin on the Following Page

**Commerce, Occupational and
Professional Licensing
R156-60-102
Definitions**

NOTICE OF PROPOSED RULE

(Amendment)

DAR FILE NO.: 38390

FILED: 04/01/2014

RULE ANALYSIS

PURPOSE OF THE RULE OR REASON FOR THE CHANGE: The Division is proposing this rule filing to further define an existing license exemption established in Subsection 58-60-107(8). The rule filing is made at the request of the affected mental health licensing boards and professional associations.

SUMMARY OF THE RULE OR CHANGE: Subsection R156-60-102(6) is added to define the term "on-the-job training program" as used in Subsection 58-60-107(2)(g). The proposed amendment creates a 45-day exemption applicable to individuals who completed all required coursework for a degree but who do not yet qualify for a license because they are waiting for their school to formally award the degree. The gap between the completion date of a final course of a program and the formal awarding of a degree can sometimes be several weeks. It takes additional time for an individual to mail transcripts to the Division and for the Division to issue a license after receipt of the transcripts. This proposed amendment allows these individuals to continue to legally work under an exemption while they wait to obtain a license for a maximum of 45 days under certain conditions specified in the rule.

STATUTORY OR CONSTITUTIONAL AUTHORIZATION FOR THIS RULE: Section 58-60-101 and Subsection 58-1-106(1)(a) and Subsection 58-1-202(1)(a)

ANTICIPATED COST OR SAVINGS TO:

◆ **THE STATE BUDGET:** The Division will incur minimal costs of approximately \$100 to print and distribute the rule once the proposed amendments are made effective. Any costs incurred will be absorbed in the Division's current budget. No other cost impact to the Division is anticipated because the exemption is self-executing.

◆ **LOCAL GOVERNMENTS:** The proposed amendments only apply to applicants for licensure in mental health therapy and substance use disorder counseling classifications. As a result, the proposed amendments do not apply to local governments.

◆ **SMALL BUSINESSES:** Many mental health agencies and private practices are small businesses that employ individuals as they transition from being a student to a licensee. These businesses may experience a cost savings under the

proposed amendment because it enables individuals to continue therapy or counseling with their clients for up to 45 days after the individual completes their coursework. If a business decides to keep the student on staff after completion of their internship course, businesses will avoid the expense of hiring a new employee to perform the services provided by the student. The Division is not able to quantify this impact due to a wide range of circumstances.

◆ **PERSONS OTHER THAN SMALL BUSINESSES, BUSINESSES, OR LOCAL GOVERNMENTAL ENTITIES:** Many individuals working in the mental health field transitioning from being a student to a licensee may experience a cost savings because this proposed amendment enables them to continue therapy or counseling with clients for up to 45 days after the individual completes their coursework. It may also increase the likelihood that an internship site will continue to employ an individual after they complete their internship. The Division is not able to quantify this impact due to a wide range of circumstances.

COMPLIANCE COSTS FOR AFFECTED PERSONS: Many individuals working in the mental health field transitioning from being a student to a licensee may experience a cost savings because this proposed amendment enables them to continue therapy or counseling with clients for up to 45 days after the individual completes their coursework. It may also increase the likelihood that an internship site will continue to employ an individual after they complete their internship. The Division is not able to quantify this impact due to a wide range of circumstances.

COMMENTS BY THE DEPARTMENT HEAD ON THE FISCAL IMPACT THE RULE MAY HAVE ON BUSINESSES: This filing creates a program under which an individual who has recently completed pre-licensing education can work for a period of up to 45 days while the licensing process is completed. Businesses that wish to employ such an individual might realize a financial benefit from being able to streamline their hiring processes. Such benefits will vary and cannot be estimated.

THE FULL TEXT OF THIS RULE MAY BE INSPECTED, DURING REGULAR BUSINESS HOURS, AT:

COMMERCE
OCCUPATIONAL AND PROFESSIONAL
LICENSING
HEBER M WELLS BLDG
160 E 300 S
SALT LAKE CITY, UT 84111-2316
or at the Division of Administrative Rules.

DIRECT QUESTIONS REGARDING THIS RULE TO:

◆ Rich Oborn by phone at 801-530-6767, by FAX at 801-530-6511, or by Internet E-mail at roborn@utah.gov

INTERESTED PERSONS MAY PRESENT THEIR VIEWS ON THIS RULE BY SUBMITTING WRITTEN COMMENTS NO LATER THAN AT 5:00 PM ON 05/15/2014

INTERESTED PERSONS MAY ATTEND A PUBLIC HEARING REGARDING THIS RULE:

♦ 04/23/2014 10:00 AM, Heber Wells Bldg, 160 E 300 S, Conference Room 474 (fourth floor), Salt Lake City, UT

THIS RULE MAY BECOME EFFECTIVE ON: 05/22/2014

AUTHORIZED BY: Mark Steinagel, Director

R156. Commerce, Occupational and Professional Licensing.

R156-60. Mental Health Professional Practice Act Rule.

R156-60-102. Definitions.

In addition to the definitions in Title 58, Chapters 1 and 60, as used in Title 58, Chapters 1 and 60, or this rule:

(1) "Approved diagnostic and statistical manual for mental disorders" means the following:

(a) Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition: DSM-5 or Fourth Edition: DSM-IV published by the American Psychiatric Association;

(b) 2013 ICD-9-CM for Physicians, Volumes 1 and 2 Professional Edition published by the American Medical Association; or

(c) ICD-10-CM 2013: The Complete Official Draft Code Set published by the American Medical Association.

(2) "Client or patient" means an individual who, when competent requests, or when not competent to request is lawfully provided professional services by a mental health therapist when the mental health therapist agrees verbally or in writing to provide professional services to that individual, or without an overt agreement does in fact provide professional services to that individual.

(3) "Direct supervision" of a supervisee in training, as used in Subsection 58-60-205(1)(f), 58-60-305(1)(f), and 58-60-405(1)(f), means:

(a) a supervisor meeting with the supervisee when both are physically present in the same room at the same time; or

(b) a supervisor meeting with the supervisee remotely via real-time electronic methods that allow for visual and audio interaction between the supervisor and supervisee under the following conditions:

(i) the supervisor and supervisee shall enter into a written supervisory agreement which, at a minimum, establishes the following:

(A) frequency, duration, reason for, and objectives of electronic meetings between the supervisor and supervisee;

(B) a plan to ensure accessibility of the supervisor to the supervisee despite the physical distance between their offices;

(C) a plan to address potential conflicts between clinical recommendations of the supervisor and the representatives of the agency employing the supervisee;

(D) a plan to inform a supervisee's client or patient and employer regarding the supervisee's use of remote supervision;

(E) a plan to comply with the supervisor's duties and responsibilities as established in rule; and

(F) a plan to physically visit the location where the supervisee practices on at least a quarterly basis during the period of supervision or at a lesser frequency as approved by the Division in collaboration with the Board;

(ii) the supervisee submits the supervisory agreement to the Division and obtains approval before counting direct supervision completed via live real-time methods toward the 100 hour direct supervision requirement; and

(iii) in evaluating a supervisory agreement, the Division shall consider whether it adequately protects the health, safety, and welfare of the public.

(4) "Employee" means an individual who is or should be treated as a W-2 employee by the Internal Revenue Service.

(5) "General supervision" means that the supervisor is available for consultation with the supervisee by personal face to face contact, or direct voice contact by telephone, radio, or some other means within a reasonable time consistent with the acts and practices in which the supervisee is engaged.

(6) "On-the-job training program" means a program that:

(a) is applicable to individuals who have completed all courses required for graduation in a degree or formal training program that would qualify for licensure under this chapter;

(b) starts immediately upon completion of all courses required for graduation;

(c) ends 45 days from the date it begins, or upon licensure, whichever is earlier, and may not be extended or used a second time;

(d) is completed while the individual is an employee of a public or private agency engaged in mental health therapy or substance use disorder counseling; and

(e) is under supervision by a qualified individual licensed under this chapter which includes supervision meetings on at least a weekly basis when the supervisee and supervisor are physically present in the same room at the same time.

KEY: licensing, mental health, therapists

Date of Enactment or Last Substantive Amendment: [~~October 22, 2013~~]2014

Notice of Continuation: July 27, 2009

Authorizing, and Implemented or Interpreted Law: 58-1-106(1)(a); 58-1-202(1)(a); 58-60-101

Commerce, Occupational and Professional Licensing

R156-77

Direct-Entry Midwife Act Rule

NOTICE OF PROPOSED RULE

(Amendment)

DAR FILE NO.: 38375

FILED: 03/18/2014

RULE ANALYSIS

PURPOSE OF THE RULE OR REASON FOR THE CHANGE: The Division and Direct-Entry Midwife Board are proposing amendments to delete Section R156-77-604 since it is no longer needed as required by Subsection 58-77-601(6).

SUMMARY OF THE RULE OR CHANGE: In Section R156-77-103, the term "division" is capitalized in this section. Section R156-77-604 regarding submission of outcome data is being deleted in its entirety since the information in this section is no longer required by Subsection 58-77-601(6).

STATUTORY OR CONSTITUTIONAL AUTHORIZATION FOR THIS RULE: Subsection 58-1-106(1)(a) and Subsection 58-1-202(1)(a) and Subsection 58-77-202(4) and Subsection 58-77-601(2)

ANTICIPATED COST OR SAVINGS TO:

- ◆ **THE STATE BUDGET:** The Division will incur minimal costs of approximately \$50 to print and distribute the rule once the proposed amendments are made effective. Any costs incurred will be absorbed in the Division's current budget.
- ◆ **LOCAL GOVERNMENTS:** The proposed amendments only apply to licensed direct-entry midwives and applicants for licensure in that classification. As a result, the proposed amendments do not apply to local governments.
- ◆ **SMALL BUSINESSES:** The proposed amendments only apply to licensed direct-entry midwives and applicants for licensure in that classification. Licensees and applicants for licensure may work in a small business; however, the proposed amendments would not directly affect the business.
- ◆ **PERSONS OTHER THAN SMALL BUSINESSES, BUSINESSES, OR LOCAL GOVERNMENTAL ENTITIES:** The proposed amendments only apply to licensed direct-entry midwives and applicants for licensure in that classification. Statutory requirements have been met with regards to the submission of outcome data and the Division has determined there are no costs or savings associated with these proposed amendments.

COMPLIANCE COSTS FOR AFFECTED PERSONS: The proposed amendments only apply to licensed direct-entry midwives and applicants for licensure in that classification. Statutory requirements have been met with regards to the submission of outcome data and the Division has determined there are no costs or savings associated with these proposed amendments.

COMMENTS BY THE DEPARTMENT HEAD ON THE FISCAL IMPACT THE RULE MAY HAVE ON BUSINESSES: This filing removes a requirement that is no longer in effect. No fiscal impact to businesses is anticipated.

THE FULL TEXT OF THIS RULE MAY BE INSPECTED, DURING REGULAR BUSINESS HOURS, AT:

COMMERCE
OCCUPATIONAL AND PROFESSIONAL
LICENSING
HEBER M WELLS BLDG
160 E 300 S
SALT LAKE CITY, UT 84111-2316
or at the Division of Administrative Rules.

DIRECT QUESTIONS REGARDING THIS RULE TO:

- ◆ Debra Hobbins by phone at 801-530-6789, by FAX at 801-530-6511, or by Internet E-mail at dhobbins@utah.gov

INTERESTED PERSONS MAY PRESENT THEIR VIEWS ON THIS RULE BY SUBMITTING WRITTEN COMMENTS NO LATER THAN AT 5:00 PM ON 05/15/2014

THIS RULE MAY BECOME EFFECTIVE ON: 05/22/2014

AUTHORIZED BY: Mark Steinagel, Director

R156. Commerce, Occupational and Professional Licensing.

R156-77. Direct-Entry Midwife Act Rule.

R156-77-103. Authority - Purpose.

This rule is adopted by the [d]Division under the authority of Subsection 58-1-106(1)(a) to enable the [d]Division to administer Title 58, Chapter 77.

[
R156-77-604. Submission of Outcome Data.

~~In accordance with Subsection 58-77-601(5), an individual licensed as an LDEM must submit outcome data electronically to the MANA's Division of Research on the form prescribed by MANA, and in accordance to the policies and procedures established by MANA. Upon request of the Division, the licensee shall submit to the Division a copy of the data submitted to MANA. A licensee must also submit outcome data to the LDEM Outcome Database at least annually.]~~

KEY: licensing, midwife, direct-entry midwife

Date of Enactment or Last Substantive Amendment: [February 8, 2010]2014

Notice of Continuation: August 15, 2011

Authorizing, and Implemented or Interpreted Law: 58-1-106(1)(a); 58-1-202(1)(a); 58-77-202(4); 58-77-601(2)

Commerce, Real Estate
R162-2g
Real Estate Appraiser Licensing and
Certification Administrative Rules

NOTICE OF PROPOSED RULE

(Amendment)

DAR FILE NO.: 38389

FILED: 03/31/2014

RULE ANALYSIS

PURPOSE OF THE RULE OR REASON FOR THE CHANGE: The purpose of this amendment is to clarify that the new Utah education criteria for real property appraisers do not go into effect until 01/01/2015, when the new Appraisal Qualifications Board education criteria become effective.

SUMMARY OF THE RULE OR CHANGE: New education criteria for real property appraisers set forth in this rule amendment do not go into effect until 01/01/2015 when the new Appraisal Qualifications Board education criteria become effective.

STATUTORY OR CONSTITUTIONAL AUTHORIZATION FOR THIS RULE: Subsection 61-2g-201(2)(h) and Subsection 61-2g-202(1)

ANTICIPATED COST OR SAVINGS TO:

- ◆ **THE STATE BUDGET:** This amendment clarifies the date on which new requirements will go into effect. No impact to the state budget is anticipated.
- ◆ **LOCAL GOVERNMENTS:** Local governments are not required to comply with or enforce the rules governing appraisal licensing. No fiscal impact to local governments is anticipated.
- ◆ **SMALL BUSINESSES:** This amendment clarifies the date on which new requirements will go into effect. No fiscal impact to small businesses is anticipated.
- ◆ **PERSONS OTHER THAN SMALL BUSINESSES, BUSINESSES, OR LOCAL GOVERNMENTAL ENTITIES:** This amendment clarifies the date on which new requirements will go into effect. No fiscal impact to affected businesses is anticipated.

COMPLIANCE COSTS FOR AFFECTED PERSONS: This amendment clarifies the date on which new requirements will go into effect. Otherwise, the compliance costs are unchanged.

COMMENTS BY THE DEPARTMENT HEAD ON THE FISCAL IMPACT THE RULE MAY HAVE ON BUSINESSES: This filing clarifies that certain pre-licensing education requirements will go into effect on 01/01/2015. No fiscal impact to businesses is anticipated.

THE FULL TEXT OF THIS RULE MAY BE INSPECTED, DURING REGULAR BUSINESS HOURS, AT:

COMMERCE
 REAL ESTATE
 HEBER M WELLS BLDG
 160 E 300 S
 SALT LAKE CITY, UT 84111-2316
 or at the Division of Administrative Rules.

DIRECT QUESTIONS REGARDING THIS RULE TO:

◆ Justin Barney by phone at 801-530-6603, or by Internet E-mail at justinbarney@utah.gov

INTERESTED PERSONS MAY PRESENT THEIR VIEWS ON THIS RULE BY SUBMITTING WRITTEN COMMENTS NO LATER THAN AT 5:00 PM ON 05/15/2014

THIS RULE MAY BECOME EFFECTIVE ON: 05/22/2014

AUTHORIZED BY: Jonathan Stewart, Director

R162. Commerce, Real Estate.

R162-2g. Real Estate Appraiser Licensing and Certification Administrative Rules.

R162-2g-304b. Application to Sit for the State-Certified Residential Appraiser Exam.

~~(1)~~ Until December 31, 2014, an applicant to sit for the state-certified residential appraiser exam shall provide the following to the division:

(a) completed experience forms, as required by the division, evidencing at least 2,500 hours of total appraisal experience, at least 500 of which:

(i) meet the requirements of Subsection R162-2g-304d;
(ii) are completed during the time when the applicant is licensed as a state-licensed appraiser:

(A) with the division; or
(B) in another state, if licensure was required in that state at the time the appraisal was performed; and

(iii) are accrued in no fewer than 24 months;
(b) evidence of having successfully completed a state-certified residential appraiser pre-licensing curriculum that has been certified by the division pursuant to Subsection R162-2g-307b and
(c) a nonrefundable application fee.

~~[(1)-An]~~ (2) As of January 1, 2014, an applicant to sit for the state-licensed certified residential appraiser exam shall provide the following to the division:

(a) completed experience forms, as required by the division, evidencing at least 2,500 hours of total appraisal experience, at least 500 of which:

(i) meet the requirements of Subsection R162-2g-304d;
(ii) are completed during the time when the applicant is licensed as a state-licensed appraiser:

(A) with the division; or
(B) in another state, if licensure was required in that state at the time the appraisal was performed; and

(iii) are accrued in no fewer than 24 months;
(b) evidence of having received an associate degree or higher degree from an accredited:

(i) college;
(ii) junior college;
(iii) community college; or
(iv) university;

(c) evidence of having successfully completed a state-certified residential appraiser pre-licensing curriculum that has been certified by the division pursuant to Subsection R162-2g-307b; and
(d) a nonrefundable application fee.

~~[(2)]~~ (3) The pre-licensing curriculum required by Subsections (1)(b) and (2)(c) shall be provided by:

- (a) a college or university;
- (b) a community or junior college;
- (c) a real estate appraisal or real estate related organization;
- (d) a state or federal agency or commission;
- (e) a proprietary school;
- (f) a provider approved by a state certification and licensing agency; or

(g) the Appraisal Foundation or its boards.

~~[(3)](4)(a)~~ Upon determining that the applicant satisfies the education and experience requirements, the division shall issue to the applicant a form permitting the applicant to register for the examination.

(b) Upon being approved to register for the examination pursuant to this Subsection ~~[(3)](4)(a)~~, an applicant shall:

(i) return the examination application form to the testing service designated by the division; and

(ii) pay a nonrefundable examination fee to the testing service designated by the division.

(c) The permission to register to sit for the examination shall be valid for 24 months after issuance.

R162-2g-304c. Application to Sit for the State-Certified General Appraiser Exam.

(1) Until December 31, 2014, an applicant to sit for the state-certified general appraiser exam shall provide the following to the division:

(a) completed experience forms, as required by the division, evidencing at least 3,000 hours of total appraisal experience, 1,000 hours of which:

(i) meet the requirements of Subsection R162-2g-304d;

(ii) are completed during the time when the applicant is licensed as a state-licensed appraiser or state-certified residential appraiser:

(A) with the division; or

(B) in another state, if licensure was required in that state at the time the appraisal was performed; and

(iii) are accrued in no fewer than 30 months;

(b) evidence of having successfully completed a state-certified general appraiser pre-licensing curriculum that has been certified by the division pursuant to Subsection R162-2g-307b; and

(c) except as provided in this Subsection (5)(a), a nonrefundable application fee.

~~[(1) An]~~(2) As of January 1, 2015, an applicant to sit for the state-certified general appraiser exam shall provide the following to the division:

(a) completed experience forms, as required by the division, evidencing at least 3,000 hours of total appraisal experience, 1,000 hours of which:

(i) meet the requirements of Subsection R162-2g-304d;

(ii) are completed during the time when the applicant is licensed as a state-licensed appraiser or state-certified residential appraiser:

(A) with the division; or

(B) in another state, if licensure was required in that state at the time the appraisal was performed; and

(iii) are accrued in no fewer than 30 months;

(b) evidence of having received a bachelors degree or higher degree from an accredited college or university;

(c) evidence of having successfully completed a state-certified general appraiser pre-licensing curriculum that has been certified by the division pursuant to Subsection R162-2g-307b; and

(d) except as provided in this Subsection ~~[(4)](5)(a)~~, a nonrefundable application fee.

~~[(2)](3)~~ The pre-licensing curriculum required by Subsections (1)(b) and (2)(c) shall be provided by:

(a) a college or university;

(b) a community or junior college;

(c) a real estate appraisal or real estate related organization;

(d) a state or federal agency or commission;

(e) a proprietary school;

(f) a provider approved by a state certification and licensing agency; or

(g) the Appraisal Foundation or its boards.

~~[(3)](4)(a)~~ Upon determining that the applicant satisfies the education and experience requirements, the division shall issue to the applicant a form permitting the applicant to register for the examination.

(b) Upon being approved to register for the examination pursuant to this Subsection ~~[(3)](4)(a)~~, an applicant shall:

(i) return the examination application form to the testing service designated by the division; and

(ii) pay a nonrefundable examination fee to the testing service designated by the division.

(c) The permission to register to sit for the examination shall be valid for 24 months after issuance.

~~[(4)](5)(a)~~ A state-licensed appraiser who, within six months of renewing the license, meets the requirements for certification and files a completed application shall pay a transfer fee rather than an application fee.

(b) A certification that is obtained under this Subsection ~~[(4)](5)(a)~~ shall expire on the same date that the license was due to expire prior to transfer.

R162-2g-304d. Experience Hours.

(1)(a) Except as provided in this Subsection (1)(b), appraisal experience shall be measured in hours according to the appraisal experience hours schedules found in Appendices 1 through 3.

(b)(i) An applicant who has experience in categories other than those shown on the appraisal experience hours schedules, or who believes the schedules do not adequately reflect the applicant's experience or the complexity or time spent on an appraisal, may petition the board on an individual basis for evaluation and approval of the experience as being substantially equivalent to that required for licensure or certification.

(ii) Upon a finding that an applicant's experience is substantially equivalent to that required for licensure or certification, the board may award the applicant an appropriate number of hours for the alternate experience.

(2) General restrictions.

(a) An applicant may not accrue more than 2,000 experience hours in any 12-month period.

(b) The board may not award credit for:

(i) appraisal experience earned more than five years prior to the date of application;

(ii) appraisals that were performed in violation of:

(A) Utah law;

(B) the law of another jurisdiction; or

(C) the administrative rules adopted by the division and the board;

(iii) appraisals that fail to comply with USPAP;

(iv) appraisals of the value of a business as distinguished from the appraisal of commercial real estate;

(v) personal property appraisals; or

(vi) an appraisal that fails to clearly and conspicuously disclose the contribution made by the applicant in completing the assignment.

(c) At least 50% of the appraisals submitted for experience credit shall be appraisals of properties located in Utah.

(d) With regard to experience hours claimed from the schedules found in Appendices 1 and 2:

(i) appraisals where only an exterior inspection of the subject property is performed shall be granted 25% of the credit awarded an appraisal that includes an interior inspection of the subject property; and

(ii) no more than 25% of the total experience required for licensure or certification may be earned from appraisals where the interior of the subject property is not inspected.

(e) A maximum of 250 experience hours may be earned from appraisal of vacant land.

(f) Appraisals on commercial or multi-unit form reports shall be awarded 75% of the credit normally awarded for the appraisal.

(g)(i) If an applicant's education was approved prior to January 1, 2008 and his or her experience was approved prior to January 1, 2011 (under a system referred to by the division and industry as a segmented application), but the applicant did not pass the applicable examination required for licensure or certification by December 31, 2010, the applicant shall, by December 31, 2011:

(A) complete all additional education, as required under the AQB standards;

(B) pass the required examination applicable to the license or certification being sought by the individual; and

(C) submit a complete application to the division.

(ii) An applicant who fails to comply with the December 31, 2011 deadline established in this Subsection (2)(g)(i) shall:

(A) complete all additional education as required under the AQB standards;

(B) pass the required examination applicable to the license or certification sought by the individual;

(C) submit recent appraisals that meet the requirements of all applicable statutes and rules for review by the experience review committee; and

(D) submit a complete application to the division according to deadlines established in Subsection R162-2g-304f(1).

(3) Specific restrictions applicable to trainees applying for licensure.

(a)(i) ~~[Beginning January 1, 2015, a]~~ A registered trainee may not claim experience hours for any appraisal work performed after January 1, 2015 unless the trainee and the trainee's supervisor(s) have ~~previously~~ completed the division-approved Supervisory Appraiser and Appraiser Trainee Course prior to performing the work to be claimed.

(ii) A trainee and the trainee's supervisor who signs the experience log shall document on the log the specific duties that the trainee performs for each appraisal.

(b) For each duty performed, the trainee shall be awarded a percentage of the total experience hours that may be awarded for the property type being appraised:

(i) pursuant to the appraisal experience hour schedules found in Appendices 1 through 3; and

(ii) with the following limitations:

(A) participation in highest and best use analysis: 10% of total hours;

(B) participation in neighborhood description and analysis: 10% of total hours;

(C) property inspection: 20% of total hours, pursuant to this Subsection (3)(c);

(D) participation in land value estimate: 20% of total hours;

(E) participation in sales comparison property selection and analysis: 30% of total hours;

(F) participation in cost analysis: 20% of total hours;

(G) participation in income analysis: 30% of total hours;

(H) participation in the final reconciliation of value: 10% of total hours; and

(I) participation in report preparation: 20% of total hours.

(c) In order for a trainee to claim credit for an inspection pursuant to this Subsection (3)(b)(ii)(C):

(i) as to the first 100 residential appraisals or first 20 non-residential appraisals completed, as applicable to the license or certification being sought, the inspection must include:

(A) measurement of the exterior of a property that is the subject of an appraisal; and

(B) inspection of the exterior of a property that is used as a comparable in an appraisal; and

(ii) as to appraisals after the first 100 residential appraisals or first 20 non-residential appraisals completed, as applicable to the license or certification being sought, the inspection must satisfy all scope of work requirements.

(d) No more than one-third of the experience hours submitted toward licensure may come from any one of the categories identified in this Subsection (3)(b)(ii).

(4) Specific restrictions applicable to applicants for certification.

(a) An individual who obtained a license from the division through reciprocity shall provide to the division all records necessary for the division to verify that the individual satisfies the experience requirements outlined in these rules.

(b) The board may not award credit:

(i) for any appraisal where the applicant cannot prove more than 50% participation in the:

(A) data collection;

(B) verification of data;

(C) reconciliation;

(D) analysis;

(E) identification of property and property interests;

(F) compliance with USPAP standards; and

(G) preparation and development of the appraisal report; or

(ii) to more than one licensed appraiser per completed appraisal, except as provided in this Subsection (5).

(c)(i) An individual applying for certification as a state-certified residential appraiser shall document at least 75% of the hours submitted from:

(A) the residential experience hours schedule found in Appendix 1; or

(B) the residential portion of the mass appraisal hours schedule found in Appendix 3.

(ii) No more than 25% of the total hours submitted may be from:

(A) the general experience hours schedule found in Appendix 2; or

(B) properties other than 1- to 4-unit residential properties identified in the mass appraisal hours schedule found in Appendix 3.

(d) An individual applying for certification as a state-certified general appraiser shall document at least 1,500 experience hours as having been earned from:

(i) the general experience hours schedule found in Appendix 2; or

(ii) properties other than 1- to 4-unit residential properties identified in the mass appraisal hours schedule found in Appendix 3.

(5) Specific restrictions applicable to mass appraisers.

(a) Single-property appraisals performed under USPAP Standards 1 and 2 by mass appraisers shall be awarded full credit pursuant to Appendices 1 and 2.

(b) Review and supervision of appraisals by mass appraisers shall be awarded credit pursuant to this Subsection (6)(b)-(c).

(c)(i) Mass appraisers and mass appraiser trainees who perform 60% or more of the appraisal work shall be awarded full credit pursuant to Appendix 3.

(ii) Mass appraisers and mass appraiser trainees who perform between 25% and 59% of the appraisal work shall be awarded 50% credit pursuant to Appendix 3.

(iii) Mass appraisers and mass appraisal trainees who perform less than 25% of the appraisal work shall be awarded no credit for the appraisal assignment.

(d) In addition to submitting proof of required experience and samples, randomly selected from the experience log, of work conforming to USPAP Standard 6:

(i) a state-licensed appraiser applicant whose experience is earned primarily through mass appraisal shall submit proof of having performed at least five appraisals conforming to USPAP Standards 1 and 2;

(ii) a state-certified residential appraiser applicant whose experience is earned primarily through mass appraisal shall submit proof of having performed at least eight residential appraisals:

(A) conforming to USPAP Standards 1 and 2; and

(B) including the following property types:

(I) vacant property;

(II) two- to four-unit dwelling;

(III) non-complex single-family unit; and

(IV) complex single-family unit; and

(iii) a state-certified general appraiser applicant whose experience is earned primarily through mass appraisal shall submit proof of having performed at least eight appraisals from Appendix 2 conforming to USPAP Standards 1 and 2.

(e) No more than 60% of the total hours submitted for licensure or certification may be earned from any combination of appraisal assignments related to:

(i) property types identified in Appendix 3(a)(i) and (ii);

(ii) property types identified in Appendix 3 (b)(i) and (ii);

(iii) property types identified in Appendix 3 (c)(i) and (ii);

(iv) property types identified in Appendix 3 (d)(i) and (ii);

(v) property types identified in Appendix 3 (e)(i) and (ii),

and

(vi) property types identified in Appendix 3 (f)(i).

(f) No more than 25% of the total hours submitted for licensure or certification may be earned from appraisal assignments related to property types identified in Appendix 3(f)(iii) and (iv) combined.

(g) No more than 20% of the total hours submitted for licensure or certification may have been earned from appraisal assignments related to property types identified in Appendix 3(g).

(h)(i) Mass appraisal of property with a personal property component of less than 50% of value shall be awarded full credit pursuant to Appendix 3 for the type of property appraised.

(ii) Mass appraisal of property with a personal property component of 50% to 85% of value shall be awarded 50% credit pursuant to Appendix 3 for the type of property appraised.

(iii) Mass appraisal of property with a personal property component greater than 85% shall be awarded no credit.

(i) The appraisals submitted for review pursuant to this Subsection (5)(d) shall be selected from the applicant's most recent work.

(6) Special circumstances - condemnation appraisals, review appraisals, supervision of appraisers, other real estate experience, and government agency experience.

(a) Condemnation appraisals. A condemnation appraisal shall be awarded an additional 50% of the hours normally awarded for the appraisal if the condemnation appraisal includes a before-and-after appraisal because of a partial taking of the property.

(b) Review appraisals.

(i) Review appraisals shall be awarded experience credit when the appraiser performs technical reviews of appraisals prepared by employees, associates, or others, provided the appraiser complies with USPAP Standards Rule 3 when the appraiser is required to comply with the rule.

(ii) Except as provided in this Subsection (6)(e)(i), the following credit shall be awarded for review of appraisals:

(A) desk review: 30% of the hours that would be awarded if a separate written review appraisal report were prepared, up to a maximum of 500 hours; and

(B) field review: 50% of the hours that would be awarded if a separate written review appraisal report were prepared, up to a maximum of 500 hours.

(c) Supervision of appraisers. Except as provided in this Subsection (6)(e)(i), supervision of appraisers shall be awarded 20% of the hours that would be awarded to the appraisal, up to a maximum of 500 hours.

(d) Other real estate experience acceptable for certification.

(i) Provided that an applicant demonstrates to the satisfaction of the board that the applicant has the ability to arrive at a fair market value of property and to properly document value conclusions, the following activities may be used to satisfy up to 50% of the experience required for certification:

(A) preliminary valuation estimates;

(B) range of value estimates or similar studies;

(C) other real estate-related experience gained by:

(I) bankers;

(II) builders;

(III) city planners and managers; or

(IV) other individuals.

(ii) A comparative market analysis by an individual licensed under Section 61-2f et seq. may be granted up to 100% experience credit toward certification if:

(A) the analysis conforms with USPAP Standards Rules 1 and 2; and

(B) the individual demonstrates to the board that the individual uses similar techniques as appraisers to value properties and effectively utilize the appraisal process.

(iii) The following activities, if performed in accordance with USPAP Standards Rules 4 and 5, may be used to satisfy up to 50% of the experience required for certification:

- (A) appraisal analysis;
- (B) real estate counseling or consulting services; and
- (C) feasibility analysis/study.

(iv) Except as provided in this Subsection (6)(e)(i), no more than 50% of the total experience required for certification may be earned through any combination of experience described in this Subsection (6)(b)-(d).

(e) Government agency experience.

(i) An individual who obtains experience hours in conjunction with investigation by a government agency is not subject to the hour limitations of this Subsection (6).

(ii) In addition to submitting proof of required experience, an applicant whose experience is earned primarily in conjunction with investigations by government agencies and through review of appraisals, with no opinion of value developed, shall submit proof of having complied with USPAP Standards 1 and 2 in performing appraisals as follows:

- (A) if applying for state-licensed appraiser with experience reviewing residential appraisals, five appraisals of one-unit dwellings;
- (B) if applying for state-certified residential appraiser with experience reviewing residential appraisals, eight appraisals of one-unit dwellings; and
- (C) if applying for state-certified general appraiser with experience reviewing appraisals of property types listed in Appendix 2, at least eight appraisals of property types identified in Appendix 2.

(7) The board, at its discretion, may request the division to verify the claimed experience by any of the following methods:

- (a) verification with the clients;
- (b) submission of selected reports to the board; and
- (c) field inspection of reports identified by the applicant at the applicant's office during normal business hours.

KEY: real estate appraisals, school certification, instructor certification

Date of Enactment or Last Substantive Amendment: [~~March 31,~~ 2014

Authorizing, and Implemented or Interpreted Law: 61-2g-201(2)(h); 61-2g-202(1); ; 61-2g-205(5)(c); 61-2g-307(3); 61-2g-401(5)

Environmental Quality, Water Quality R317-1-7 TMDLs

NOTICE OF PROPOSED RULE (Amendment)

DAR FILE NO.: 38402
FILED: 04/01/2014

RULE ANALYSIS

PURPOSE OF THE RULE OR REASON FOR THE CHANGE: The purpose of this amendment is to incorporate by reference into the rule the completed Total Maximum Daily Load (TMDL) studies for Rockport Reservoir and Echo

Reservoir for dissolved oxygen as approved by the Water Quality Board.

SUMMARY OF THE RULE OR CHANGE: This section incorporates by reference the completed and recently approved Rockport Reservoir and Echo Reservoir TMDLs for dissolved oxygen into the rule. This TMDL document has gone through an individual public review process and has been approved by the Water Quality Board.

STATUTORY OR CONSTITUTIONAL AUTHORIZATION FOR THIS RULE: Section 19-5-104 and Section 19-5-105

MATERIALS INCORPORATED BY REFERENCES:

- ◆ Adds Rockport Reservoir and Echo Reservoir Total Maximum Daily Loads, published by Division of Water Quality, 03/26/2014

ANTICIPATED COST OR SAVINGS TO:

- ◆ **THE STATE BUDGET:** There are no anticipated impacts to the state budget. The proposed amendment will be addressed using existing resources.
- ◆ **LOCAL GOVERNMENTS:** Costs to Snyderville Basin Water Reclamation District are estimated at \$15,000,000, costs to Coalville Wastewater Treatment Plant are approximately \$9,000,000.
- ◆ **SMALL BUSINESSES:** No cost impacts to small businesses are anticipated. Potential strategies and management options for reducing sources of pollutants are identified but not mandated.
- ◆ **PERSONS OTHER THAN SMALL BUSINESSES, BUSINESSES, OR LOCAL GOVERNMENTAL ENTITIES:** Estimated costs are \$60,000,000 for voluntary strategies and management options for reducing sources of pollution in the TMDL watershed.

COMPLIANCE COSTS FOR AFFECTED PERSONS: Compliance costs are anticipated to total \$24,000,000 to upgrade treatment technologies for the two wastewater treatment facilities within the TMDL watershed as listed under "local government" above. The costs will likely be transferred to the respective rate payers through their monthly billings.

COMMENTS BY THE DEPARTMENT HEAD ON THE FISCAL IMPACT THE RULE MAY HAVE ON BUSINESSES: No fiscal impacts to businesses are anticipated as a result of the approved TMDL, other than costs to point source dischargers that will likely increase sewer bills in the TMDL watershed as identified above. Potential strategies and management options for reducing non-point sources of pollutants are identified, but are not specifically mandated. The construction of wastewater treatment facility upgrades will temporarily stimulate economic activity in the affected area.

THE FULL TEXT OF THIS RULE MAY BE INSPECTED, DURING REGULAR BUSINESS HOURS, AT:
ENVIRONMENTAL QUALITY
WATER QUALITY

THIRD FLOOR
195 N 1950 W
SALT LAKE CITY, UT 84116
or at the Division of Administrative Rules.

DIRECT QUESTIONS REGARDING THIS RULE TO:

♦ Judy Etherington by phone at 801-536-4344, by FAX at 801-536-4301, or by Internet E-mail at jetherington@utah.gov

INTERESTED PERSONS MAY PRESENT THEIR VIEWS ON THIS RULE BY SUBMITTING WRITTEN COMMENTS NO LATER THAN AT 5:00 PM ON 05/15/2014

THIS RULE MAY BECOME EFFECTIVE ON: 05/22/2014

AUTHORIZED BY: Walter Baker, Director

R317. Environmental Quality, Water Quality.

R317-1. Definitions and General Requirements.

R317-1-7. TMDLs.

The following TMDLs are approved by the Board and hereby incorporated by reference into these rules:

- 7.1 Middle Bear River -- February 23, 2010
- 7.2 Chalk Creek -- December 23, 1997
- 7.3 Otter Creek -- December 23, 1997
- 7.4 Little Bear River -- May 23, 2000
- 7.5 Mantua Reservoir -- May 23, 2000
- 7.6 East Canyon Creek -- September 14, 2010
- 7.7 East Canyon Reservoir -- September 14, 2010
- 7.8 Kents Lake -- September 1, 2000
- 7.9 LaBaron Reservoir -- September 1, 2000
- 7.10 Minersville Reservoir -- September 1, 2000
- 7.11 Puffer Lake -- September 1, 2000
- 7.12 Scofield Reservoir -- September 1, 2000
- 7.13 Onion Creek (near Moab) -- July 25, 2002
- 7.14 Cottonwood Wash -- September 9, 2002
- 7.15 Deer Creek Reservoir -- September 9, 2002
- 7.16 Hyrum Reservoir -- September 9, 2002
- 7.17 Little Cottonwood Creek -- September 9, 2002
- 7.18 Lower Bear River -- September 9, 2002
- 7.19 Malad River -- September 9, 2002
- 7.20 Mill Creek (near Moab) -- September 9, 2002
- 7.21 Spring Creek -- September 9, 2002
- 7.22 Forsyth Reservoir -- September 27, 2002
- 7.23 Johnson Valley Reservoir -- September 27, 2002
- 7.24 Lower Fremont River -- September 27, 2002
- 7.25 Mill Meadow Reservoir -- September 27, 2002
- 7.26 UM Creek -- September 27, 2002
- 7.27 Upper Fremont River -- September 27, 2002
- 7.28 Deep Creek -- October 9, 2002
- 7.29 Uinta River -- October 9, 2002
- 7.30 Pineview Reservoir -- December 9, 2002
- 7.31 Browne Lake -- February 19, 2003
- 7.32 San Pitch River -- November 18, 2003
- 7.33 Newton Creek -- June 24, 2004
- 7.34 Panguitch Lake -- June 24, 2004
- 7.35 West Colorado -- August 4, 2004
- 7.36 Silver Creek -- August 4, 2004

- 7.37 Upper Sevier River -- August 4, 2004
- 7.38 Lower and Middle Sevier River -- August 17, 2004
- 7.39 Lower Colorado River -- September 20, 2004
- 7.40 Upper Bear River -- August 4, 2006
- 7.41 Echo Creek -- August 4, 2006
- 7.42 Soldier Creek -- August 4, 2006
- 7.43 East Fork Sevier River -- August 4, 2006
- 7.44 Koosharem Reservoir -- August 4, 2006
- 7.45 Lower Box Creek Reservoir -- August 4, 2006
- 7.46 Otter Creek Reservoir -- August 4, 2006
- 7.47 Thistle Creek -- July 9, 2007
- 7.48 Strawberry Reservoir -- July 9, 2007
- 7.49 Matt Warner Reservoir -- July 9, 2007
- 7.50 Calder Reservoir -- July 9, 2007
- 7.51 Lower Duchesne River -- July 9, 2007
- 7.52 Lake Fork River -- July 9, 2007
- 7.53 Brough Reservoir -- August 22, 2008
- 7.54 Steinaker Reservoir -- August 22, 2008
- 7.55 Red Fleet Reservoir -- August 22, 2008
- 7.56 Newcastle Reservoir -- August 22, 2008
- 7.57 Cutler Reservoir -- February 23, 2010
- 7.58 Pariette Draw -- September 28, 2010
- 7.59 Emigration Creek -- September 1, 2011
- 7.60 Jordan River -- June 27, 2012
- 7.61 Colorado River -- December 5, 2013
- 7.62 Echo Reservoir -- March 26, 2014
- 7.63 Rockport Reservoir -- March 26, 2014

KEY: water pollution, waste disposal, industrial waste, effluent standards

Date of Enactment or Last Substantive Amendment: [~~March 27,~~ 2014

Notice of Continuation: October 2, 2012

Authorizing, and Implemented or Interpreted Law: 19-5

Environmental Quality, Water Quality
R317-550
Rules for Waste Disposal By Liquid
Scavenger Operations

NOTICE OF PROPOSED RULE

(Amendment)

DAR FILE NO.: 38387

FILED: 03/31/2014

RULE ANALYSIS

PURPOSE OF THE RULE OR REASON FOR THE CHANGE: The purpose of this amendment is to replace and add some language in existing Rule R317-550 to match similar language and format of newly adopted revised Rule R317-4 concerning onsite wastewater systems.

SUMMARY OF THE RULE OR CHANGE: The new draft has made minor changes to parallel definitions, and some content of the newly adopted Rule R317-4. Some of these minor

changes include: 1) Definitions: Regulatory Authority replaces Health Officer; Person is revised; Liquid Waste Operator replaces Scavenger; Wastewater Holding Tank replaces Sewage Holding Tank; 2) Liquid Waste Operators must now obtain a permit from the Local Health Department (LHD), replacing old language that they were only obligated to "notify" the LHD, which resulted in various unregulated methods. This new permit shall be renewed at least every three years (this period of renewal is up to the discretion of the LHD, but no more than three years); all other conditions of this permit remain the same as in the previous rule, i.e., name, address, description of vehicles, list of disposal sites used for disposal; and the LHD has the discretion of requiring or not requiring a surety bond and proof of general liability insurance as part of this permit (in the old rule this was worded as "recommended," but this has been replaced with "the regulatory authority may require..."); 3) inspection of equipment and disposal sites, still discretionary upon the LHD, as in previous rule; and 4) all wastewater components, scum, sludge, and liquid waste shall be removed from septic tanks, wastewater holding tanks, chemical toilets, and vault privies.

STATUTORY OR CONSTITUTIONAL AUTHORIZATION FOR THIS RULE: Section 19-5-104

ANTICIPATED COST OR SAVINGS TO:

- ◆ THE STATE BUDGET: The state budget is not affected since no additional administrative staff time or resources are anticipated to be needed due to this amendment.
- ◆ LOCAL GOVERNMENTS: This rule amendment requires the LHD to issue permits prior to a liquid waste operation initiating a liquid waste operation. Currently, not all local health departments require licensing. For those few LHDs that don't, they will be required to issue a license when there is a liquid waste operation in their jurisdiction. Costs will be necessary to cover administration of this rule, but ordinances with application fees should cover any of their new costs.
- ◆ SMALL BUSINESSES: Liquid Waste Operators are required to obtain a permit from a local health department to operate a liquid waste operation. As described in "Local government" above, most operators are required to have a license to operate, but not all do at this time. This exact number of operators not having a license is unknown, due to the current rule, and optional licensing by a LHD.
- ◆ PERSONS OTHER THAN SMALL BUSINESSES, BUSINESSES, OR LOCAL GOVERNMENTAL ENTITIES: Although the new rule exempts homeowners from pumping their own tank, no evidence of them performing this work has ever been reported and the homeowner would still have to contract with a liquid waste operator to transport the waste to an approved disposal site. Therefore, no additional cost will be created with this exemption.

COMPLIANCE COSTS FOR AFFECTED PERSONS: No difference from the current rule is anticipated. Currently, most LHDs, already require a permit to operate a liquid waste operation.

COMMENTS BY THE DEPARTMENT HEAD ON THE FISCAL IMPACT THE RULE MAY HAVE ON BUSINESSES: This change is anticipated to have no fiscal impact on businesses that is different from the current rule.

THE FULL TEXT OF THIS RULE MAY BE INSPECTED, DURING REGULAR BUSINESS HOURS, AT:
 ENVIRONMENTAL QUALITY
 WATER QUALITY
 THIRD FLOOR
 195 N 1950 W
 SALT LAKE CITY, UT 84116
 or at the Division of Administrative Rules.

DIRECT QUESTIONS REGARDING THIS RULE TO:

- ◆ Judy Etherington by phone at 801-536-4344, by FAX at 801-536-4301, or by Internet E-mail at jetherington@utah.gov

INTERESTED PERSONS MAY PRESENT THEIR VIEWS ON THIS RULE BY SUBMITTING WRITTEN COMMENTS NO LATER THAN AT 5:00 PM ON 05/15/2014

THIS RULE MAY BECOME EFFECTIVE ON: 05/22/2014

AUTHORIZED BY: Walter Baker, Director

R317. Environmental Quality, Water Quality.

R317-550. Rules for ~~[Waste Disposal By]~~Liquid Waste ~~[Liquid Scavenger]~~Operations.

R317-550-1. Definitions.

The following definitions shall apply in the interpretation and enforcement of this rule. The word "shall" as used herein indicates a mandatory requirement. The term "should" is intended to mean a recommended or desirable standard.

~~[1.1—]"Chemical Toilet"~~[—] means a nonflush device wherein the waste is deposited directly into a receptacle containing a solution of water and chemical. It may be housed in a permanent or portable structure.

~~[1.2—]"Collection Vehicle"~~[—] means any vehicle, tank, trailer, or combination thereof, which provides commercial collection, transportation, storage, or disposal of any waste~~—as~~ defined ~~[in]~~as ~~[Section 1.14]~~liquid waste.

~~[1.3—]"Division"~~[—] means the Utah Division of Water Quality.

~~1.4—]"Health Officer"~~ means the Director of a local health department or his authorized representative.]

~~[1.5—]"Liquid Waste[Scavenger] Operation"~~[—] means any business activity or solicitation by which liquid wastes are collected, transported, stored, or disposed of by a collection vehicle. This shall include, but not be limited to, the cleaning out of septic tanks, ~~[sewage]~~wastewater holding tanks, chemical toilets, and vault privies.

"Liquid Waste Operator" means any person who conducts the business of a liquid waste operation.

"Liquid Waste" means, for the purpose of this rule, domestic wastewater or sewage.

~~[1.6—]"Local Health Department"~~[—] means a ~~[city-]~~county or multi~~[-]~~county local health department established under Title 26A.

~~[1.7-]"Person"[-] means an individual, trust, firm, estate, company, corporation, partnership, association, state, state or federal agency or entity, municipality, commission, or political subdivision of a state [as defined in Section 19-1-103].]~~

~~[1.8-]"Public Health Hazard"[-] means, for the purpose of this rule, a condition whereby there are sufficient types and amounts of biological, chemical, or physical agents relating to wastes that[which] are likely to cause human illness, disorders, or disability. These include, but are not limited to, pathogenic viruses and bacteria, parasites, and toxic chemicals.~~

~~"Regulatory Authority" means either the Utah Division of Water Quality or the local health department having jurisdiction.~~

~~1.9 Seavenger Operator - means any person who conducts the business of a liquid scavenger operation.~~

~~[1.10-]"Septic Tank[s]"[-] means a watertight receptacle which receives the discharge of a drainage system or part thereof, designed and constructed so as to retain solids, digest organic matter through a period of detention, and allow the liquids to discharge into soil outside of the tank through an underground absorption system.~~

~~1.11 Sewage Holding Tank - means a watertight receptacle which receives water-carried wastes from the discharge of a drainage system and retains such wastes until removal and subsequent disposal by scavenger operation.~~

~~[1.12-]"Tank"[-] means any container that when placed on a vehicle is used to transport wastes removed from a septic tank, wastewater[sewage] holding tank, chemical toilet, or vault privy.~~

~~[1.13-]"Vault Privy"[-] means any facility wherein the waste [in]is deposited without flushing, into a permanently-installed, watertight, vault or receptacle, which is usually installed below ground.~~

~~1.14 Wastes - means, for the purpose of this rule, domestic wastewater or sewage which is normally deposited in or retained for disposal in septic tanks, sewage holding tank, chemical toilets, or vault toilets.~~

~~"Wastewater Holding Tank" means a watertight receptacle designed to receive and store liquid wastes to facilitate treatment at another location.~~

R317-550-2. Authority, Purpose and Scope of Rule.

~~2.1. These rules are administered by the division authorized by Title 19 Chapter 5.~~

~~2.2[1]. The collection, storage, transportation, and disposal of all liquid wastes by liquid waste [seavenger-]operators shall be accomplished in a sanitary manner which does not create a public health hazard or nuisance, or adversely affect the quality of the waters of the State.~~

~~2.3[2]. A liquid waste operator shall have a current permit issued by the local health department having jurisdiction [It shall be unlawful for any person to engage in or conduct a liquid scavenger operation unless the person notifies the local health department in which the liquid scavenger operation is conducted-]prior to [commencement]initiating [of-]a liquid [seavenger]waste operation[- and thereafter on an annual basis.~~

~~2.3 Nothing in this rule shall be constructed to require a private property owner to notify the local health department prior to his removing wastes from his own septic tank, sewage holding tank, chemical toilet, or vault privy. However, all such wastes must be collected and transported in such a manner that they will not create a~~

~~nuisance or public health hazard, or will adversely affect the quality of the waters of the State, and must be disposed of in accordance with the provisions of this rule].~~

R317-550-3. ~~Procedures for Notification of Local Health Departments~~Permitting Requirements.

~~3.1. Prior to initiating [operation of]a liquid [seavenger-services]waste operation, the liquid waste operator shall make application to the local health department having jurisdiction for a permit to operate. The application [notify the local health department by filing a notification form. The notification form shall be provided by the local health department and-]shall include[-, but not limited to, the following]:~~

~~A. Name, address, and telephone number of applicant. If applicant is a partnership, the names and addresses of the partners;[-] and if a corporation, the name and address of the corporation.~~

~~B. Name and address of the [place(s)]places of business if different from above.~~

~~C. Applicant shall state the number of collection vehicles to be used, description of vehicles (make, model, year, and license number), tank capacity, and any other related information required by the [health officer]local health department.~~

~~D. A list of all sites shall be provided [which] that are [to-] used for disposal of wastes resulting from the liquid [seavenger-]waste operation. Applicants may be required by the [local health department]regulatory authority to provide proof of permission to dispose of wastes at such sites.~~

~~E. Standard notification forms are available through the Division of Water Quality.~~

~~3.2. [It is recommended that all applications for liquid scavenger operations be accompanied by a surety bond issued by a corporate surety company authorized to conduct business in the State of Utah, and covering the period for which the permit is issued. The bond amount should be \$5000 for all scavenger operations conducting business within the State of Utah. The health officer should be the bond obligee, and the bond should be for the benefit and purpose to protect all persons damaged by faulty workmanship resulting from scavenger operation, and to guarantee payment of monies owing incident to these rules. Such bonds should be conditioned upon their performance of the services in a workmanlike and hygienic manner.]To protect all persons damaged by faulty workmanship resulting from liquid waste operations, and to guarantee payment of monies owing incident to these regulations, the regulatory authority may require a surety bond and proof of general liability insurance as part of the application.~~

~~3.3. [Liquid scavenger operators shall notify the local health department in writing on an annual basis before March 1st of each year of their intent to continue operation.]The operating permit shall be renewed at least every 3 years.~~

R317-550-4. Inspection of [Seavenger]Liquid Waste Operations.

~~4.1. [Upon receipt of a notification to conduct a liquid scavenger operation, the health officer]The regulatory authority may inspect all equipment and, if necessary, disposal sites to be used in connection with the liquid [seavenger]waste operation.[-Routine inspections may be made at any reasonable time by the health officer in order to insure compliance with these rules.]~~

R317-550-5. Collection Vehicle Requirements.

5.1. Collection vehicle identification requirements shall be determined by the local health department having jurisdiction.

5.2. Each collection vehicle shall conform to the following minimum specification:

A. Tanks shall be of watertight construction, fully enclosed, ~~[strong enough for all conditions of operation]~~ durable, and shall be provided with suitable covers to prevent spillage during ~~[transit]~~ transport. The capacity of the tank ~~[on]~~ in U.S. gallons shall be determined accurately by calculation, metering, or as specified by the manufacturer, and shall be plainly, legibly, and permanently marked or stamped on the exterior of the tank.

B. The collection vehicle shall be equipped with either a positive displacement pump or other type of pump which will not allow any spillage and ~~[which]~~ will be self-priming.

C. The discharge connection of the tank shall be provided with a valve and with a threaded screw cap or other acceptable sealing device. When not in use, the valve shall be closed and the threaded screw[s] cap or sealing device shall be in place to prevent accidental leakage or discharge.

5.3. When in use, pumping equipment shall be so operated that a public health hazard or nuisance will not be created. Each collection vehicle should at all times be supplied with a pressurized wash water tank, disinfectant, and implements needed for cleanup purposes in the event of accidental spillage of waste on the ground. The operator shall ensure that such spills are cleaned and disinfected in such a manner to render them harmless to human and animals.

5.4. Sewage hoses on collection vehicles shall be thoroughly drained, capped, and stored in such a manner that they will not create a public health hazard or nuisance.

5.5. Tanks used for collection, transportation, and storage of wastes shall be so constructed that the exterior can be easily cleaned.

5.6. All collection vehicles, when parked and not in use, shall be protected and maintained in such a manner that they will not promote an odor nuisance, the breeding of insects, the attraction of rodents, or create any other public health hazard or nuisance.

R317-550-6. Conduct of Liquid Waste [Seavenger]-Operations, Including Submission of Reports.

6.1. All services rendered by the liquid waste ~~[seavenger-]~~ operation shall be conducted in a sanitary ~~[workmanlike]~~ manner ~~that does not create a public health hazard or nuisance [and the property where the services are rendered shall be left in a sanitary condition].~~ After the services are rendered, the ~~[seavenger]~~ liquid waste operator shall furnish the customer with a written receipt ~~[which]~~ that carries the business name and address of the liquid ~~[seavenger]~~ waste operation.

6.2. ~~[Recommendations for the pumping and maintenance of septic tanks and sewage holding tanks may be found in the rule for Individual Wastewater Disposal Systems.—] All [three-] wastewater components, consisting of scum, sludge, and liquid waste, [should] shall be removed from septic tanks, wastewater holding tanks, chemical toilets, and vault privies. See Subsection R317-4-14 Appendix E for septic tank operation and maintenance. [these tanks to provide long-term benefit.]~~

6.3. The liquid ~~[seavenger]~~ waste operation shall submit summary data ~~[-forms]~~ of their business activity to the ~~[local health department having jurisdiction]~~ regulatory authority as often as required by that agency. Summary data ~~[from-]~~ information shall include ~~[-but not limited to-]~~:

A. Source of all waste pumped on each occurrence, including name and address of source. If necessary, this information may be provided in code and made available for inspection at the business address of the liquid ~~[seavenger]~~ waste operation.

B. Specific type of waste disposal; system services on each occurrence.

C. Quantity of wastes pumped on each occurrence.

D. Name and location of authorized disposal site where ~~[pumpings]~~ liquid wastes were deposited for disposal.

R317-550-7. Disposal of Wastes at Approved Locations.

7.1. All wastes collected shall be disposed ~~[of]~~ in accordance with the rules and regulations of the Division and the local health department having jurisdiction. Disposal shall be accomplished by one of the following methods:

A. Into a public sewer system at the place and point in the system designated and approved by the appropriate authority.

B. Into a landfill which has been approved by the Director of the Division of Solid and Hazardous Waste for disposal of such wastes and in accordance with Rules R315-301 through R315-320, and with concurrence by the local health department.

C. Land disposal, in accordance with the provisions of Subsection R317-8-1.10 ~~(9)~~ 10, if approved by the Director and with the concurrence of the local health department.

7.2. No waste shall be deposited into a sewerage ~~[collection]~~ system ~~[-a sewage]~~ or treatment works ~~[plant, or waste stabilization pond (lagoon), which]~~ that will have a detrimental effect on the ~~[it]~~ overall operation.

7.3. Under no circumstances shall dumping of wastes be permitted into any public or private lake, pond, stream, river, watercourse, or any other body of water, or onto any public or private land which has not been designated as an approved disposal site.

7.4. It shall be unlawful for any liquid waste ~~[seavenger]~~ operation to transport, treat, store, or dispose of hazardous wastes as defined by 19-6-102(7) without complying with all provisions of Rules R315-1 through R315-301.

R317-550-8. Failure to Comply With Rules.

Any person failing to comply with these rules shall be subject to action as specified in Section 19-5-115.

KEY: dumping of wastes, liquid waste, pollution

Date of Enactment or Last Substantive Amendment: [August 29, 2001] 2014

Notice of Continuation: June 18, 2012

Authorizing, and Implemented or Interpreted Law: 19-5-104

**Health, Children's Health Insurance
Program
R382-10
Eligibility**

**NOTICE OF PROPOSED RULE
(Amendment)**

DAR FILE NO.: 38400
FILED: 04/01/2014

RULE ANALYSIS

PURPOSE OF THE RULE OR REASON FOR THE CHANGE: The purpose of this change is to clarify the household composition for non-tax filers using Modified Adjusted Gross Income (MAGI) methodology, and to clarify when cash support payments are counted as income.

SUMMARY OF THE RULE OR CHANGE: This amendment clarifies that a dependent child or an eligible child's sibling who is age 19 or 20 and a full-time student is also included in the Children's Health Insurance Program (CHIP) household size of those individuals whose household composition is based upon non-tax filer MAGI rules. This change also clarifies criteria for when a cash support payment is to be counted as income, updates references in the text, and makes other technical changes.

STATUTORY OR CONSTITUTIONAL AUTHORIZATION FOR THIS RULE: Pub. L. No. 111-148 and Section 26-1-5 and Section 26-18-3

MATERIALS INCORPORATED BY REFERENCES:

- ◆ Updates 42 CFR 457.340, published by Government Printing Office, 10/01/2013
- ◆ Updates 42 CFR 457.350, published by Government Printing Office, 10/01/2013
- ◆ Updates 42 CFR 457.805(b), published by Government Printing Office, 10/01/2013

ANTICIPATED COST OR SAVINGS TO:

- ◆ **THE STATE BUDGET:** There is no impact to the state budget because this change only clarifies ongoing eligibility policy for CHIP.
- ◆ **LOCAL GOVERNMENTS:** There is no impact to local governments because they neither fund nor provide CHIP services to CHIP recipients.
- ◆ **SMALL BUSINESSES:** There is no impact to small businesses because this change only clarifies ongoing eligibility policy for CHIP.
- ◆ **PERSONS OTHER THAN SMALL BUSINESSES, BUSINESSES, OR LOCAL GOVERNMENTAL ENTITIES:** There is no impact to CHIP providers and to CHIP recipients because this change only clarifies ongoing eligibility policy for CHIP.

COMPLIANCE COSTS FOR AFFECTED PERSONS: There is no impact to a single CHIP provider or to a CHIP recipient because this change only clarifies ongoing eligibility policy for CHIP.

COMMENTS BY THE DEPARTMENT HEAD ON THE FISCAL IMPACT THE RULE MAY HAVE ON BUSINESSES: No impact on business as this rule makes no change in current practices.

THE FULL TEXT OF THIS RULE MAY BE INSPECTED, DURING REGULAR BUSINESS HOURS, AT:

HEALTH
CHILDREN'S HEALTH INSURANCE PROGRAM
CANNON HEALTH BLDG
288 N 1460 W
SALT LAKE CITY, UT 84116-3231
or at the Division of Administrative Rules.

DIRECT QUESTIONS REGARDING THIS RULE TO:

◆ Craig Devashrayee by phone at 801-538-6641, by FAX at 801-538-6099, or by Internet E-mail at cdevashrayee@utah.gov

INTERESTED PERSONS MAY PRESENT THEIR VIEWS ON THIS RULE BY SUBMITTING WRITTEN COMMENTS NO LATER THAN AT 5:00 PM ON 05/15/2014

THIS RULE MAY BECOME EFFECTIVE ON: 06/01/2014

AUTHORIZED BY: David Patton, PhD, Executive Director

R382. Health, Children's Health Insurance Program.

R382-10. Eligibility.

R382-10-2. Definitions.

(1) The Department adopts and incorporates by reference the definitions found in Sections 2110(b) and (c) of the Compilation of Social Security Laws, in effect January 1, 2013.

(2) The Department adopts the definitions in Section R382-1-2. In addition, the Department adopts the following definitions:

(a) "American Indian or Alaska Native" means someone having origins in any of the original peoples of North and South America (including Central America) and who maintains tribal affiliation or community attachment.

(b) "Best estimate" means the eligibility agency's determination of a household's income for the upcoming eligibility period, based on past and current circumstances and anticipated future changes.

(c) "Children's Health Insurance Program" (CHIP) means the program for benefits under the Utah Children's Health Insurance Act, Title 26, Chapter 40.

(d) "Co-payment and co-insurance" means a portion of the cost for a medical service for which the enrollee is responsible to pay for services received under CHIP.

(e) "Due process month" means the month that allows time for the enrollee to return all verification, and for the eligibility agency to determine eligibility and notify the enrollee.

(f) "Eligibility agency" means the Department of Workforce Services (DWS) that determines eligibility for CHIP under contract with the Department.

(g) "Employer-sponsored health plan" means a health insurance plan offered by an employer either directly or through Utah's Health Marketplace (Avenue H)~~[that meets the requirements of Subsection R414-320-2(9)].~~

(h) "Federally Facilitated Marketplace" (FFM) means the entity individuals can access to enroll in health insurance and apply for assistance from insurance affordability programs such as Advanced Premium Tax Credits, Medicaid and CHIP.

~~_____ (i) "Income annualizing" means a process of determining the average annual income of a household, based on the past history of income and expected changes.~~

~~_____ (j) "Income anticipating" means a process of using current facts regarding rate of pay, number of working hours, and expected changes to anticipate future income.~~

~~_____ (k) "Income averaging" means a process of using a history of past or current income and averaging it over a determined period of time that is representative of future income.~~

_____ (l) "Modified Adjusted Gross Income" (MAGI) means the income determined using the methodology defined in 42 CFR 435.603(e).

_____ (m) "Presumptive eligibility" means a period of time during which a child may receive CHIP benefits based on preliminary information that the child meets the eligibility criteria.

_____ (n) "Quarterly Premium" means a payment that enrollees must pay every three months to receive coverage under CHIP.

_____ (o) "Review month" means the last month of the eligibility certification period for an enrollee during which the eligibility agency ~~[re]~~determines an enrollee's eligibility for a new certification period.

_____ (p) "Utah's Premium Partnership for Health Insurance" or "UPP" means the program described in Rule R414-320.

~~_____ (q) "Verification" means the proof needed to determine whether a child meets the eligibility criteria to be enrolled in the program. Verification may include documents in paper format, electronic records from computer match systems, and collateral contacts with third parties who have information needed to determine the eligibility of a child.~~

R382-10-10. Creditable Health Coverage.

(1) To be eligible for enrollment in the program, a child must meet the requirements of Sections 2110(b) of the Compilation of Social Security Laws.

(2) A child who is covered under a group health plan or other health insurance that provides coverage in Utah, including coverage under a parent's or legal guardian's employer, as defined in 29 CFR 2590.701-4, July 1, 2013 ed., is not eligible for CHIP assistance.

~~_____ (a) A child who is covered under health insurance that does not provide coverage in the State of Utah is eligible for enrollment.~~

_____ (b) A child who has access to health insurance coverage, where the cost to enroll the child in the least expensive plan offered by the employer is less than 5% of the countable MAGI-based income for the individual, is not eligible for CHIP. The child is considered to have access to coverage even when the employer only offers coverage during an open enrollment period, and the child has had at least one chance to enroll.

~~_____ (c) A child who has access to an employer-sponsored health plan, where the cost to enroll the child in the least expensive plan offered by the employer equals or exceeds 5% of the countable MAGI-based income for the individual may choose to enroll in either CHIP or [the employer-sponsored health plan] UPP.~~

~~_____ (d) To enroll in UPP, the child must meet UPP eligibility requirements.~~

~~_____ (e) If the UPP eligible child enrolls in the employer-sponsored health plan or COBRA coverage, but the plan does not include dental benefits, the child may receive dental-only benefits through CHIP.~~

~~_____ (f) If the employer-sponsored health plan or COBRA coverage includes dental, the applicant may choose to enroll the child in the dental plan and receive an additional reimbursement from UPP, or receive dental-only benefits through CHIP.~~

~~_____ (g) A child enrolled in CHIP who gains access to or enrolls in an employer-sponsored health plan may switch to the UPP program if the child meets UPP eligibility requirements. [If the child chooses to enroll in the employer-sponsored health plan, the child may enroll in and receive premium reimbursement through the UPP program if enrollment is not closed. The health plan must meet the following conditions:~~

~~_____ (i) The cost of the least expensive plan equals or exceeds 5% of the countable MAGI-based income for the individual; and~~

~~_____ (ii) The plan meets the requirements of Subsection R414-320-2(19).]~~

~~_____ (h) The cost of coverage is based upon the countable MAGI-based income for the individual's household and will include the following:~~

~~_____ (a) the premium;~~

~~_____ (b) a deductible, if the employer-sponsored plan has a deductible; and~~

~~_____ (c) the cost to enroll the employee, if the employee must be enrolled to enroll the child. [The cost of coverage includes a deductible if the employer plan has a deductible that must be met before the plan will pay any claims. For a dependent child, if the employee must enroll to enroll the dependent child, the cost of coverage will include the cost to enroll the employee and the dependent child.~~

~~_____ (d) If the child enrolls in the employer-sponsored health plan or COBRA coverage and UPP, but the plan does not include dental benefits, the child may receive dental-only benefits through CHIP. If the employer-sponsored health plan includes dental, the applicant may choose to enroll the child in the dental plan and receive an additional reimbursement from UPP of up to \$20 per month, or may choose not to enroll the child in the dental plan and receive dental-only benefits through CHIP.~~

~~_____ (e) A child who chooses to enroll in the employer-sponsored health plan or COBRA coverage and UPP may discontinue the employer-sponsored health plan or COBRA coverage and switch to CHIP coverage at any time without a 90-day ineligibility period for voluntarily discontinuing health insurance. Eligibility continues through the current certification period without a new eligibility determination.]~~

_____ (f) Subject to the provisions published in 42 CFR 457.805(b), October 1, 2013 ed.~~[78 FR 42313]~~, which the Department adopts and incorporates by reference, the eligibility agency shall deny eligibility and impose a 90-day waiting period for enrollment under CHIP if the applicant or a custodial parent voluntarily terminates health insurance that provides coverage in Utah within the 90 days

before the application date [~~for enrollment under CHIP~~]. In addition, the agency may not apply a 90-day waiting period in the following situations:

- (a) a non-custodial parent voluntarily terminates coverage;
- (b) the child is voluntarily terminated from insurance that does not provide coverage in Utah;
- (c) the child is voluntarily terminated from a limited health insurance plan;
- (d) a child is terminated from a custodial parent's insurance because ORS reverses the forced enrollment requirement due to the insurance being unaffordable;[-]
- (e) voluntary termination of COBRA;
- (f) voluntary termination of Utah Comprehensive Health Insurance Pool coverage; or
- (g) voluntary termination of UPP reimbursed, employer-sponsored coverage.

~~(5)7~~ If the 90-day ineligibility period for CHIP ends in the month of application, or by the end of the month that follows, the eligibility agency shall determine the applicant's eligibility.

(a) If eligible, enrollment in CHIP begins the day after the 90-day ineligibility period ends.

(b) If the 90-day ineligibility period does not end by the end of the month that follows the application month, the eligibility agency shall deny CHIP eligibility.

~~(6)8~~ The Department shall comply with the provisions of enrollment after the waiting period in accordance with 42 CFR 457.340, October 1, 2013 ed.[78 FR 42312], which the Department adopts and incorporates by reference.

~~(7) If an applicant or an applicant's parent voluntarily terminates coverage under a Consolidated Omnibus Budget Reconciliation Act (COBRA) plan or under the Health Insurance Pool (HIP), or if an applicant is involuntarily terminated from an employer's plan, the applicant is eligible for CHIP without a 90-day ineligibility period.~~

~~(8)9~~ A child with creditable health coverage operated or financed by ~~the~~ Indian Health Services is not excluded from enrolling in CHIP~~[the program]~~.

~~(9) An applicant must report at application and review whether any of the children in the household for whom enrollment is being requested have access to or are covered by a group health plan, other health insurance coverage, or a state employee's health benefits plan.~~

~~(10) The eligibility agency shall deny an application or review if the enrollee fails to respond to questions about health insurance coverage for children that the household seeks to enroll or renew in the program.~~

~~(11) A recipient must report when a child enrolls in health insurance coverage within ten calendar days of the date of enrollment or the date that benefits are effective, whichever is later. The eligibility agency shall end eligibility effective the end of the month in which the agency sends proper notice of the closure. A child may switch to UPP in accordance with Subsection R382-10-10(3) if the change is reported timely. Failure to make a timely report may result in overpayment.~~

R382-10-11. Household Composition and Income Provisions.

(1) The Department adopts and incorporates by reference, 42 CFR 457.315, October 1, 2012 ed., regarding the household composition and income methodology to determine eligibility for CHIP.

(2) Any individual described in Subsection R382-10-11(1) who is temporarily absent solely by reason of employment, school, training, military service, or medical treatment, or who will return home to live within 30 days from the date of application, is part of the household.

(3) The household size includes the number of unborn children that a pregnant household member expects to deliver.

~~(4) The eligibility agency elects the option~~~~[counts children who are 19 or 20 years old and are full-time students in the household size of individuals whose household size is determined under the non-tax filer rules found]~~ in 42 CFR 435.603(f)(3)(iv)(B).

(5) The eligibility agency may not count as income any payments from sources that federal law specifically prohibits from being counted as income to determine eligibility for federally-funded programs.

(6) The eligibility agency may not count as income any payments that an individual receives pursuant to the Individual Indian Money Account Litigation Settlement under the Claims Resettlement Act of 2010, Pub. L. No. 111 291, 124 Stat. 3064.

~~(7) The eligibility agency shall count[s] as income~~~~;~~ cash support received by an individual when~~[from a tax filer who claims the individual as a tax dependent when that dependent is not the spouse or child of the tax filer, but only the amount that exceeds a minimal amount set by the Department]~~

~~(a) it is received from the tax filer who claims a tax exemption for the individual;~~

~~(b) the individual is not a spouse or child of the tax filer; and~~

~~(c) the cash support exceeds a nominal amount set by the Department.~~

~~(8) The eligibility agency determines eligibility by deducting an amount equal to 5% of the federal poverty guideline~~~~;~~~~[for the applicable household size from the MAGI-based household income determined for the individual]~~ as defined in 42 CFR 435.603(d)(4).

R382-10-13. Budgeting.

(1) The eligibility agency determines countable household income according to MAGI-based methodology as required by 42 CFR 457.315.

(2) The eligibility agency shall determine a child's eligibility and cost sharing requirements prospectively for the upcoming eligibility period at the time of application and at each renewal for continuing eligibility.

(a) The eligibility agency determines prospective eligibility by using the best estimate of the household's average monthly income expected to be received or made available to the household during the upcoming eligibility period.

(b) The eligibility agency shall include in its estimate, reasonably predictable income changes such as seasonal income or contract income, to determine the average monthly income expected to be received during the certification period.

(c) The eligibility agency prorates income that is received less often than monthly over the eligibility period to determine an average monthly income.

(3) Methods of determining the best estimate are income averaging, income anticipating, and income annualizing. The eligibility agency may use a combination of methods to obtain the most accurate best estimate. The best estimate may be a monthly

amount that is expected to be received each month of the eligibility period, or an annual amount that is prorated over the eligibility period. Different methods may be used for different types of income received in the same household.

(4) The eligibility agency determines farm and self-employment income by using the individual's recent tax return forms or other verifications the individual can provide. If tax returns are not available, or are not reflective of the individual's current farm or self-employment income, the eligibility agency may request income information from a recent time period during which the individual had farm or self-employment income. The eligibility agency deducts the same expenses from gross income that the Internal Revenue Service allows as self-employment expenses to determine net self-employment income, if those expenses are expected to occur in the future.

R382-10-15. Application and Eligibility Reviews.

(1) The Department adopts and incorporates by reference ~~78 FR 42312. The Department also adopts and incorporates by reference~~ 42 CFR 457.330, 457.340, 457.343, and 457.348, October 1, 2013~~2012~~ ed.

(2) The provisions of Section R414-308-3 apply to applicants for CHIP, except for Subsection R414-308-3(10) and the three months of retroactive coverage.

(3) Individuals can apply without having an interview. The eligibility agency may interview applicants and enrollee's, the parents or spouse, and any adult who assumes responsibility for the care or supervision of the child, when necessary to resolve discrepancies or to gather information that cannot be obtained otherwise.

(4) According to the provisions of Section 2105(a)(4)(F) of the Social Security Act, the Department provides medical assistance during a presumptive eligibility period to a child if a Medicaid eligibility worker with the Department of Human Services has determined, based on preliminary information, that:

(a) the child meets citizenship or alien status criteria as defined in Section R414-302-3;

(b) the child is not enrolled in a health insurance plan; and

(c) the child's household income exceeds the applicable income limit for Medicaid, but does not exceed 200% of the federal poverty level for the applicable household size.

(5) A child determined presumptively eligible is required to file an application for medical assistance with the eligibility agency in accordance with the requirements of Section 1920A of the Social Security Act.

(6) A child may receive medical assistance during only one presumptive eligibility period in any six month period.

(7) The eligibility agency shall complete a periodic review of an enrollee's eligibility for CHIP medical assistance in accordance with the requirements of 42 CFR 457.343.

(8) If an enrollee fails to respond to a request for information to complete the review during the review month, the agency shall end the enrollee's eligibility effective at the end of the review month and send proper notice to the enrollee.

(a) If the enrollee responds to the review or reapplies within three calendar months of the review closure date, the eligibility agency shall treat the response as a new application without requiring the enrollee to reapply. The application processing period then applies for this new request for coverage.

(b) If the enrollee is determined eligible based on this reapplication, the new certification period begins the first day of the month in which the enrollee contacts the agency to complete the review if verification is provided within the application processing period. The four day grace period may apply. If the enrollee fails to return verification within the application processing period, or if the enrollee is determined ineligible, the eligibility agency shall send a denial notice to the enrollee.

(c) The eligibility agency may not continue eligibility while it makes a new eligibility determination.

(9) Except as defined in R382-10-15(8), the enrollee must reapply for CHIP if the enrollee's case is closed for one or more calendar months.

(10) If the eligibility agency sends proper notice of an adverse decision during the review month, the agency shall change eligibility for the month that follows.

(11) If the eligibility agency does not send proper notice of an adverse change for the month that follows, the agency shall extend eligibility to that month. The eligibility agency shall send proper notice of the effective date of an adverse decision. The enrollee does not owe a premium for the due process month.

(12) If the enrollee responds to the review in the review month and the verification due date is in the month that follows, the eligibility agency shall extend eligibility to the month that follows. The enrollee must provide all verification by the verification due date.

(a) If the enrollee provides all requested verification by the verification due date, the eligibility agency shall determine eligibility and send proper notice of the decision.

(b) If the enrollee does not provide all requested verification by the verification due date, the eligibility agency shall end eligibility effective at the end of the month in which the eligibility agency sends proper notice of the closure.

(c) If the enrollee returns all verification after the verification due date and before the effective closure date, the eligibility agency shall treat the date that it receives all verification as a new application date. The eligibility agency shall determine eligibility and send a notice to the enrollee.

(d) The eligibility agency may not continue eligibility while it determines eligibility. The new certification date for the application is the day after the effective closure date if the enrollee is found eligible.

(13) The eligibility agency shall provide ten-day notice of case closure if the enrollee is determined to be ineligible or if the enrollee fails to provide verification by the verification due date.

(14) If eligibility for CHIP enrollment ends, the eligibility agency shall review the case for eligibility under any other medical assistance program without requiring a new application. The eligibility agency may request additional verification from the household if there is insufficient information to make a determination.

(15) An applicant must report at application and review whether any of the children in the household for whom enrollment is being requested have access to or are covered by a group health plan, other health insurance coverage, or a state employee's health benefits plan.

(16) The eligibility agency shall deny an application or review if the enrollee fails to respond to questions about health insurance coverage for children whom the household seeks to enroll or renew in the program.

R382-10-16. Eligibility Decisions.

(1) The Department adopts and incorporates by reference 42 CFR 457.350, October 1, 2013, ed. [78 FR 42312], regarding eligibility screening.

(2) The eligibility agency shall determine eligibility for CHIP within 30 days of the date of application. If the eligibility agency cannot make a decision in 30 days because the applicant fails to take a required action and requests additional time to complete the application process, or if circumstances beyond the eligibility agency's control delay the eligibility decision, the eligibility agency shall document the reason for the delay in the case record.

(3) If a child made presumptively eligible files an application for medical assistance in accordance with the requirements of Section 1920A of the Social Security Act, presumptive eligibility continues only until the eligibility agency makes an eligibility decision based on that application. Filing additional applications does not extend the presumptive eligibility period.

(4) The eligibility agency may not use the time standard as a waiting period before determining eligibility, or as a reason for denying eligibility when the agency does not determine eligibility within that time.

(5) The eligibility agency shall complete a determination of eligibility or ineligibility for each application unless:

(a) the applicant voluntarily withdraws the application and the eligibility agency sends a notice to the applicant to confirm the withdrawal;

(b) the applicant died; or

(c) the applicant cannot be located or does not respond to requests for information within the 30-day application period.

(6) The eligibility agency shall redetermine eligibility every 12 months.

(7) At application and review, the eligibility agency shall determine if any child applying for CHIP enrollment is eligible for coverage under Medicaid.

(a) A child who is eligible for Medicaid coverage is not eligible for CHIP.

(b) An eligible child who must meet a spenddown to receive Medicaid and chooses not to meet the spenddown may enroll in CHIP.

(8) If an enrollee asks for a new income determination during the CHIP certification period and the eligibility agency finds the child is eligible for Medicaid, the agency shall end CHIP coverage and enroll the child in Medicaid.

R382-10-19. Quarterly Premiums.

(1) Each family with children enrolled in the CHIP program must pay a quarterly premium based on the countable income of the family during the first month of the quarter.

(a) ~~The eligibility agency may not charge a premium to a [A family whose countable income is equal to or less than 100% of the federal poverty level or] child who [are] is American Indian or Alaska Native [pays no premium].~~

(b) A family with countable income ~~[greater than 100% and] up to 150% of the federal poverty level must pay a quarterly premium of \$30.~~

(c) A family with countable income greater than 150% and up to 200% of the federal poverty level must pay a quarterly premium of \$75.

(d) The agency shall charge the family the lowest premium amount when the family has two or more children, and those children qualify for different quarterly premium amounts.

(2) The eligibility agency shall end CHIP coverage and assess a \$15 late fee to a family who does not pay its quarterly premium by the premium due date.

(3) The agency may reinstate coverage if the family pays the premium and the late fee by the last day of the month immediately following the termination.

(4) A child is ineligible for CHIP for three months if CHIP is terminated for failure to pay the quarterly premium. The child must reapply at the end of the three months. If eligible, the agency shall approve eligibility without payment of the past due premiums or late fee.

(5) The eligibility agency may not charge the household a premium during a due process month associated with the periodic eligibility review.

(6) The eligibility agency shall assess premiums that are payable each quarter for each month of eligibility.

KEY: children's health benefits

Date of Enactment or Last Substantive Amendment: [January 1,] 2014

Notice of Continuation: May 9, 2013

Authorizing, and Implemented or Interpreted Law: 26-1-5; 26-40

Health, Health Care Financing, Coverage and Reimbursement Policy **R414-1-5** Incorporations by Reference

NOTICE OF PROPOSED RULE

(Amendment)

DAR FILE NO.: 38381

FILED: 03/25/2014

RULE ANALYSIS

PURPOSE OF THE RULE OR REASON FOR THE CHANGE: Subsection 26-18-3(2)(a) requires the Medicaid program to implement policy through administrative rules. The Department, in order to draw down federal funds, must have an approved state plan with the Centers for Medicare and Medicaid Services (CMS). The purpose of this change, therefore, is to incorporate the most current Medicaid State Plan by reference and to implement by rule ongoing Medicaid policy described in the Medical Supplies Utah Medicaid Provider Manual; Hospital Services Utah Medicaid Provider Manual with its attachments; Home Health Agencies Utah Medicaid Provider Manual, and the manual's attachment for the Private Duty Nursing Acuity Grid; Speech-Language Services Utah Medicaid Provider Manual; Audiology Services Utah Medicaid Provider Manual; Hospice Care Utah Medicaid Provider Manual; Long Term Care Services in Nursing

Facilities Utah Medicaid Provider Manual, with its attachments; Utah Home and Community-Based Waiver Services for Individuals 65 or Older Utah Medicaid Provider Manual; Personal Care Utah Medicaid Provider Manual, with its attachments; Utah Home and Community-Based Waiver Services for Individuals with Acquired Brain Injury Age 18 and Older Utah Medicaid Provider Manual; Utah Home and Community-Based Waiver Services for Individuals with Intellectual Disabilities or Other Related Conditions Utah Medicaid Provider Manual; Utah Home and Community-Based Waiver Services for Individuals with Physical Disabilities Utah Medicaid Provider Manual; Utah Home and Community-Based Waiver Services New Choices Waiver Utah Medicaid Provider Manual; Utah Home and Community-Based Waiver Services for Technology Dependent, Medically Fragile Individuals Utah Medicaid Provider Manual; Utah Home and Community-Based Waiver Services Autism Waiver Utah Medicaid Provider Manual; Office of Inspector General Administrative Hearings Procedures Manual; Pharmacy Services Utah Medicaid Provider Manual with its attachments; Coverage and Reimbursement Code Look-up Tool; Certified Nurse-Midwife Services Utah Medicaid Provider Manual; CHEC Services Utah Medicaid Provider Manual with its attachments; Chiropractic Medicine Utah Medicaid Provider Manual; Dental, Oral Maxillofacial, and Orthodontia Services Utah Medicaid Provider Manual; General Attachments for the Utah Medicaid Provider Manual; Indian Health Utah Medicaid Provider Manual; Laboratory Services Utah Medicaid Provider Manual with its attachments; Medical Transportation Utah Medicaid Provider Manual; Mental Health Centers/Prepaid Mental Health Plans Utah Medicaid Provider Manual; Non-Traditional Medicaid Health Plan Utah Medicaid Provider Manual with its attachments; Certified Family Nurse Practitioner and Pediatric Nurse Practitioner Utah Medicaid Provider Manual; Physical Therapy and Occupational Therapy Services Utah Medicaid Provider Manual; Physician Services and Anesthesiology Utah Medicaid Provider Manual with its attachments; Podiatric Services Utah Medicaid Provider Manual; Primary Care Network Utah Medicaid Provider Manual with its attachments; Psychology Services Utah Medicaid Provider Manual; Rehabilitative Mental Health and Substance Use Disorder Services Utah Medicaid Provider Manual; Rehabilitative Mental Health Services for Children Under Authority of Department of Human Services, Division of Child and Family Services or Division of Juvenile Justice Services Utah Medicaid Provider Manual; Rural Health Clinic Services Utah Medicaid Provider Manual with its attachments; School-Based Skills Development Services Utah Medicaid Provider Manual; Section I: General Information of the Utah Medicaid Provider Manual; Services for Pregnant Women Utah Medicaid Provider Manual; Substance Abuse Treatment Services and Targeted Case Management Services for Substance Abuse Utah Medicaid Provider Manual; Targeted Case Management for CHEC Medicaid Eligible Children Utah Medicaid Provider Manual; Targeted Case Management for the Chronically Mentally Ill Utah Medicaid Provider Manual; Targeted Case Management for Early Childhood (Ages 0-4)

Utah Medicaid Provider Manual; and Vision Care Services Utah Medicaid Provider Manual.

SUMMARY OF THE RULE OR CHANGE: Section R414-1-5 is changed to incorporate the Utah Medicaid State Plan and approved state plan amendments (SPAs) by reference to 04/01/2014. These SPAs include: SPA 13-021-UT Podiatric Services, which broadens client access to podiatric services through a provision that allows podiatrists to perform services within their scope of license to all categorically and medically needy recipients; SPA 13-028-UT Inpatient Hospital Payments, which updates and provides clarification in Attachment 4.19-A of the Medicaid State Plan; SPA 13-029-UT Outpatient Hospital Title XIX Reporting and Use of Medicaid Cost-to-Charge Ratio (CCR), which removes verbiage around the need to calculate and use a Medicaid-specific cost-to-charge ratio, and also removes the requirement for an annual cost settlement for critical access hospitals; SPA 13-031-UT Non-Emergency Medical Transportation, which updates non-emergency medical transportation (NEMT) to a brokerage provider model and terminates the 1915(b)(4) NEMT Waiver. It also updates the effective date of rates for NEMT brokerage provider services to 01/01/2014, and clarifies services and limitations, updates references, and reorganizes transportation services information; SPA 13-032-UT Dental Services and Extended Services to Pregnant Women, which clarifies the availability of dental services and extended services to pregnant women. SPA 14-0003-MM Modified Adjusted Gross Income (MAGI) Income Methodology, which implements the new provision for MAGI Income Methodologies under the Affordable Care Act by applying financial eligibility methodologies to all MAGI-based eligibility groups covered under the Medicaid State Plan. SPA 14-0004-MM Single State Agency, which implements the Affordable Care Act's provision for addressing the single state agency's delegation of appeals and determinations; and SPA 14-008-UT Pharmacy Services, which removes coverage restrictions on barbiturates, benzodiazapines and smoking cessation drugs, and covers these drugs under the Medicare Part D program. This rule change also incorporates by reference the Medical Supplies Utah Medicaid Provider Manual, effective 04/01/2014; incorporates by reference the Hospital Services Utah Medicaid Provider Manual with its attachments, effective 04/01/2014; incorporates by reference the Home Health Agencies Utah Medicaid Provider Manual, and the manual's attachment for the Private Duty Nursing Acuity Grid, effective 04/01/2014; incorporates by reference the Speech-Language Services Utah Medicaid Provider Manual, effective 04/01/2014; incorporates by reference the Audiology Services Utah Medicaid Provider Manual, effective 04/01/2014; incorporates by reference the Hospice Care Utah Medicaid Provider Manual, effective 04/01/2014; incorporates by reference the Long Term Care Services in Nursing Facilities Utah Medicaid Provider Manual, with its attachments, effective 04/01/2014; incorporates by reference the Utah Home and Community-Based Waiver Services for Individuals 65 or Older Utah Medicaid Provider Manual, effective

04/01/2014; incorporates by reference the Personal Care Utah Medicaid Provider Manual, with its attachments, effective 04/01/2014; incorporates by reference the Utah Home and Community-Based Waiver Services for Individuals with Acquired Brain Injury Age 18 and Older Utah Medicaid Provider Manual, effective 04/01/2014; incorporates by reference the Utah Home and Community-Based Waiver Services for Individuals with Intellectual Disabilities or Other Related Conditions Utah Medicaid Provider Manual, effective 04/01/2014; incorporates by reference the Utah Home and Community-Based Waiver Services for Individuals with Physical Disabilities Utah Medicaid Provider Manual, effective 04/01/2014; incorporates by reference the Utah Home and Community-Based Waiver Services New Choices Waiver Utah Medicaid Provider Manual, effective 04/01/2014; incorporates by reference the Utah Home and Community-Based Waiver Services for Technology Dependent, Medically Fragile Individuals Utah Medicaid Provider Manual, effective 04/01/2014; incorporates by reference the Utah Home and Community-Based Waiver Services Autism Waiver Utah Medicaid Provider Manual, effective 04/01/2014; incorporates by reference the Office of Inspector General Administrative Hearings Procedures Manual, effective 04/01/2014; incorporates by reference the Pharmacy Services Utah Medicaid Provider Manual with its attachments, effective 04/01/2014; incorporates by reference the Coverage and Reimbursement Code Look-up Tool, effective 04/01/2014; incorporates by reference the Certified Nurse-Midwife Services Utah Medicaid Provider Manual, effective 04/01/2014; incorporates by reference the CHEC Services Utah Medicaid Provider Manual with its attachments, effective 04/01/2014; incorporates by reference the Chiropractic Medicine Utah Medicaid Provider Manual, effective 04/01/2014; incorporates by reference the Dental, Oral Maxillofacial, and Orthodontia Services Utah Medicaid Provider Manual, effective 04/01/2014; incorporates by reference the General Attachments for the Utah Medicaid Provider Manual, effective 04/01/2014; incorporates by reference the Indian Health Utah Medicaid Provider Manual, effective 04/01/2014; incorporates by reference the Laboratory Services Utah Medicaid Provider Manual with its attachments, effective 04/01/2014; incorporates by reference the Medical Transportation Utah Medicaid Provider Manual, effective 04/01/2014; incorporates by reference the Mental Health Centers/Prepaid Mental Health Plans Utah Medicaid Provider Manual, effective 04/01/2014; incorporates by reference the Non-Traditional Medicaid Health Plan Utah Medicaid Provider Manual with its attachments, effective 04/01/2014; incorporates by reference the Certified Family Nurse Practitioner and Pediatric Nurse Practitioner Utah Medicaid Provider Manual, effective 04/01/2014; incorporates by reference the Physical Therapy and Occupational Therapy Services Utah Medicaid Provider Manual, effective 04/01/2014; incorporates by reference the Physician Services and Anesthesiology Utah Medicaid Provider Manual with its attachments, effective 04/01/2014; incorporates by reference the Podiatric Services Utah Medicaid Provider Manual, effective 04/01/2014; incorporates by reference the Primary Care Network Utah Medicaid Provider Manual with its

attachments, effective 04/01/2014; incorporates by reference the Psychology Services Utah Medicaid Provider Manual, effective 04/01/2014; incorporates by reference the Rehabilitative Mental Health and Substance Use Disorder Services Utah Medicaid Provider Manual, effective 04/01/2014; incorporates by reference the Rehabilitative Mental Health Services for Children Under Authority of Department of Human Services, Division of Child and Family Services or Division of Juvenile Justice Services Utah Medicaid Provider Manual, effective 04/01/2014; incorporates by reference the Rural Health Clinic Services Utah Medicaid Provider Manual with its attachments, effective 04/01/2014; incorporates by reference the School-Based Skills Development Services Utah Medicaid Provider Manual, effective 04/01/2014; incorporates by reference Section I: General Information of the Utah Medicaid Provider Manual, effective 04/01/2014; incorporates by reference the Services for Pregnant Women Utah Medicaid Provider Manual, effective 04/01/2014; incorporates by reference the Substance Abuse Treatment Services and Targeted Case Management Services for Substance Abuse Utah Medicaid Provider Manual, effective 04/01/2014; incorporates by reference the Targeted Case Management for CHEC Medicaid Eligible Children Utah Medicaid Provider Manual, effective 04/01/2014; incorporates by reference the Targeted Case Management for the Chronically Mentally Ill Utah Medicaid Provider Manual, effective 04/01/2014; Targeted Case Management for Early Childhood (Ages 0-4) Utah Medicaid Provider Manual, effective 04/01/2014; and Vision Care Services Utah Medicaid Provider Manual, effective 04/01/2014.

STATUTORY OR CONSTITUTIONAL AUTHORIZATION FOR THIS RULE: Section 26-1-5 and Section 26-18-3

MATERIALS INCORPORATED BY REFERENCES:

- ◆ Updates Certified Nurse-Midwife Services Utah Medicaid Provider Manual, published by Division of Medicaid and Health Financing, 04/01/2014
- ◆ Updates Coverage and Reimbursement Code Look-up Tool, published by Division of Medicaid and Health Financing, 04/01/2014
- ◆ Updates Hospital Services Utah Medicaid Provider Manual with its attachments, published by Division of Medicaid and Health Financing, 04/01/2014
- ◆ Updates Laboratory Services Utah Medicaid Provider Manual with its attachments, published by Division of Medicaid and Health Financing, 04/01/2014
- ◆ Updates Rehabilitative Mental Health Services for Children Under Authority of Department of Human Services, Division of Child and Family Services or Division of Juvenile Justice Services Utah Medicaid Provider Manual, published by Division of Medicaid and Health Financing, 04/01/2014
- ◆ Updates Services for Pregnant Women Utah Medicaid Provider Manual, published by Division of Medicaid and Health Financing, 04/01/2014

- ◆ Updates Hospice Care Utah Medicaid Provider Manual, published by Division of Medicaid and Health Financing, 04/01/2014
- ◆ Updates School-Based Skills Development Services Utah Medicaid Provider Manual, published by Division of Medicaid and Health Financing, 04/01/2014
- ◆ Updates Podiatric Services Utah Medicaid Provider Manual, published by Division of Medicaid and Health Financing, 04/01/2014
- ◆ Updates Indian Health Utah Medicaid Provider Manual, published by Division of Medicaid and Health Financing, 04/01/2014
- ◆ Updates Utah Home and Community-Based Waiver Services for Individuals with Acquired Brain Injury Age 18 and Older Utah Medicaid Provider Manual, published by Division of Medicaid and Health Financing, 04/01/2014
- ◆ Updates Utah Home and Community-Based Waiver Services for Individuals with Intellectual Disabilities or Other Related Conditions Utah Medicaid Provider Manual, published by Division of Medicaid and Health Financing, 04/01/2014
- ◆ Updates Utah Home and Community-Based Waiver Services for Individuals with Physical Disabilities Utah Medicaid Provider Manual, published by Division of Medicaid and Health Financing, 04/01/2014
- ◆ Updates Dental, Oral Maxillofacial, and Orthodontia Services Utah Medicaid Provider Manual, published by Division of Medicaid and Health Financing, 04/01/2014
- ◆ Updates Utah Home and Community-Based Waiver Services for Technology Dependent, Medically Fragile Individuals Utah Medicaid Provider Manual, published by Division of Medicaid and Health Financing, 04/01/2014
- ◆ Updates Audiology Services Utah Medicaid Provider Manual, published by Division of Medicaid and Health Financing, 04/01/2014
- ◆ Updates Long Term Care Services in Nursing Facilities Utah Medicaid Provider Manual, with its attachments, published by Division of Medicaid and Health Financing, 04/01/2014
- ◆ Updates Targeted Case Management for the Chronically Mentally Ill Utah Medicaid Provider Manual, published by Division of Medicaid and Health Financing, 04/01/2014
- ◆ Updates General Attachments for the Utah Medicaid Provider Manual, published by Division of Medicaid and Health Financing, 04/01/2014
- ◆ Updates Targeted Case Management for CHEC Medicaid Eligible Children Utah Medicaid Provider Manual, published by Division of Medicaid and Health Financing, 04/01/2014
- ◆ Updates Physician Services and Anesthesiology Utah Medicaid Provider Manual with its attachments, published by Division of Medicaid and Health Financing, 04/01/2014
- ◆ Updates Office of Inspector General Administrative Hearings Procedures Manual, published by Office of Inspector General and Medicaid Services, 04/01/2014
- ◆ Updates CHEC Services Utah Medicaid Provider Manual with its attachments, published by Division of Medicaid and Health Financing, 04/01/2014
- ◆ Updates Non-Traditional Medicaid Health Plan Utah Medicaid Provider Manual with its attachments, published by Division of Medicaid and Health Financing, 04/01/2014
- ◆ Updates Pharmacy Services Utah Medicaid Provider Manual with its attachments, published by Division of Medicaid and Health Financing, 04/01/2014
- ◆ Updates Physical Therapy and Occupational Therapy Services Utah Medicaid Provider Manual, published by Division of Medicaid and Health Financing, 04/01/2014
- ◆ Updates Medical Supplies Utah Medicaid Provider Manual, published by Division of Medicaid and Health Financing, 04/01/2014
- ◆ Updates Rural Health Clinic Services Utah Medicaid Provider Manual with its attachments, published by Division of Medicaid and Health Financing, 04/01/2014
- ◆ Updates Psychology Services Utah Medicaid Provider Manual, published by Division of Medicaid and Health Financing, 04/01/2014
- ◆ Updates Utah Home and Community-Based Waiver Services New Choices Waiver Utah Medicaid Provider Manual, published by Division of Medicaid and Health Financing, 04/01/2014
- ◆ Updates Utah Home and Community-Based Waiver Services for Individuals 65 or Older Utah Medicaid Provider Manual, published by Division of Medicaid and Health Financing, 04/01/2014
- ◆ Updates Personal Care Utah Medicaid Provider Manual, with its attachments, published by Division of Medicaid and Health Financing, 04/01/2014
- ◆ Updates Mental Health Centers/Prepaid Mental Health Plans Utah Medicaid Provider Manual, published by Division of Medicaid and Health Financing, 04/01/2014
- ◆ Updates Primary Care Network Utah Medicaid Provider Manual with its attachments, published by Division of Medicaid and Health Financing, 04/01/2014
- ◆ Updates Home Health Agencies Utah Medicaid Provider Manual, and the manual's attachment for the Private Duty Nursing Acuity Grid, published by Division of Medicaid and Health Financing, 04/01/2014
- ◆ Updates Rehabilitative Mental Health and Substance Use Disorder Services Utah Medicaid Provider Manual, published by Division of Medicaid and Health Financing, 04/01/2014

- ◆ Updates Utah Medicaid State Plan, published by Centers for Medicare & Medicaid Services, 04/01/2014
- ◆ Updates Vision Care Services Utah Medicaid Provider Manual, published by Division of Medicaid and Health Financing, 04/01/2014
- ◆ Updates Utah Home and Community-Based Waiver Services Autism Waiver Utah Medicaid Provider Manual, published by Division of Medicaid and Health Financing, 04/01/2014
- ◆ Updates Section I: General Information of the Utah Medicaid Provider Manual, published by Division of Medicaid and Health Financing, 04/01/2014
- ◆ Updates Chiropractic Medicine Utah Medicaid Provider Manual, published by Division of Medicaid and Health Financing, 04/01/2014
- ◆ Updates Certified Family Nurse Practitioner and Pediatric Nurse Practitioner Utah Medicaid Provider Manual, published by Division of Medicaid and Health Financing, 04/01/2014
- ◆ Updates Speech-Language Services Utah Medicaid Provider Manual, published by Division of Medicaid and Health Financing, 04/01/2014
- ◆ Updates Targeted Case Management for Early Childhood (Ages 0-4) Utah Medicaid Provider Manual, published by Division of Medicaid and Health Financing, 04/01/2014
- ◆ Updates Medical Transportation Utah Medicaid Provider Manual, published by Division of Medicaid and Health Financing, 04/01/2014
- ◆ Updates Substance Abuse Treatment Services and Targeted Case Management Services for Substance Abuse Utah Medicaid Provider Manual, published by Division of Medicaid and Health Financing, 04/01/2014

ANTICIPATED COST OR SAVINGS TO:

- ◆ **THE STATE BUDGET:** There is no budget impact because this change only fulfills the requirement to incorporate the state plan by reference. Implementation of the State Plan is within legislative budget allotments. Further, the rule's incorporation of ongoing Medicaid policy described in the provider manuals and in the Look-up Tool does not create costs or savings to the Department or other state agencies.
- ◆ **LOCAL GOVERNMENTS:** There is no budget impact because this change only fulfills the requirement to incorporate the state plan by reference. Implementation of the State Plan is within legislative budget allotments. Further, the rule's incorporation of ongoing Medicaid policy described in the provider manuals and in the Look-up Tool does not create costs or savings to local governments.
- ◆ **SMALL BUSINESSES:** There is no budget impact because this change only fulfills the requirement to incorporate the state plan by reference. Implementation of the State Plan is within legislative budget allotments. Further, the rule's incorporation of ongoing Medicaid policy described in the provider manuals and in the Look-up Tool does not create costs or savings to small businesses.

- ◆ **PERSONS OTHER THAN SMALL BUSINESSES, BUSINESSES, OR LOCAL GOVERNMENTAL ENTITIES:** There is no budget impact because this change only fulfills the requirement to incorporate the state plan by reference. Implementation of the State Plan is within legislative budget allotments. Further, the rule's incorporation of ongoing Medicaid policy described in the provider manuals and in the Look-up Tool does not create costs or savings to Medicaid recipients and to Medicaid providers.

COMPLIANCE COSTS FOR AFFECTED PERSONS: There are no compliance costs because this change only fulfills the requirement to incorporate the state plan by reference. Implementation of the State Plan is within legislative budget allotments. Further, the rule's incorporation of ongoing Medicaid policy described in the provider manuals and in the Look-up Tool does not create costs or savings to a single Medicaid recipient or to a Medicaid provider.

COMMENTS BY THE DEPARTMENT HEAD ON THE FISCAL IMPACT THE RULE MAY HAVE ON BUSINESSES: No effect on business as there is no change in ongoing policy.

THE FULL TEXT OF THIS RULE MAY BE INSPECTED, DURING REGULAR BUSINESS HOURS, AT:

HEALTH
HEALTH CARE FINANCING,
COVERAGE AND REIMBURSEMENT POLICY
CANNON HEALTH BLDG
288 N 1460 W
SALT LAKE CITY, UT 84116-3231
or at the Division of Administrative Rules.

DIRECT QUESTIONS REGARDING THIS RULE TO:

- ◆ Craig Devashrayee by phone at 801-538-6641, by FAX at 801-538-6099, or by Internet E-mail at cdevashrayee@utah.gov

INTERESTED PERSONS MAY PRESENT THEIR VIEWS ON THIS RULE BY SUBMITTING WRITTEN COMMENTS NO LATER THAN AT 5:00 PM ON 05/15/2014

THIS RULE MAY BECOME EFFECTIVE ON: 05/22/2014

AUTHORIZED BY: David Patton, PhD, Executive Director

R414. Health, Health Care Financing, Coverage and Reimbursement Policy.

R414-1. Utah Medicaid Program.

R414-1-5. Incorporations by Reference.

The Department incorporates the ~~January~~ April 1, 2014 versions of the following by reference:

- (1) Utah Medicaid State Plan, including any approved amendments, under Title XIX of the Social Security Act Medical Assistance Program;
- (2) Medical Supplies Utah Medicaid Provider Manual, Section 2, Medical Supplies, as applied in Rule R414-70;

- (3) Hospital Services Utah Medicaid Provider Manual with its attachments;
- (4) Home Health Agencies Utah Medicaid Provider Manual, and the manual's attachment for the Private Duty Nursing Acuity Grid;
- (5) Speech-Language Services Utah Medicaid Provider Manual;
- (6) Audiology Services Utah Medicaid Provider Manual;
- (7) Hospice Care Utah Medicaid Provider Manual;
- (8) Long Term Care Services in Nursing Facilities Utah Medicaid Provider Manual with its attachments;
- (9) Personal Care Utah Medicaid Provider Manual with its attachments;
- (10) Utah Home and Community-Based Waiver Services for Individuals 65 or Older Utah Medicaid Provider Manual;
- (11) Utah Home and Community-Based Waiver Services for Individuals with Acquired Brain Injury Age 18 and Older Utah Medicaid Provider Manual;
- (12) Utah Home and Community-Based Waiver for Individuals with Intellectual Disabilities or Other Related Conditions Utah Medicaid Provider Manual;
- (13) Utah Home and Community-Based Waiver Services for Individuals with Physical Disabilities Utah Medicaid Provider Manual;
- (14) Utah Home and Community-Based Waiver Services New Choices Waiver Utah Medicaid Provider Manual;
- (15) Utah Home and Community-Based Waiver Services for Technology Dependent, Medically Fragile Individuals Utah Medicaid Provider Manual;
- (16) Utah Home and Community-Based Waiver Services Autism Waiver Utah Medicaid Provider Manual;
- (17) Office of Inspector General Administrative Hearings Procedures Manual;
- (18) Pharmacy Services Utah Medicaid Provider Manual with its attachments;
- (19) Coverage and Reimbursement Code Look-up Tool found at <http://health.utah.gov/medicaid/stplan/lookup/CoverageLookup.php>;
- (20) Certified Nurse - Midwife Services Utah Medicaid Provider Manual;
- (21) CHEC Services Utah Medicaid Provider Manual with its attachments;
- (22) Chiropractic Medicine Utah Medicaid Provider Manual;
- (23) Dental, Oral Maxillofacial, and Orthodontia Services Utah Medicaid Provider Manual;
- (24) General Attachments for the Utah Medicaid Provider Manual;
- (25) Indian Health Utah Medicaid Provider Manual;
- (26) Laboratory Services Utah Medicaid Provider Manual with its attachments;
- (27) Medical Transportation Utah Medicaid Provider Manual;
- (28) Mental Health Centers/Prepaid Mental Health Plans Utah Medicaid Provider Manual;
- (29) Non-Traditional Medicaid Health Plan Utah Medicaid Provider Manual with its attachments;
- (30) Certified Family Nurse Practitioner and Pediatric Nurse Practitioner Utah Medicaid Provider Manual;

- (31) Physical Therapy and Occupational Therapy Services Utah Medicaid Provider Manual;
- (32) Physician Services and Anesthesiology Utah Medicaid Provider Manual with its attachments;
- (33) Podiatric Services Utah Medicaid Provider Manual;
- (34) Primary Care Network Utah Medicaid Provider Manual with its attachments;
- (35) Psychology Services Utah Medicaid Provider Manual;
- (36) Rehabilitative Mental Health and Substance Use Disorder Services Utah Medicaid Provider Manual;
- (37) Rehabilitative Mental Health Services for Children Under Authority of Department of Human Services, Division of Child and Family Services or Division of Juvenile Justice Services Utah Medicaid Provider Manual;
- (38) Rural Health Clinic Services Utah Medicaid Provider Manual with its attachments;
- (39) School-Based Skills Development Services Utah Medicaid Provider Manual;
- (40) Section I: General Information of the Utah Medicaid Provider Manual;
- (41) Services for Pregnant Women Utah Medicaid Provider Manual;
- (42) Substance Abuse Treatment Services and Targeted Case Management Services for Substance Abuse Utah Medicaid Provider Manual;
- (43) Targeted Case Management for CHEC Medicaid Eligible Children Utah Medicaid Provider Manual;
- (44) Targeted Case Management for the Chronically Mentally Ill Utah Medicaid Provider Manual;
- (45) Targeted Case Management for Early Childhood (Ages 0-4) Utah Medicaid Provider Manual; and
- (46) Vision Care Services Utah Medicaid Provider Manual.

KEY: Medicaid
Date of Enactment or Last Substantive Amendment: 2014
Notice of Continuation: March 2, 2012
Authorizing, and Implemented or Interpreted Law: 26-1-5; 26-18-3; 26-34-2

**Health, Health Care Financing,
 Coverage and Reimbursement Policy
 R414-303
 Coverage Groups**

**NOTICE OF PROPOSED RULE
 (Amendment)
 DAR FILE NO.: 38401
 FILED: 04/01/2014**

RULE ANALYSIS
PURPOSE OF THE RULE OR REASON FOR THE CHANGE: The purpose of this change is to comply with a

clarification set forth by the Centers for Medicare and Medicaid Services (CMS) for the Tuberculosis Medicaid coverage group, which is subject to Modified Adjusted Gross Income (MAGI) methodology for eligibility determinations.

SUMMARY OF THE RULE OR CHANGE: This amendment clarifies that the Tuberculosis Medicaid coverage group is subject to MAGI methodology for eligibility determinations. This change also clarifies that to be eligible for Former Foster Care Youth, an individual must be on Medicaid when aging out of foster care. This change also updates references in the rule text and makes other technical changes.

STATUTORY OR CONSTITUTIONAL AUTHORIZATION FOR THIS RULE: Pub. L. No. 111-148 and Section 26-1-5 and Section 26-18-3

MATERIALS INCORPORATED BY REFERENCES:

- ◆ Adds Section 1902(a)(10)(A)(ii)(XII) of the Social Security Act, published by Social Security Administration, 01/01/2014

ANTICIPATED COST OR SAVINGS TO:

- ◆ **THE STATE BUDGET:** There is no impact to the state budget because this change does not increase the number of individuals who are eligible for the Tuberculosis Medicaid coverage group, which averages less than one individual each year. In addition, this amendment only clarifies ongoing policy in Former Foster Care Youth and does not affect services for individuals who are eligible for this program.
- ◆ **LOCAL GOVERNMENTS:** There is no impact to local governments because they neither fund nor provide Medicaid services to Medicaid recipients.
- ◆ **SMALL BUSINESSES:** There is no impact to small businesses because this change does not increase the number of individuals who are eligible for the Tuberculosis Medicaid coverage group, which averages less than one individual each year. In addition, this amendment only clarifies ongoing policy in Former Foster Care Youth and does not impose new costs or requirements on business.
- ◆ **PERSONS OTHER THAN SMALL BUSINESSES, BUSINESSES, OR LOCAL GOVERNMENTAL ENTITIES:** There is no budget impact because this change does not increase the number of individuals who are eligible for the Tuberculosis Medicaid coverage group, which averages less than one individual each year. In addition, this amendment only clarifies ongoing policy in Former Foster Care Youth and does not impose new costs or requirements on Medicaid providers and on Medicaid recipients.

COMPLIANCE COSTS FOR AFFECTED PERSONS: There is no budget impact because this change does not increase the number of individuals who are eligible for the Tuberculosis Medicaid coverage group, which averages less than one individual each year. In addition, this amendment only clarifies ongoing policy in Former Foster Care Youth and does not impose new costs or requirements on a single Medicaid provider or on a Medicaid recipient.

COMMENTS BY THE DEPARTMENT HEAD ON THE FISCAL IMPACT THE RULE MAY HAVE ON BUSINESSES: No impact on business as this rule makes no change in current practices.

THE FULL TEXT OF THIS RULE MAY BE INSPECTED, DURING REGULAR BUSINESS HOURS, AT:

HEALTH
HEALTH CARE FINANCING,
COVERAGE AND REIMBURSEMENT POLICY
CANNON HEALTH BLDG
288 N 1460 W
SALT LAKE CITY, UT 84116-3231
or at the Division of Administrative Rules.

DIRECT QUESTIONS REGARDING THIS RULE TO:

◆ Craig Devashrayee by phone at 801-538-6641, by FAX at 801-538-6099, or by Internet E-mail at cdevashrayee@utah.gov

INTERESTED PERSONS MAY PRESENT THEIR VIEWS ON THIS RULE BY SUBMITTING WRITTEN COMMENTS NO LATER THAN AT 5:00 PM ON 05/15/2014

THIS RULE MAY BECOME EFFECTIVE ON: 06/01/2014

AUTHORIZED BY: David Patton, PhD, Executive Director

R414. Health, Health Care Financing, Coverage and Reimbursement Policy.

R414-303. Coverage Groups.

R414-303-4. Medicaid for Parents and Caretaker Relatives, Pregnant Women, ~~and~~ Children, and Individuals Infected with Tuberculosis Using MAGI Methodology.

(1) The Department provides Medicaid coverage to individuals who are eligible as described in 42 CFR 435.110, 435.116, 435.118, and 435.139, October 1, 2012 ed., and Section 1902(a)(10)(A)(ii)(XII) of the Social Security Act, effective January 1, 2014, which are adopted and incorporated by reference. The Department uses the MAGI methodology defined in Section R414-304-5 to determine household composition and countable income for these individuals.

(2) To qualify for coverage, a parent or other caretaker relative must have a dependent child living with the parent or other caretaker relative.

(3) The Department provides Medicaid coverage to parents and other caretaker relatives, whose countable income determined using the MAGI methodology does not exceed the applicable income standard for the individual's family size. The income standards are as follows:

.....

(4) For a family that exceeds 16 persons, add \$62 to the income standard for each additional family member.

(5) The Department provides Medicaid coverage to children who are zero through five years of age as required in 42 CFR 435.118,

whose countable income is equal to or below 139% of the federal poverty level (FPL).

(6) The Department provides Medicaid coverage to children who are six through 18 years of age as required in 42 CFR 435.118, whose countable income is equal to or below 133% of the FPL.

(7) The Department provides Medicaid coverage to pregnant women as required in 42 CFR 435.116. The Department elects the income limit of 139% of the FPL to determine a pregnant woman's eligibility for Medicaid.

(8) The Department provides Medicaid coverage to an infant until the infant turns one-year old when born to a woman eligible for Utah Medicaid on the date of the delivery of the infant, in compliance with Sec. 113(b)(1), Children's Health Insurance Program Reauthorization Act of 2009, Pub. L. No. 111 3. The infant does not have to remain in the birth mother's home and the birth mother does not have to continue to be eligible for Medicaid. The infant must continue to be a Utah resident to receive coverage.

(9) The Department provides Medicaid coverage to an individual who is infected with tuberculosis and who does not qualify for a mandatory Medicaid coverage group. The individual's income cannot exceed the amount of earned income an individual, or if married, a couple, can have to qualify for Supplemental Security Income.

R414-303-8. Foster Care, Former Foster Care Youth and Independent Foster Care Adolescents.

(1) The Department adopts and incorporates by reference 42 CFR 435.115(e)(2), October 1, 2012 ed., and Section 1902(a)(10)(A)(i)(IX) of the Social Security Act, effective January 1, 2013.

(2) Eligibility for foster children who meet the definition of a dependent child under the State Plan for Aid to Families with Dependent Children in effect on July 16, 1996, is not governed by this rule. The Department of Human Services determines eligibility for foster care Medicaid.

(3) The Department covers individuals who age out of foster care. This coverage is called the Former Foster Care Youth. These individuals must be enrolled in Utah Medicaid at the time they age out of foster care.

(a) Coverage is available through the month in which the individual turns 26 years of age.

(b) There is no income or asset test for eligibility under this group.

(4) The Department elects to cover individuals who age out of foster care, are not eligible under the Former Foster Care Youth coverage group, and who are 18 years old but not yet 21 years old as described in 1902(a)(10)(A)(ii)(XVII) of the Social Security Act. This coverage is the Independent Foster Care Adolescents program. The Department determines eligibility according to the following requirements.

(a) At the time the individual turns 18 years of age, the individual must be in the custody of the Division of Child and Family Services, or the Department of Human Services if the Division of Child and Family Services is the primary case manager, or a federally recognized Indian tribe, but not in the custody of the Division of Youth Corrections.

(b) Income and assets of the child are not counted to determine eligibility under the Independent Foster Care Adolescents program.

(c) When funds are available, an eligible independent foster care adolescent may receive Medicaid under this coverage group until he or she reaches 21 years of age, and through the end of that month.

KEY: MAGI-based, coverage groups, former foster care youth, presumptive eligibility

Date of Enactment or Last Substantive Amendment: [~~January 1,~~ 2014

Notice of Continuation: January 23, 2013

Authorizing, and Implemented or Interpreted Law: 26-18-3; 26-1-5

Insurance, Administration **R590-269-4** Open and Special Enrollment Periods

NOTICE OF PROPOSED RULE (Amendment)

DAR FILE NO.: 38376
FILED: 03/19/2014

RULE ANALYSIS

PURPOSE OF THE RULE OR REASON FOR THE CHANGE: The change is being made to correct the open-enrollment period for 2015 and the following years to match that required by the federal Department of Health and Human Services.

SUMMARY OF THE RULE OR CHANGE: The change in the open-enrollment period will comply with that of the federal government and will lengthen the open-enrollment period for 2015.

STATUTORY OR CONSTITUTIONAL AUTHORIZATION FOR THIS RULE: Subsection 31A-30-117(1)(c)

ANTICIPATED COST OR SAVINGS TO:

◆ **THE STATE BUDGET:** Changing the date of the open-enrollment period will have no fiscal impact on the department or state's budgets. It simply puts Utah in compliance with federal laws and provides more time for people to enroll for an individual health benefit plan outside the Federally Facilitated Marketplace. It will not make a change in fees coming into the department or costs to the department.

◆ **LOCAL GOVERNMENTS:** The changes to this rule will have no fiscal impact on local governments. It simply correlates the open enrollment dates with those required by the federal government and provides more time for individuals to enroll in individual health benefit plans provided by health insurers.

◆ **SMALL BUSINESSES:** The changes to this rule will have no impact on small businesses. The change will lengthen the open enrollment period for individuals to enroll in individual

health benefit plans, which may allow more people to apply for the coverage.

◆ **PERSONS OTHER THAN SMALL BUSINESSES, BUSINESSES, OR LOCAL GOVERNMENTAL ENTITIES:** The changes to this rule will have the greatest impact on insurers selling individual health benefit plans and on those individuals seeking coverage in the market place. The change will lengthen the open enrollment period for individuals to enroll in individual health benefit plans, which may cause more people to purchase coverage they have not had before and insurance companies to sell more policies. The fiscal impact would vary from one individual and insurer to another.

COMPLIANCE COSTS FOR AFFECTED PERSONS: The changes to this rule will have the greatest impact on insurers selling individual health benefit plans and on those individuals seeking coverage in the market place. The change will lengthen the open enrollment period for individuals to enroll in individual health benefit plans, which may cause more people to purchase coverage they have not had before and insurance companies to sell more policies. The fiscal impact would vary from one individual and insurer to another.

COMMENTS BY THE DEPARTMENT HEAD ON THE FISCAL IMPACT THE RULE MAY HAVE ON BUSINESSES: The impact of the length of the open-enrollment period may increase health insurers sales of individual health benefit plans. The impact, if any, would vary from insurer to insurer. It cannot be determined at this time.

THE FULL TEXT OF THIS RULE MAY BE INSPECTED, DURING REGULAR BUSINESS HOURS, AT:

INSURANCE
ADMINISTRATION
ROOM 3110 STATE OFFICE BLDG
450 N MAIN ST
SALT LAKE CITY, UT 84114-1201
or at the Division of Administrative Rules.

DIRECT QUESTIONS REGARDING THIS RULE TO:

◆ Jilene Whitby by phone at 801-538-3803, by FAX at 801-538-3829, or by Internet E-mail at jwhitby@utah.gov

INTERESTED PERSONS MAY PRESENT THEIR VIEWS ON THIS RULE BY SUBMITTING WRITTEN COMMENTS NO LATER THAN AT 5:00 PM ON 05/15/2014

THIS RULE MAY BECOME EFFECTIVE ON: 05/22/2014

AUTHORIZED BY: Todd Kiser, Commissioner

R590. Insurance, Administration.

R590-269. Individual Open Enrollment Period.

R590-269-4. Open and Special Enrollment Periods.

(1)(a)(i) Except as otherwise provided herein, the initial open enrollment period for an individual health benefit plan outside

the Federally Facilitated Marketplace is October 1, 2013 through March 31, 2014.

(ii) The open enrollment period in Subsection (a)(i) shall be extended to be consistent with the open enrollment period for the Federally Facilitated Marketplace if the United States Department of Health and Human Services extends the open enrollment period for the Federally Facilitated Marketplace beyond March 31, 2014.

(iii)(A) Coverage begins on January 1, 2014 for individuals who enroll on or before December 15, 2013.

(B) After December 15, 2013, if an individual enrollment occurs between the first and the fifteenth of the month, coverage is effective the first day of the following month. If enrollment occurs between the sixteen and the last day of the month, then coverage is effective the first day of the second following month.

(b) The open enrollment period for 2015 is November 15, 2014 through February 15, 2015.

(c) [After the initial enrollment period in Subsection (a),
†]The open enrollment period [is annually from October 15 through December 7 for a coverage effective date of January 1 the immediately following year] for subsequent years will be the open enrollment period as established by the United States Department of Health and Human Services.

(2)(a) An individual carrier shall offer to an individual experiencing a qualifying life event, a special enrollment period for at least 60 days.

(b) In the case of birth, adoption or placement for adoption, the coverage is effective on the date of:

- (i) birth;
- (ii) adoption; or
- (iii) placement for adoption

(c) Coverage is effective the first day of the month following the date the insurer receives the request for special enrollment in the case of:

- (i) marriage;
- (ii) an individual or dependent loses minimum essential coverage;

(iii) an individual or dependent's enrollment or non-enrollment is unintentional, inadvertent, or erroneous and is the result of the error, misrepresentation, or inaction of an officer, employee or agent of an exchange or the United States Department of Health and Human Services, or its instrumentalities as evaluated and determined by an exchange ;

(iv) an individual adequately demonstrates to the individual carrier that the health benefit plan in which he or she is previously enrolled substantially violated a material provision of its contract in relation to the enrollee; or

(v) an individual permanently moves into a new service area.

(3) Nothing in this rule prohibits an insurer from offering open or special enrollment periods in addition to the open and special enrollment periods required by this rule.

KEY: individual open enrollment period

Date of Enactment or Last Substantive Amendment: [January 13, 2014

31A-30-117(1)(c)

Labor Commission, Boiler and Elevator
Safety
R616-3-3
Safety Codes for Elevators

NOTICE OF PROPOSED RULE

(Amendment)

DAR FILE NO.: 38378

FILED: 03/24/2014

RULE ANALYSIS

PURPOSE OF THE RULE OR REASON FOR THE CHANGE: The purpose of this change is to adopt the 2013 edition of the American Society of Mechanical Engineers (ASME) A17.1 and the 2011 edition of ASME A18.1 codes.

SUMMARY OF THE RULE OR CHANGE: The ASME A17.1 2013 edition and A18.1 2011 edition codes adopted by the proposed rule make a small number of relatively minor editorial changes.

STATUTORY OR CONSTITUTIONAL AUTHORIZATION FOR THIS RULE: Section 34A-1-101 et seq.

MATERIALS INCORPORATED BY REFERENCES:

- ◆ Updates Safety Code for Elevators and Escalators, published by American Society of Mechanical Engineers, ASME A17.1-2013
- ◆ Updates Safety Standard for Platform Lifts and Stairway Chairlifts, published by American Society of Mechanical Engineers, ASME A18.1-2011

ANTICIPATED COST OR SAVINGS TO:

- ◆ **THE STATE BUDGET:** The 2013 edition of the ASME A17.1 and 2011 edition of A18.1 codes address a small number of relatively minor editorial changes which will not result in a net cost or savings to the state budget.
- ◆ **LOCAL GOVERNMENTS:** The 2013 edition of the ASME A17.1 and 2011 edition of A18.1 codes address a small number of relatively minor editorial changes which will not result in a net cost or savings to local government.
- ◆ **SMALL BUSINESSES:** The 2013 edition of the ASME A17.1 and 2011 edition of A18.1 codes address a small number of relatively minor editorial changes which will not result in a net cost or savings to small businesses.
- ◆ **PERSONS OTHER THAN SMALL BUSINESSES, BUSINESSES, OR LOCAL GOVERNMENTAL ENTITIES:** The 2013 edition of the ASME A17.1 and 2011 edition of A18.1 codes address a small number of relatively minor editorial changes which will not result in a net cost or savings to persons other than small businesses, businesses, or local government entities.

COMPLIANCE COSTS FOR AFFECTED PERSONS: The 2013 edition of the ASME A17.1 and 2011 edition of A18.1

codes address a small number of relatively minor editorial changes which will not result in a net cost.

COMMENTS BY THE DEPARTMENT HEAD ON THE FISCAL IMPACT THE RULE MAY HAVE ON BUSINESSES: The 2013 edition of the ASME A17.1 and 2011 edition of A18.1 codes address a small number of relatively minor editorial changes which will not result in a net cost.

THE FULL TEXT OF THIS RULE MAY BE INSPECTED, DURING REGULAR BUSINESS HOURS, AT:

LABOR COMMISSION
BOILER AND ELEVATOR SAFETY
HEBER M WELLS BLDG
160 E 300 S
SALT LAKE CITY, UT 84111-2316
or at the Division of Administrative Rules.

DIRECT QUESTIONS REGARDING THIS RULE TO:

- ◆ Ami Windham by phone at 801-530-6850, by FAX at 801-530-6871, or by Internet E-mail at awindham@utah.gov
- ◆ Pete Hackford by phone at 801-530-7605, by FAX at 801-530-6871, or by Internet E-mail at phackford@utah.gov

INTERESTED PERSONS MAY PRESENT THEIR VIEWS ON THIS RULE BY SUBMITTING WRITTEN COMMENTS NO LATER THAN AT 5:00 PM ON 05/15/2014

THIS RULE MAY BECOME EFFECTIVE ON: 05/22/2014

AUTHORIZED BY: Sherrie Hayashi, Commissioner

R616. Labor Commission, Boiler and Elevator Safety.**R616-3. Elevator Rules.****R616-3-3. Safety Codes for Elevators.**

The following safety codes are adopted and incorporated by reference within this rule:

A. ASME A17.1-~~2010~~2013/CSA B44-10, Safety Code for Elevators and Escalators, and amended as follows:

1. Delete 2.2.2.5;

2. Amend 8.6.5.8 as follows: Existing hydraulic cylinders installed below ground when found to be leaking shall be replaced with cylinders conforming to 3.18.3.4 or the car shall be provided with safeties conforming to 3.17.1 and guide rails, guide rail supports and fastenings conforming to 3.23.1. This code is issued every three years with annual addenda. New issues and addenda become mandatory only when a formal change is made to these rules. Elevators are required to comply with the A17.1 code in effect at the time of installation.

B. ASME A17.3 - 2002 Safety Code for Existing Elevators and Escalators. This code is adopted for regulatory guidance only for elevators classified as remodeled elevators by the Division of Boiler and Elevator Safety.

C. ASME A90.1-2009, Safety Standard for Belt Manlifts.

D. ANSI A10.4-2007, Safety Requirements for Personnel Hoists and Employee Elevators for Construction and Demolition Operations.

E. 2006 International Building Code.

F. ICC/ANSIA117.1-1998 Accessible and Usable Buildings and Facilities, sections 407 and 408, approved February 13, 1998.

G. ASME A18.1-~~2008~~2011 Safety Standard For Platform Lifts And Stairway Chairlifts.

H. ASME A17.6-2010 Standard for Elevator Suspension, Compensation, and Governor Systems.

KEY: elevators, certification, safety

Date of Enactment or Last Substantive Amendment: ~~[May 22, 2012]~~2014

Notice of Continuation: October 5, 2011

Authorizing, and Implemented or Interpreted Law: 34A-1-101 et seq.

**Public Service Commission,
Administration
R746-340
Service Quality for Telecommunications
Corporations**

NOTICE OF PROPOSED RULE

(Amendment)

DAR FILE NO.: 38363

FILED: 03/17/2014

RULE ANALYSIS

PURPOSE OF THE RULE OR REASON FOR THE CHANGE: The end-user service quality rules for incumbent telecommunications corporations with 30,000 or more access lines in Utah (Sections R746-340-8 and R746-340-9) are applicable to only one corporation; Qwest Corporation dba CenturyLink QC ("CenturyLink"). The Public Service Commission of Utah approved CenturyLink's petition to deviate from and/or waive the previously referenced end-user rules on 06/28/2013. The Commission's decision to approve CenturyLink's petition was based in part on the recommendation of the Division of Public Utilities ("Division"). The Division recommended the Commission approve CenturyLink's petition because: 1) sufficient competition exists throughout CenturyLink's service area in Utah; and 2) CenturyLink's customers will not see an impact on their ability to have service issues resolved because they may still file individual complaints with the Division if their service quality becomes a concern. As a result of the approval of CenturyLink's petition, Sections R746-340-8 and R746-340-9 are now moot and unnecessary because the rules were only applicable to CenturyLink and need to be removed.

SUMMARY OF THE RULE OR CHANGE: The proposed rule change removes Sections R746-340-8 and R746-340-9 in their entirety.

STATUTORY OR CONSTITUTIONAL AUTHORIZATION FOR THIS RULE: Section 54-4-1 and Section 54-4-14 and Section 54-4-23

ANTICIPATED COST OR SAVINGS TO:

◆ **THE STATE BUDGET:** Sections R746-340-8 and R746-340-9 impose no obligations on the state and therefore, no cost or savings will result from removal of these sections.

◆ **LOCAL GOVERNMENTS:** Sections R746-340-8 and R746-340-9 impose no obligations on local government and therefore, removal of these sections will not affect local government.

◆ **SMALL BUSINESSES:** Sections R746-340-8 and R746-340-9 impose no obligations on small businesses and therefore, removal of these sections will not affect small businesses.

◆ **PERSONS OTHER THAN SMALL BUSINESSES, BUSINESSES, OR LOCAL GOVERNMENTAL ENTITIES:** The proposed rule change deletes Sections R746-340-8 and R746-340-9 which are now moot and unnecessary. As such, no persons will be affected by deletion of these sections.

COMPLIANCE COSTS FOR AFFECTED PERSONS: These sections were made moot by the Commission's order of 06/28/2013, and therefore, no persons will be affected by the removal of these sections. As such, there are no associated compliance costs.

COMMENTS BY THE DEPARTMENT HEAD ON THE FISCAL IMPACT THE RULE MAY HAVE ON BUSINESSES: Because these sections are now moot by the Commission's order of 06/28/2013, the removal of these sections will have no fiscal impact on businesses.

THE FULL TEXT OF THIS RULE MAY BE INSPECTED, DURING REGULAR BUSINESS HOURS, AT:

PUBLIC SERVICE COMMISSION
ADMINISTRATION
HEBER M WELLS BLDG
160 E 300 S
SALT LAKE CITY, UT 84111-2316
or at the Division of Administrative Rules.

DIRECT QUESTIONS REGARDING THIS RULE TO:

◆ Jordan White by phone at 801-530-6712, or by Internet E-mail at jordanwhite@utah.gov

◆ Sheri Bintz by phone at 801-530-6714, by FAX at 801-530-6796, or by Internet E-mail at sbintz@utah.gov

INTERESTED PERSONS MAY PRESENT THEIR VIEWS ON THIS RULE BY SUBMITTING WRITTEN COMMENTS NO LATER THAN AT 5:00 PM ON 05/15/2014

THIS RULE MAY BECOME EFFECTIVE ON: 05/22/2014

AUTHORIZED BY: Jordan White, Legal Counsel

R746. Public Service Commission, Administration.**R746-340. Service Quality for Telecommunications Corporations.****R746-340-1. General.**

A. Application of Rules -- These rules promulgated herein shall apply to each telephone corporation, as defined in Subsection 54-8b-2(16).

1. These rules govern the furnishing of communications services and facilities to the public by a telecommunications corporation subject to the jurisdiction of the Commission. The purpose of these rules is to establish reasonable service standards to the end that adequate and satisfactory service will be rendered to the public.

2. The adoption of these rules by the Commission shall in no way preclude it from altering or amending its rules pursuant to applicable statutory procedures, nor shall the adoption of these rules preclude the Commission from granting temporary exemptions to rules in exceptional cases as provided in R746-100-15, Deviation from Rules.

B. Definitions -- In the interpretation of these rules, the following definitions shall apply:

1. "Allowed Service Disruption Event" -- an event when a telecommunications corporation is prevented from providing adequate service due to:

- a. A customer's act;
- b. A customer's failure to act;
- c. A governmental agency's delay in granting a right-of-way or other required permit;
- d. A disaster or an act of nature that would not have been reasonably anticipated and prepared for by the telecommunications corporation;
- e. A disaster of sufficient intensity to give rise to an emergency being declared by state government;
- f. A work stoppage, which shall include a grace period of six weeks following return to work;
- g. A cable cut outside the telecommunications corporation's control affecting more than 20 pairs.
- h. A public calling event, busy calling or dial tone loss due to mass calling or dial-up event;
- i. Negligent or willful misconduct by customers or third parties including outages originating from the introduction of a virus onto the telecommunications corporation's network or acts or terrorism.

2. "Central Office" -- A building that contains the necessary telecommunications equipment and operating arrangements for switching, connecting, and inter-connecting the required local, interoffice, and interexchange services for the general public.

3. "Central Office Area" -- A geographic area served by a central office.

4. "CFR" means the Code of Federal Regulations, 2000 edition.

5. "Choke Network Trunk Groups" -- A network with special trunking and special prefixes in place to manage the use of mass-calling-numbers.

6. "Commission" -- Public Service Commission of Utah.

7. "Commitment" -- A promise by a telecommunications corporation to a customer specifying a date and time to provide a service.

8. "Customer" -- A person, firm, partnership, corporation, municipality, cooperative, organization, or governmental agency, provided with telecommunications services by a telecommunications corporation.

9. Customer trouble reports include:

a. "Trouble Report" -- A customer report attributable to the malfunction of a telecommunications corporation's facilities and includes repeat trouble reports.

b. "Out of Service Trouble Report" -- A report used when a customer reports there is neither incoming nor outgoing telecommunications capability.

c. "Repeat Trouble Report" -- A report received on a customer access line within 30 days of a closed trouble report.

10. "Exchange" -- A unit established by a telecommunications corporation for the administration of telecommunication services in a specified geographic area. It may consist of one or more central office areas together with associated outside plant facilities used in furnishing telecommunications services in that area.

11. "Exchange Service Area" -- The geographical territory served by an exchange.

12. "Held Order" -- A request for basic exchange line service delayed beyond the initial commitment date due to a lack of facilities which the telecommunications corporation is responsible for providing.

13. "Interconnection Trunk Group" -- Connects the telecommunications corporation's central office or wire center with another telecommunications corporation's facilities.

14. "Local Access Line" -- A facility, totally within one central office area, providing a telecommunications connection between a customer's service location and the serving central office.

15. "Out of Service" -- When there exists neither incoming nor outgoing telecommunication capability.

16. "Party Line Service" -- A grade of local exchange service which provides for more than one customer to be served by the same local access line.

17. "Price List" -- The terms and conditions upon which public telecommunications services are offered that is filed by a telecommunications corporation that is subject to pricing flexibility pursuant to 54-8b-2.3.

18. "Tariff" -- A portion or the entire body of rates, tolls, rentals, charges, classifications and rules, filed by the telecommunications corporation and approved by the Commission.

19. "Telecommunications Corporation" -- A "telephone corporation" as defined in Section 54-2-1(23).

20. "Voice Grade Service" -- Service that at a minimum, includes:

- a. providing access to E911, which identifies the exact location of the emergency caller;
- b. Two-way communications with a clear voice each way;
- c. Ability to place and receive calls; and
- d. Voice band between 300 HZ and 3000 HZ.

21. "Wire Center" -- The building in which one or more local switching systems are installed and where the outside cable plant is connected to the central office equipment.

R746-340-2. Records and Reports.

A. Availability of Records -- Each telecommunications corporation shall make its books and records open to inspection by representatives of the Commission, the Division of Public Utilities, or the Committee of Consumer Services (or any successor agencies) during normal operating hours.

B. Retention of Records -- All records required by these rules shall be preserved for the period of time specified at 47 CFR 42, incorporated by this reference.

C. Reports --

1. Each telecommunications corporation shall maintain records of its operations in sufficient detail to permit review of its service performance.

2. Central offices with more than 500 local access lines, shall each report as promptly as possible to the Commission and the local news media, including, but not limited to, radio, TV, and newspaper, when applicable, failure or damage to the equipment or facilities which disrupts the local or toll service of 25 percent or more of the local access lines in that central office for a time period in excess of two hours.

D. Uniform System of Accounts -- The Uniform System of Accounts for Class A and Class B telephone utilities, as prescribed by the Federal Communications Commission at 47 CFR 32 is the prescribed system of accounts to record the results of Utah intrastate operations.

E. Data to be Filed with the Commission --

1. Terms and Conditions of Service -- Each telecommunications corporation shall have its tariff, price lists, etc., which describe the terms and conditions under which it offers public telecommunications services on file with the Commission, and where applicable, in accordance with the rules governing the filing of the information as prescribed by the Commission. It shall also provide the same information to the Commission in electronic format as requested by the Commission.

2. Exchange Maps -- Each telecommunications corporation shall have on file with the Commission an exchange area boundary map for each of its exchanges within the state. Each map shall clearly show the boundary lines of the exchange area wherein the telecommunications corporation serves. Exchange boundary lines shall be located by appropriate measurement to an identifiable location where that portion of the boundary line is not otherwise located on section lines, waterways, railroads, roads, etc. Maps shall show the location of major highways, section lines, geographic township and range lines and major landmarks located outside municipalities. An approximate distance scale shall be shown on each map.

R746-340-3. Engineering.

A. Utility Plant -- Utility plant shall be designed, constructed, maintained and operated in accordance with the provisions outlined in the National Electrical Safety Code, 1993 edition, incorporated by reference.

B. Party-line Service -- When party-line service is to be provided, no more than eight customers shall be connected on one local access line, unless approved by the Commission. The telecommunications corporation may re-group customers as may be necessary to carry out the provisions of this rule.

R746-340-4. Emergency Operation.

A. Emergency Service -- Telecommunications corporations shall make reasonable arrangements to meet emergencies resulting from failures of service, unusual and prolonged increases in traffic, illness of personnel, fire, storm or other acts of God, and inform its employees as to procedures to be followed in the event of emergency in order to prevent or minimize interruption or impairment of telecommunication service.

B. Battery Power -- Each central office shall have a minimum of three hours battery reserve.

C. Auxiliary Power -- In central offices exceeding 5,000 lines, a permanent auxiliary power unit shall be installed.

R746-340-5. Maintenance.

A. Maintenance of Plant and Equipment --

1. Each telecommunications corporation shall adopt and pursue a maintenance program aimed at achieving efficient operation of its system to permit the rendering of safe, adequate and continuous service at all times.

2. Maintenance shall include keeping all plant and equipment in a good state of repair consistent with safety and the adequate service performance of the plant affected.

B. Customer Trouble Reports --

1. Each telecommunications corporation shall provide for the receipt of customer trouble reports at all hours, and shall make a full and prompt investigation of and response to each complaint. The telecommunications corporation shall maintain a record of trouble reports made by its customers. This record shall include appropriate identification of the customer or service affected, the time, date and nature of the report, and the action taken to clear the trouble or satisfy the complaint.

2. Provision shall be made to clear emergency out-of-service trouble at all hours, consistent with the bona fide needs of customers and the personal safety of utility personnel.

3. Provisions shall be made to clear other out-of-service trouble not requiring unusual repair, within 48 hours of the report received by the telecommunications corporation, unless the customer agrees to another arrangement.

4. If unusual repairs are required, or other factors preclude clearing of reported trouble promptly, reasonable efforts shall be made to notify affected customers.

C. Inspections and Tests -- Each telecommunications corporation shall adopt a program of periodic tests, inspections and preventive maintenance aimed at achieving efficient operation of its system and rendering safe, adequate, and continuous service. It shall file a description of its inspection and testing program with the Commission showing how it will monitor and report compliance with Commission rules or standards.

D. Planned Service Interruptions -- If service must be interrupted for purposes of rearranging facilities or equipment, the work shall be done at a time which will cause minimal inconvenience to customers. Each telecommunications corporation shall attempt to notify each affected customer in advance of the interruption. Emergency or alternative service shall be provided, during the period of the interruption, to assure communication is available for local law enforcement and public safety units and agencies.

R746-340-6. Safety.

A. Safety -- Each telecommunications corporation shall:

1. require its employees to use suitable tools and equipment to perform their work in a safe manner;
2. instruct employees in safe work practices;
3. exercise reasonable care in minimizing the hazards to which its employees, customers and the general public may be subjected.

R746-340-7. End User Service Standards For All Telecommunications Corporations.

A. Public Telecommunications Services -- A telecommunications corporation providing public telecommunications services shall, excluding documented Allowed Service Disruption events listed under R746-340-1(B)(1):

1. meet minimum voice grade requirements as defined in R746-340-1(B)(19);
2. meet network call completion standards:
 - a. provide dial tone within three seconds on at least 98 percent of tested calls placed during average daily busy hours each month for each wire center; and
 - b. assure that no interoffice facilities entirely within a telecommunications corporation's network, except choke network trunks, exceed two percent blocking. Intertandem facilities shall be governed by R746-365.

~~**[R746-340-8. End User Service Standards for Incumbent Telecommunications Corporations with 30,000 or More Access Lines in Utah.**~~

~~Except, after public notice and hearing, as ordered by the Commission upon finding that sufficient competition exists in a defined geographic area to waive one or more of the following standards and rely upon market operations to ensure adequate end user service quality, each incumbent telecommunications corporation with 30,000 or more access lines in Utah shall comply with the following service standards with respect to public telecommunications services offered pursuant to tariff on January 1, 2005. An incumbent telecommunications corporation subject to Rule 746-340-8 will be subject to 54-7-25 penalties for the failure to comply with any of these service standards for any time period greater than three consecutive months, unless the Commission determines, pursuant to a request for agency action by an interested person and proceedings thereon, that the corporation's failure(s) to comply with these standards warrant imposition of such penalties for a shorter time period:~~

~~A. Installations -- Excluding documented Allowed Service Disruption events listed in R746-340-1(B)(1), a telecommunications corporation shall:~~

- ~~1. install 95 percent of all new, transfer, and change orders within three business days or on the customer-requested due dates, whichever is later, on a wire center basis;~~
- ~~2. allow no more than four held orders per 1,000 new, transfer and change orders at the end of any month on a statewide basis for all areas not previously exempted under this rule;~~
- ~~3. meet 90 percent of all new, transfer and change order installation commitments, excluding customer trouble reports within seven days of initial installation, on a wire center basis, unless the customer requests a later date; and~~
- ~~4. automatically credit \$10 to a residential customer, \$40 to a small business customer, for missing an installation commitment.~~

~~B. Repairs -- Excluding documented Allowed Service Disruption Events listed in R746-340-1(B)(1), a telecommunications corporation shall:~~

- ~~1. Repair 85 percent of all out-of-service troubles within one business day, on a wire center basis;~~
- ~~2. repair 90 percent of all troubles within two business days, on a wire center basis; and~~
- ~~3. automatically credit \$10 to a residential customer, \$40 to a small business customer, for missing a repair commitment.~~
- ~~4. Trouble reports received after 4:00 p.m. Monday through Friday are deemed received at 8:00 a.m. on the following business day.~~

~~C. Billing Requirements -- Excluding documented Allowed Service Disruption events listed in R746-340-1(B)(1), a telecommunications corporation shall:~~

- ~~1. correct a billing error upon receiving a customer request by correcting the error on the customers account within one week.~~
- ~~2. Maintain and provide to the Division of Public Utilities upon request, evidence documenting its activities, the purposes, dates, volumes, and times of those activities in:~~
 - ~~a. making billing corrections within one week; and~~
 - ~~b. investigating to determine whether or how to make billing corrections.~~

~~D. Disconnection of Service Requirements -- Excluding documented Allowed Service Disruption Events listed in R746-340-1(B)(1), a telecommunications corporation shall:~~

- ~~1. disconnect a customer for nonpayment no earlier than the disconnect date listed on the telecommunications corporation's disconnect notice to the customer; and~~
- ~~2. maintain and provide to the Division of Public Utilities upon request, evidence documenting its activities and the dates of those activities when disconnecting customers no earlier than the disconnect dates specified on their disconnect notices; and disconnecting only those customers eligible to be disconnected.~~

~~E. Incoming Repair and Business Office Calls -- Excluding documented Allowed Service Disruption Events listed in R746-340-1(B)(1), a telecommunications corporation shall assure incoming repair and business office calls experience no more than a 35-second time in queue on average.~~

R746-340-9. Reporting Requirements For Compliance with R746-340-8 Standards.

A. Reporting Requirements -- A telecommunications corporation, subject to R746-340-8, shall separately document the specific cause, the duration, and the magnitude of each failure to comply with a R746-340-8 requirement. A telecommunications corporation shall provide quarterly service quality monitoring reports covering the measures listed under R746-340-8. Monthly results will be recorded, summarized, and reported quarterly and on a wire center basis as applicable. Wire center specific data shall be treated as proprietary until 120 days after the close of the last month reflected in the report.

B. Monthly Results -- For each requirement, the reported monthly results shall measure outcomes both meeting and not meeting the R746-340-8 standards.

C. Audits of Service Outcomes or Complaints -- A telecommunications corporation shall cooperate in Division of Public Utilities' audits regarding its service outcomes or Commission complaints regarding those outcomes.]

KEY: procedures, telecommunications, telephone utility regulations

Date of Enactment or Last Substantive Amendment: [~~August 8, 2005~~2014]

Notice of Continuation: June 24, 2013

Authorizing, and Implemented or Interpreted Law: 54-4-1; 54-4-14; 54-4-23

End of the Notices of Proposed Rules Section

FIVE-YEAR NOTICES OF REVIEW AND STATEMENTS OF CONTINUATION

Within five years of an administrative rule's original enactment or last five-year review, the agency is required to review the rule. This review is intended to help the agency determine, and to notify the public, that the administrative rule in force is still authorized by statute and necessary. Upon reviewing a rule, an agency may: repeal the rule by filing a **PROPOSED RULE**; continue the rule as it is by filing a **FIVE-YEAR NOTICE OF REVIEW AND STATEMENT OF CONTINUATION (REVIEW)**; or amend the rule by filing a **PROPOSED RULE** and by filing a **REVIEW**. By filing a **REVIEW**, the agency indicates that the rule is still necessary.

A **REVIEW** is not followed by the rule text. The rule text that is being continued may be found in the online edition of the *Utah Administrative Code* available at <http://www.rules.utah.gov/publicat/code.htm>. The rule text may also be inspected at the agency or the Division of Administrative Rules. **REVIEWS** are effective upon filing.

REVIEWS are governed by Section 63G-3-305.

Commerce, Occupational and Professional Licensing **R156-80a**

Medical Language Interpreter Act Rule

FIVE-YEAR NOTICE OF REVIEW AND STATEMENT OF CONTINUATION

DAR FILE NO.: 38388
FILED: 03/31/2014

NOTICE OF REVIEW AND STATEMENT OF CONTINUATION

CONCISE EXPLANATION OF THE PARTICULAR STATUTORY PROVISIONS UNDER WHICH THE RULE IS ENACTED AND HOW THESE PROVISIONS AUTHORIZE OR REQUIRE THE RULE: Title 58, Chapter 80a, provides for the certification of medical language interpreters. Subsection 58-1-106(1)(a) provides that the Division may adopt and enforce rules to administer Title 58. Subsection 58-80a-305(2) provides the Division may adopt rules with respect to Title 58, Chapter 80a. This rule was enacted to clarify the provisions of Title 58, Chapter 80a, with respect to the medical language interpreters.

SUMMARY OF WRITTEN COMMENTS RECEIVED DURING AND SINCE THE LAST FIVE YEAR REVIEW OF THE RULE FROM INTERESTED PERSONS SUPPORTING OR OPPOSING THE RULE: Since the rule was originally enacted in August 2009, the Division has received no written comments with respect to this rule.

REASONED JUSTIFICATION FOR THE CONTINUATION OF THE RULE, INCLUDING REASONS WHY THE AGENCY DISAGREES WITH COMMENTS IN OPPOSITION TO THE RULE, IF ANY: This rule should be continued as it provides a mechanism to inform potential licensees of the requirements

for certification as allowed under statutory authority provided in Title 58, Chapter 80a, with respect to medical language interpreters. The rule should also be continued as it provides information to ensure applicants for licensure are adequately trained and meet minimum licensure requirements and provides licensees with information concerning unprofessional conduct, definitions and ethical standards relating to the profession.

THE FULL TEXT OF THIS RULE MAY BE INSPECTED,
DURING REGULAR BUSINESS HOURS, AT:

COMMERCE
OCCUPATIONAL AND PROFESSIONAL
LICENSING
HEBER M WELLS BLDG
160 E 300 S
SALT LAKE CITY, UT 84111-2316
or at the Division of Administrative Rules.

DIRECT QUESTIONS REGARDING THIS RULE TO:

◆ Noel Taxin by phone at 801-530-6621, by FAX at 801-530-6511, or by Internet E-mail at ntaxin@utah.gov

AUTHORIZED BY: Mark Steinagel, Director

EFFECTIVE: 03/31/2014

Commerce, Occupational and Professional Licensing **R156-81** Retired Volunteer Health Care Practitioner Act Rule

FIVE-YEAR NOTICE OF REVIEW AND STATEMENT OF CONTINUATION

DAR FILE NO.: 38382
 FILED: 03/25/2014

NOTICE OF REVIEW AND STATEMENT OF CONTINUATION

CONCISE EXPLANATION OF THE PARTICULAR STATUTORY PROVISIONS UNDER WHICH THE RULE IS ENACTED AND HOW THESE PROVISIONS AUTHORIZE OR REQUIRE THE RULE: Title 58, Chapter 81, provides for the licensure of volunteer health care practitioners. Subsection 58-1-106(1)(a) provides that the Division may adopt and enforce rules to administer Title 58. Subsection 58-81-104(4) provides the Division and respective practitioner licensing boards may adopt rules with respect to Title 58, Chapter 81. This rule was enacted to clarify the provisions of Title 58, Chapter 81, with respect to the various classifications of volunteer health care practitioners.

SUMMARY OF WRITTEN COMMENTS RECEIVED DURING AND SINCE THE LAST FIVE YEAR REVIEW OF THE RULE FROM INTERESTED PERSONS SUPPORTING OR OPPOSING THE RULE: Since the rule was originally enacted in June 2009, the Division has received no written comments with respect to this rule.

REASONED JUSTIFICATION FOR THE CONTINUATION OF THE RULE, INCLUDING REASONS WHY THE AGENCY DISAGREES WITH COMMENTS IN OPPOSITION TO THE RULE, IF ANY: This rule should be continued as it provides a mechanism to inform potential licensees of the requirements for licensure as allowed under statutory authority provided in Title 58, Chapter 81, with respect to volunteer health care practitioners.

THE FULL TEXT OF THIS RULE MAY BE INSPECTED, DURING REGULAR BUSINESS HOURS, AT:

COMMERCE
 OCCUPATIONAL AND PROFESSIONAL
 LICENSING
 HEBER M WELLS BLDG
 160 E 300 S
 SALT LAKE CITY, UT 84111-2316
 or at the Division of Administrative Rules.

DIRECT QUESTIONS REGARDING THIS RULE TO:

◆ Noel Taxin by phone at 801-530-6621, by FAX at 801-530-6511, or by Internet E-mail at ntaxin@utah.gov

AUTHORIZED BY: Mark Steinagel, Director

EFFECTIVE: 03/25/2014

Health, Disease Control and
 Prevention, Health Promotion

R384-100

Cancer Reporting Rule

FIVE-YEAR NOTICE OF REVIEW AND STATEMENT OF CONTINUATION

DAR FILE NO.: 38367
 FILED: 03/18/2014

NOTICE OF REVIEW AND STATEMENT OF CONTINUATION

CONCISE EXPLANATION OF THE PARTICULAR STATUTORY PROVISIONS UNDER WHICH THE RULE IS ENACTED AND HOW THESE PROVISIONS AUTHORIZE OR REQUIRE THE RULE: This rule is adopted under authority of Sections 26-1-30 and 26-5-3. The Cancer reporting rule is adopted to specify the reporting requirements for cases of cancer to the Utah Cancer Registry. Cancers constitute a leading cause of morbidity and mortality in Utah and therefore pose an important risk to the public health. Through the routine reporting of cancer cases, trends in cancer incidence and mortality can be monitored and prevention and control measures evaluated. Cancer records are managed by the Utah Cancer Registry (Registry) on behalf of the Utah Department of Health. The Utah Department of Health retains ownership and all rights to the records.

SUMMARY OF WRITTEN COMMENTS RECEIVED DURING AND SINCE THE LAST FIVE YEAR REVIEW OF THE RULE FROM INTERESTED PERSONS SUPPORTING OR OPPOSING THE RULE: The Division of Disease Control and Prevention has not received comments opposing the rule, or asking for a revision of the rule.

REASONED JUSTIFICATION FOR THE CONTINUATION OF THE RULE, INCLUDING REASONS WHY THE AGENCY DISAGREES WITH COMMENTS IN OPPOSITION TO THE RULE, IF ANY: The rule needs to continue as cancers continue to constitute a leading cause of morbidity and mortality in Utah and therefore, pose an important risk to public health. Through the routine reporting of cancer cases, trends in cancer incidence, and mortality can be monitored and prevention and control measure evaluated. Cancer records are managed by the Utah Cancer Registry on behalf of the Utah Department of Health. This Cancer reporting rule is adopted to specify the reporting requirements for cases of cancer to the registry.

THE FULL TEXT OF THIS RULE MAY BE INSPECTED, DURING REGULAR BUSINESS HOURS, AT:

HEALTH
 DISEASE CONTROL AND PREVENTION,
 HEALTH PROMOTION

CANNON HEALTH BLDG
288 N 1460 W
SALT LAKE CITY, UT 84116-3231
or at the Division of Administrative Rules.

DIRECT QUESTIONS REGARDING THIS RULE TO:
♦ Lynne Nilson by phone at 801-538-7049, or by Internet E-mail at lnilson@utah.gov

AUTHORIZED BY: David Patton, PhD, Executive Director

EFFECTIVE: 03/18/2014

**Health, Health Care Financing,
Coverage and Reimbursement Policy
R414-1B
Prohibition of Payment for Certain
Abortion Services**

**FIVE-YEAR NOTICE OF REVIEW AND STATEMENT
OF CONTINUATION**
DAR FILE NO.: 38369
FILED: 03/18/2014

**NOTICE OF REVIEW AND STATEMENT OF
CONTINUATION**

CONCISE EXPLANATION OF THE PARTICULAR STATUTORY PROVISIONS UNDER WHICH THE RULE IS ENACTED AND HOW THESE PROVISIONS AUTHORIZE OR REQUIRE THE RULE: Section 26-18-3 requires the Department to implement Medicaid policy through administrative rules, and Section 76-7-331 prohibits the use of public funds for certain abortion services.

SUMMARY OF WRITTEN COMMENTS RECEIVED DURING AND SINCE THE LAST FIVE YEAR REVIEW OF THE RULE FROM INTERESTED PERSONS SUPPORTING OR OPPOSING THE RULE: The Department did not receive any written or oral comments regarding this rule.

REASONED JUSTIFICATION FOR THE CONTINUATION OF THE RULE, INCLUDING REASONS WHY THE AGENCY DISAGREES WITH COMMENTS IN OPPOSITION TO THE RULE, IF ANY: The Department will continue this rule because it prohibits the unauthorized use of public funds for certain abortion services by Medicaid providers.

THE FULL TEXT OF THIS RULE MAY BE INSPECTED, DURING REGULAR BUSINESS HOURS, AT:
HEALTH
HEALTH CARE FINANCING,
COVERAGE AND REIMBURSEMENT POLICY
CANNON HEALTH BLDG
288 N 1460 W
SALT LAKE CITY, UT 84116-3231

or at the Division of Administrative Rules.

DIRECT QUESTIONS REGARDING THIS RULE TO:
♦ Craig Devashrayee by phone at 801-538-6641, by FAX at 801-538-6099, or by Internet E-mail at cdevashrayee@utah.gov

AUTHORIZED BY: David Patton, PhD, Executive Director

EFFECTIVE: 03/18/2014

**Health, Health Care Financing,
Coverage and Reimbursement Policy
R414-11
Podiatric Services**

**FIVE-YEAR NOTICE OF REVIEW AND STATEMENT
OF CONTINUATION**
DAR FILE NO.: 38371
FILED: 03/18/2014

**NOTICE OF REVIEW AND STATEMENT OF
CONTINUATION**

CONCISE EXPLANATION OF THE PARTICULAR STATUTORY PROVISIONS UNDER WHICH THE RULE IS ENACTED AND HOW THESE PROVISIONS AUTHORIZE OR REQUIRE THE RULE: Section 26-1-5 grants the Department the authority to adopt, amend, or rescind rules as necessary to implement the Medicaid program, and 42 CFR 440.225 authorizes the Department to cover podiatry as an optional service.

SUMMARY OF WRITTEN COMMENTS RECEIVED DURING AND SINCE THE LAST FIVE YEAR REVIEW OF THE RULE FROM INTERESTED PERSONS SUPPORTING OR OPPOSING THE RULE: The Department did not receive any written or oral comments regarding this rule.

REASONED JUSTIFICATION FOR THE CONTINUATION OF THE RULE, INCLUDING REASONS WHY THE AGENCY DISAGREES WITH COMMENTS IN OPPOSITION TO THE RULE, IF ANY: The Department will continue this rule because it allows Medicaid recipients to receive podiatry care that includes the examination, diagnosis, or treatment of the foot.

THE FULL TEXT OF THIS RULE MAY BE INSPECTED, DURING REGULAR BUSINESS HOURS, AT:
HEALTH
HEALTH CARE FINANCING,
COVERAGE AND REIMBURSEMENT POLICY
CANNON HEALTH BLDG
288 N 1460 W
SALT LAKE CITY, UT 84116-3231
or at the Division of Administrative Rules.

DIRECT QUESTIONS REGARDING THIS RULE TO:
 ♦ Craig Devashrayee by phone at 801-538-6641, by FAX at 801-538-6099, or by Internet E-mail at cdevashrayee@utah.gov

AUTHORIZED BY: David Patton, PhD, Executive Director

EFFECTIVE: 03/18/2014

DIRECT QUESTIONS REGARDING THIS RULE TO:
 ♦ Craig Devashrayee by phone at 801-538-6641, by FAX at 801-538-6099, or by Internet E-mail at cdevashrayee@utah.gov

AUTHORIZED BY: David Patton, PhD, Executive Director

EFFECTIVE: 03/18/2014

**Health, Health Care Financing,
 Coverage and Reimbursement Policy
 R414-90
 Diabetes Self-Management Training**

**FIVE-YEAR NOTICE OF REVIEW AND STATEMENT
 OF CONTINUATION**
 DAR FILE NO.: 38368
 FILED: 03/18/2014

**NOTICE OF REVIEW AND STATEMENT OF
 CONTINUATION**

CONCISE EXPLANATION OF THE PARTICULAR STATUTORY PROVISIONS UNDER WHICH THE RULE IS ENACTED AND HOW THESE PROVISIONS AUTHORIZE OR REQUIRE THE RULE: Section 26-18-3 requires the Department to implement the Medicaid program through administrative rules. In addition, 42 CFR 440.130 authorizes preventive services for Medicaid recipients.

SUMMARY OF WRITTEN COMMENTS RECEIVED DURING AND SINCE THE LAST FIVE YEAR REVIEW OF THE RULE FROM INTERESTED PERSONS SUPPORTING OR OPPOSING THE RULE: The Department did not receive any written or oral comments regarding this rule.

REASONED JUSTIFICATION FOR THE CONTINUATION OF THE RULE, INCLUDING REASONS WHY THE AGENCY DISAGREES WITH COMMENTS IN OPPOSITION TO THE RULE, IF ANY: The Department will continue this rule because it allows Medicaid recipients to successfully manage and control diabetes through the Diabetes Self-Management Training Program.

THE FULL TEXT OF THIS RULE MAY BE INSPECTED, DURING REGULAR BUSINESS HOURS, AT:

HEALTH
 HEALTH CARE FINANCING,
 COVERAGE AND REIMBURSEMENT POLICY
 CANNON HEALTH BLDG
 288 N 1460 W
 SALT LAKE CITY, UT 84116-3231
 or at the Division of Administrative Rules.

**Health, Family Health and
 Preparedness, Licensing
 R432-7
 Specialty Hospital - Psychiatric Hospital
 Construction**

**FIVE-YEAR NOTICE OF REVIEW AND STATEMENT
 OF CONTINUATION**
 DAR FILE NO.: 38391
 FILED: 04/01/2014

**NOTICE OF REVIEW AND STATEMENT OF
 CONTINUATION**

CONCISE EXPLANATION OF THE PARTICULAR STATUTORY PROVISIONS UNDER WHICH THE RULE IS ENACTED AND HOW THESE PROVISIONS AUTHORIZE OR REQUIRE THE RULE: Title 26, Chapter 21, is the health code that mandates the licensing of health facilities.

SUMMARY OF WRITTEN COMMENTS RECEIVED DURING AND SINCE THE LAST FIVE YEAR REVIEW OF THE RULE FROM INTERESTED PERSONS SUPPORTING OR OPPOSING THE RULE: There have been no written comments from any party regarding this rule.

REASONED JUSTIFICATION FOR THE CONTINUATION OF THE RULE, INCLUDING REASONS WHY THE AGENCY DISAGREES WITH COMMENTS IN OPPOSITION TO THE RULE, IF ANY: This rule continues to be required by Title 26, Chapter 21, of the Health Facility Licensure and Inspection Act. The Department agrees with the need to continue the rule.

THE FULL TEXT OF THIS RULE MAY BE INSPECTED, DURING REGULAR BUSINESS HOURS, AT:

HEALTH
 FAMILY HEALTH AND PREPAREDNESS,
 LICENSING
 CANNON HEALTH BLDG
 288 N 1460 W
 SALT LAKE CITY, UT 84116-3231
 or at the Division of Administrative Rules.

DIRECT QUESTIONS REGARDING THIS RULE TO:
♦ Carmen Richins by phone at 801-538-9087, by FAX at 801-538-6024, or by Internet E-mail at carmenrichins@utah.gov
♦ Joel Hoffman by phone at 801-538-6279, by FAX at 801-538-6024, or by Internet E-mail at jhoffman@utah.gov

AUTHORIZED BY: David Patton, PhD, Executive Director

EFFECTIVE: 04/01/2014

DIRECT QUESTIONS REGARDING THIS RULE TO:
♦ Carmen Richins by phone at 801-538-9087, by FAX at 801-538-6024, or by Internet E-mail at carmenrichins@utah.gov
♦ Joel Hoffman by phone at 801-538-6279, by FAX at 801-538-6024, or by Internet E-mail at jhoffman@utah.gov

AUTHORIZED BY: David Patton, PhD, Executive Director

EFFECTIVE: 04/01/2014

Health, Family Health and Preparedness, Licensing
R432-8
Specialty Hospital - Chemical Dependency/Substance Abuse Construction

FIVE-YEAR NOTICE OF REVIEW AND STATEMENT OF CONTINUATION
DAR FILE NO.: 38392
FILED: 04/01/2014

NOTICE OF REVIEW AND STATEMENT OF CONTINUATION

CONCISE EXPLANATION OF THE PARTICULAR STATUTORY PROVISIONS UNDER WHICH THE RULE IS ENACTED AND HOW THESE PROVISIONS AUTHORIZE OR REQUIRE THE RULE: Title 26, Chapter 21, is the health code that mandates the licensing of health facilities.

SUMMARY OF WRITTEN COMMENTS RECEIVED DURING AND SINCE THE LAST FIVE YEAR REVIEW OF THE RULE FROM INTERESTED PERSONS SUPPORTING OR OPPOSING THE RULE: There have been no written comments from any party regarding this rule.

REASONED JUSTIFICATION FOR THE CONTINUATION OF THE RULE, INCLUDING REASONS WHY THE AGENCY DISAGREES WITH COMMENTS IN OPPOSITION TO THE RULE, IF ANY: This rule continues to be required by Title 26, Chapter 21, of the Health Facility Licensure and Inspection Act. The Department agrees with the need to continue the rule.

THE FULL TEXT OF THIS RULE MAY BE INSPECTED, DURING REGULAR BUSINESS HOURS, AT:
HEALTH
FAMILY HEALTH AND PREPAREDNESS,
LICENSING
CANNON HEALTH BLDG
288 N 1460 W
SALT LAKE CITY, UT 84116-3231
or at the Division of Administrative Rules.

Health, Family Health and Preparedness, Licensing
R432-9
Specialty Hospital - Rehabilitation Construction Rule

FIVE-YEAR NOTICE OF REVIEW AND STATEMENT OF CONTINUATION
DAR FILE NO.: 38393
FILED: 04/01/2014

NOTICE OF REVIEW AND STATEMENT OF CONTINUATION

CONCISE EXPLANATION OF THE PARTICULAR STATUTORY PROVISIONS UNDER WHICH THE RULE IS ENACTED AND HOW THESE PROVISIONS AUTHORIZE OR REQUIRE THE RULE: Title 26, Chapter 21, is the health code that mandates the licensing of health facilities.

SUMMARY OF WRITTEN COMMENTS RECEIVED DURING AND SINCE THE LAST FIVE YEAR REVIEW OF THE RULE FROM INTERESTED PERSONS SUPPORTING OR OPPOSING THE RULE: There have been no written comments from any party regarding this rule.

REASONED JUSTIFICATION FOR THE CONTINUATION OF THE RULE, INCLUDING REASONS WHY THE AGENCY DISAGREES WITH COMMENTS IN OPPOSITION TO THE RULE, IF ANY: This rule continues to be required by Title 26, Chapter 21, of the Health Facility Licensure and Inspection Act. The Department agrees with the need to continue the rule.

THE FULL TEXT OF THIS RULE MAY BE INSPECTED, DURING REGULAR BUSINESS HOURS, AT:
HEALTH
FAMILY HEALTH AND PREPAREDNESS,
LICENSING
CANNON HEALTH BLDG
288 N 1460 W
SALT LAKE CITY, UT 84116-3231
or at the Division of Administrative Rules.

DIRECT QUESTIONS REGARDING THIS RULE TO:
 ♦ Carmen Richins by phone at 801-538-9087, by FAX at 801-538-6024, or by Internet E-mail at carmenrichins@utah.gov
 ♦ Joel Hoffman by phone at 801-538-6279, by FAX at 801-538-6024, or by Internet E-mail at jhoffman@utah.gov

AUTHORIZED BY: David Patton, PhD, Executive Director

EFFECTIVE: 04/01/2014

DIRECT QUESTIONS REGARDING THIS RULE TO:
 ♦ Carmen Richins by phone at 801-538-9087, by FAX at 801-538-6024, or by Internet E-mail at carmenrichins@utah.gov
 ♦ Joel Hoffman by phone at 801-538-6279, by FAX at 801-538-6024, or by Internet E-mail at jhoffman@utah.gov

AUTHORIZED BY: David Patton, PhD, Executive Director

EFFECTIVE: 04/01/2014

**Health, Family Health and Preparedness, Licensing
 R432-10**

Specialty Hospital - Long-Term Acute Care Construction Rule

FIVE-YEAR NOTICE OF REVIEW AND STATEMENT OF CONTINUATION
 DAR FILE NO.: 38394
 FILED: 04/01/2014

NOTICE OF REVIEW AND STATEMENT OF CONTINUATION

CONCISE EXPLANATION OF THE PARTICULAR STATUTORY PROVISIONS UNDER WHICH THE RULE IS ENACTED AND HOW THESE PROVISIONS AUTHORIZE OR REQUIRE THE RULE: Title 26, Chapter 21, is the health code that mandates the licensing of health facilities.

SUMMARY OF WRITTEN COMMENTS RECEIVED DURING AND SINCE THE LAST FIVE YEAR REVIEW OF THE RULE FROM INTERESTED PERSONS SUPPORTING OR OPPOSING THE RULE: There have been no written comments from any party regarding this rule.

REASONED JUSTIFICATION FOR THE CONTINUATION OF THE RULE, INCLUDING REASONS WHY THE AGENCY DISAGREES WITH COMMENTS IN OPPOSITION TO THE RULE, IF ANY: This rule continues to be required by Title 26, Chapter 21, of the Health Facility Licensure and Inspection Act. The Department agrees with the need to continue the rule.

THE FULL TEXT OF THIS RULE MAY BE INSPECTED, DURING REGULAR BUSINESS HOURS, AT:
 HEALTH
 FAMILY HEALTH AND PREPAREDNESS,
 LICENSING
 CANNON HEALTH BLDG
 288 N 1460 W
 SALT LAKE CITY, UT 84116-3231
 or at the Division of Administrative Rules.

**Health, Family Health and Preparedness, Licensing
 R432-11**

Orthopedic Hospital Construction

FIVE-YEAR NOTICE OF REVIEW AND STATEMENT OF CONTINUATION
 DAR FILE NO.: 38395
 FILED: 04/01/2014

NOTICE OF REVIEW AND STATEMENT OF CONTINUATION

CONCISE EXPLANATION OF THE PARTICULAR STATUTORY PROVISIONS UNDER WHICH THE RULE IS ENACTED AND HOW THESE PROVISIONS AUTHORIZE OR REQUIRE THE RULE: Title 26, Chapter 21, is the health code that mandates the licensing of health facilities.

SUMMARY OF WRITTEN COMMENTS RECEIVED DURING AND SINCE THE LAST FIVE YEAR REVIEW OF THE RULE FROM INTERESTED PERSONS SUPPORTING OR OPPOSING THE RULE: There have been no written comments from any party regarding this rule.

REASONED JUSTIFICATION FOR THE CONTINUATION OF THE RULE, INCLUDING REASONS WHY THE AGENCY DISAGREES WITH COMMENTS IN OPPOSITION TO THE RULE, IF ANY: This rule continues to be required by Title 26, Chapter 21, of the Health Facility Licensure and Inspection Act. The Department agrees with the need to continue the rule.

THE FULL TEXT OF THIS RULE MAY BE INSPECTED, DURING REGULAR BUSINESS HOURS, AT:
 HEALTH
 FAMILY HEALTH AND PREPAREDNESS,
 LICENSING
 CANNON HEALTH BLDG
 288 N 1460 W
 SALT LAKE CITY, UT 84116-3231
 or at the Division of Administrative Rules.

DIRECT QUESTIONS REGARDING THIS RULE TO:
♦ Carmen Richins by phone at 801-538-9087, by FAX at 801-538-6024, or by Internet E-mail at carmenrichins@utah.gov
♦ Joel Hoffman by phone at 801-538-6279, by FAX at 801-538-6024, or by Internet E-mail at jhoffman@utah.gov

AUTHORIZED BY: David Patton, PhD, Executive Director

EFFECTIVE: 04/01/2014

DIRECT QUESTIONS REGARDING THIS RULE TO:
♦ Carmen Richins by phone at 801-538-9087, by FAX at 801-538-6024, or by Internet E-mail at carmenrichins@utah.gov
♦ Joel Hoffman by phone at 801-538-6279, by FAX at 801-538-6024, or by Internet E-mail at jhoffman@utah.gov

AUTHORIZED BY: David Patton, PhD, Executive Director

EFFECTIVE: 04/01/2014

**Health, Family Health and Preparedness, Licensing
R432-12**

Small Health Care Facility (Four to Sixteen Beds) Construction Rule

FIVE-YEAR NOTICE OF REVIEW AND STATEMENT OF CONTINUATION

DAR FILE NO.: 38396
FILED: 04/01/2014

NOTICE OF REVIEW AND STATEMENT OF CONTINUATION

CONCISE EXPLANATION OF THE PARTICULAR STATUTORY PROVISIONS UNDER WHICH THE RULE IS ENACTED AND HOW THESE PROVISIONS AUTHORIZE OR REQUIRE THE RULE: Title 26, Chapter 21, is the health code that mandates the licensing of health facilities.

SUMMARY OF WRITTEN COMMENTS RECEIVED DURING AND SINCE THE LAST FIVE YEAR REVIEW OF THE RULE FROM INTERESTED PERSONS SUPPORTING OR OPPOSING THE RULE: There have been no written comments from any party regarding this rule.

REASONED JUSTIFICATION FOR THE CONTINUATION OF THE RULE, INCLUDING REASONS WHY THE AGENCY DISAGREES WITH COMMENTS IN OPPOSITION TO THE RULE, IF ANY: This rule continues to be required by Title 26, Chapter 21, of the Health Facility Licensure and Inspection Act. The Department agrees with the need to continue the rule.

THE FULL TEXT OF THIS RULE MAY BE INSPECTED, DURING REGULAR BUSINESS HOURS, AT:

HEALTH
FAMILY HEALTH AND PREPAREDNESS,
LICENSING
CANNON HEALTH BLDG
288 N 1460 W
SALT LAKE CITY, UT 84116-3231
or at the Division of Administrative Rules.

**Health, Family Health and Preparedness, Licensing
R432-13**

Freestanding Ambulatory Surgical Center Construction Rule

FIVE-YEAR NOTICE OF REVIEW AND STATEMENT OF CONTINUATION

DAR FILE NO.: 38397
FILED: 04/01/2014

NOTICE OF REVIEW AND STATEMENT OF CONTINUATION

CONCISE EXPLANATION OF THE PARTICULAR STATUTORY PROVISIONS UNDER WHICH THE RULE IS ENACTED AND HOW THESE PROVISIONS AUTHORIZE OR REQUIRE THE RULE: Title 26, Chapter 21, is the health code that mandates the licensing of health facilities.

SUMMARY OF WRITTEN COMMENTS RECEIVED DURING AND SINCE THE LAST FIVE YEAR REVIEW OF THE RULE FROM INTERESTED PERSONS SUPPORTING OR OPPOSING THE RULE: There have been no written comments from any party regarding this rule.

REASONED JUSTIFICATION FOR THE CONTINUATION OF THE RULE, INCLUDING REASONS WHY THE AGENCY DISAGREES WITH COMMENTS IN OPPOSITION TO THE RULE, IF ANY: This rule continues to be required by Title 26, Chapter 21, of the Health Facility Licensure and Inspection Act. The Department agrees with the need to continue the rule.

THE FULL TEXT OF THIS RULE MAY BE INSPECTED, DURING REGULAR BUSINESS HOURS, AT:

HEALTH
FAMILY HEALTH AND PREPAREDNESS,
LICENSING
CANNON HEALTH BLDG
288 N 1460 W
SALT LAKE CITY, UT 84116-3231
or at the Division of Administrative Rules.

DIRECT QUESTIONS REGARDING THIS RULE TO:
♦ Carmen Richins by phone at 801-538-9087, by FAX at 801-538-6024, or by Internet E-mail at carmenrichins@utah.gov
♦ Joel Hoffman by phone at 801-538-6279, by FAX at 801-538-6024, or by Internet E-mail at jhoffman@utah.gov

AUTHORIZED BY: David Patton, PhD, Executive Director

EFFECTIVE: 04/01/2014

DIRECT QUESTIONS REGARDING THIS RULE TO:
♦ Carmen Richins by phone at 801-538-9087, by FAX at 801-538-6024, or by Internet E-mail at carmenrichins@utah.gov
♦ Joel Hoffman by phone at 801-538-6279, by FAX at 801-538-6024, or by Internet E-mail at jhoffman@utah.gov

AUTHORIZED BY: David Patton, PhD, Executive Director

EFFECTIVE: 04/01/2014

**Health, Family Health and Preparedness, Licensing
R432-30**

Adjudicative Procedure

FIVE-YEAR NOTICE OF REVIEW AND STATEMENT OF CONTINUATION

DAR FILE NO.: 38398
FILED: 04/01/2014

NOTICE OF REVIEW AND STATEMENT OF CONTINUATION

CONCISE EXPLANATION OF THE PARTICULAR STATUTORY PROVISIONS UNDER WHICH THE RULE IS ENACTED AND HOW THESE PROVISIONS AUTHORIZE OR REQUIRE THE RULE: Title 26, Chapter 21, is the health code that mandates the licensing of health facilities.

SUMMARY OF WRITTEN COMMENTS RECEIVED DURING AND SINCE THE LAST FIVE YEAR REVIEW OF THE RULE FROM INTERESTED PERSONS SUPPORTING OR OPPOSING THE RULE: There have been no written comments from any party regarding this rule.

REASONED JUSTIFICATION FOR THE CONTINUATION OF THE RULE, INCLUDING REASONS WHY THE AGENCY DISAGREES WITH COMMENTS IN OPPOSITION TO THE RULE, IF ANY: This rule continues to be required by Title 26, Chapter 21, of the Health Facility Licensure and Inspection Act. The Department agrees with the need to continue the rule.

THE FULL TEXT OF THIS RULE MAY BE INSPECTED, DURING REGULAR BUSINESS HOURS, AT:

HEALTH
FAMILY HEALTH AND PREPAREDNESS,
LICENSING
CANNON HEALTH BLDG
288 N 1460 W
SALT LAKE CITY, UT 84116-3231
or at the Division of Administrative Rules.

**Health, Family Health and Preparedness, Licensing
R432-32**

Licensing Exemption for Non-Profit Volunteer End-of-Life Care

FIVE-YEAR NOTICE OF REVIEW AND STATEMENT OF CONTINUATION

DAR FILE NO.: 38399
FILED: 04/01/2014

NOTICE OF REVIEW AND STATEMENT OF CONTINUATION

CONCISE EXPLANATION OF THE PARTICULAR STATUTORY PROVISIONS UNDER WHICH THE RULE IS ENACTED AND HOW THESE PROVISIONS AUTHORIZE OR REQUIRE THE RULE: Title 26, Chapter 21, is the health code that mandates the licensing of health facilities.

SUMMARY OF WRITTEN COMMENTS RECEIVED DURING AND SINCE THE LAST FIVE YEAR REVIEW OF THE RULE FROM INTERESTED PERSONS SUPPORTING OR OPPOSING THE RULE: There have been no written comments from any party regarding this rule.

REASONED JUSTIFICATION FOR THE CONTINUATION OF THE RULE, INCLUDING REASONS WHY THE AGENCY DISAGREES WITH COMMENTS IN OPPOSITION TO THE RULE, IF ANY: This rule continues to be required by Title 26, Chapter 21, of the Health Facility Licensure and Inspection Act. The Department agrees with the need to continue the rule.

THE FULL TEXT OF THIS RULE MAY BE INSPECTED, DURING REGULAR BUSINESS HOURS, AT:

HEALTH
FAMILY HEALTH AND PREPAREDNESS,
LICENSING
CANNON HEALTH BLDG
288 N 1460 W
SALT LAKE CITY, UT 84116-3231
or at the Division of Administrative Rules.

DIRECT QUESTIONS REGARDING THIS RULE TO:

♦ Carmen Richins by phone at 801-538-9087, by FAX at 801-538-6024, or by Internet E-mail at carmenrichins@utah.gov
 ♦ Joel Hoffman by phone at 801-538-6279, by FAX at 801-538-6024, or by Internet E-mail at jhoffman@utah.gov

AUTHORIZED BY: David Patton, PhD, Executive Director

EFFECTIVE: 04/01/2014

Insurance, Administration
R590-226

Submission of Life Insurance Filings

**FIVE-YEAR NOTICE OF REVIEW AND STATEMENT
 OF CONTINUATION**

DAR FILE NO.: 38364

FILED: 03/18/2014

**NOTICE OF REVIEW AND STATEMENT OF
 CONTINUATION**

CONCISE EXPLANATION OF THE PARTICULAR STATUTORY PROVISIONS UNDER WHICH THE RULE IS ENACTED AND HOW THESE PROVISIONS AUTHORIZE OR REQUIRE THE RULE: Under Subsection 31A-2-201(3), the commissioner is given the authority to write rules to implement the provisions of Title 31A. Under Section 31A-22-201.1, the commissioner is given the authority to regulate the filing of rates, forms, and reports and under Subsection 31A-2-202(2), the commissioner can prescribe the forms to be used in filing reports. As a result of these code references, this rule sets forth filing requirements, procedures, and forms to be used in the filing of forms for various types of life insurance products.

SUMMARY OF WRITTEN COMMENTS RECEIVED DURING AND SINCE THE LAST FIVE YEAR REVIEW OF THE RULE FROM INTERESTED PERSONS SUPPORTING OR OPPOSING THE RULE: The department has not received any written comments over the past five years regarding this rule.

REASONED JUSTIFICATION FOR THE CONTINUATION OF THE RULE, INCLUDING REASONS WHY THE AGENCY DISAGREES WITH COMMENTS IN OPPOSITION TO THE RULE, IF ANY: It is important that this rule remain in force to allow the department to provide uniformity among life insurance companies in the United States. It allows for uniformity in how a company filing is made and the information and documents to be included, which allows for a uniform review of these forms by the department. Therefore, this rule should be continued.

THE FULL TEXT OF THIS RULE MAY BE INSPECTED, DURING REGULAR BUSINESS HOURS, AT:

INSURANCE
 ADMINISTRATION
 ROOM 3110 STATE OFFICE BLDG
 450 N MAIN ST
 SALT LAKE CITY, UT 84114-1201
 or at the Division of Administrative Rules.

DIRECT QUESTIONS REGARDING THIS RULE TO:

♦ Jilene Whitby by phone at 801-538-3803, by FAX at 801-538-3829, or by Internet E-mail at jwhitby@utah.gov

AUTHORIZED BY: Todd Kiser, Commissioner

EFFECTIVE: 03/18/2014

Insurance, Administration
R590-227

Submission of Annuity Filings

**FIVE-YEAR NOTICE OF REVIEW AND STATEMENT
 OF CONTINUATION**

DAR FILE NO.: 38365

FILED: 03/18/2014

**NOTICE OF REVIEW AND STATEMENT OF
 CONTINUATION**

CONCISE EXPLANATION OF THE PARTICULAR STATUTORY PROVISIONS UNDER WHICH THE RULE IS ENACTED AND HOW THESE PROVISIONS AUTHORIZE OR REQUIRE THE RULE: Under Subsection 31A-2-201(3), the commissioner is given the authority to write rules to implement the provisions of Title 31A. Under Section 31A-22-201.1, the commissioner is given the authority to regulate the filing of rates, forms, and reports and under Subsection 31A-2-202(2), the commissioner can prescribe the forms to be used in filing reports. As a result of these code references, this rule sets forth filing requirements, procedures, and forms to be used in the filing of forms for various types of annuity products.

SUMMARY OF WRITTEN COMMENTS RECEIVED DURING AND SINCE THE LAST FIVE YEAR REVIEW OF THE RULE FROM INTERESTED PERSONS SUPPORTING OR OPPOSING THE RULE: The department has received no written comments in the past five years regarding this rule.

REASONED JUSTIFICATION FOR THE CONTINUATION OF THE RULE, INCLUDING REASONS WHY THE AGENCY DISAGREES WITH COMMENTS IN OPPOSITION TO THE RULE, IF ANY: It is important that this rule be continued in force to allow the department to provide uniformity among life

and annuity insurance companies in the United States. It allows for uniformity in how a company filing is made and the information and documents to be included, which then allows for a uniform review of these forms by the department.

THE FULL TEXT OF THIS RULE MAY BE INSPECTED, DURING REGULAR BUSINESS HOURS, AT:
 INSURANCE
 ADMINISTRATION
 ROOM 3110 STATE OFFICE BLDG
 450 N MAIN ST
 SALT LAKE CITY, UT 84114-1201
 or at the Division of Administrative Rules.

DIRECT QUESTIONS REGARDING THIS RULE TO:
 ♦ Jilene Whitby by phone at 801-538-3803, by FAX at 801-538-3829, or by Internet E-mail at jwhitby@utah.gov

AUTHORIZED BY: Todd Kiser, Commissioner

EFFECTIVE: 03/18/2014

**Insurance, Administration
 R590-228**

**Submission of Credit Life and Credit
 Accident and Health Insurance Form
 and Rate Filings**

**FIVE-YEAR NOTICE OF REVIEW AND STATEMENT
 OF CONTINUATION**
 DAR FILE NO.: 38366
 FILED: 03/18/2014

**NOTICE OF REVIEW AND STATEMENT OF
 CONTINUATION**

CONCISE EXPLANATION OF THE PARTICULAR STATUTORY PROVISIONS UNDER WHICH THE RULE IS ENACTED AND HOW THESE PROVISIONS AUTHORIZE OR REQUIRE THE RULE: Under Subsection 31A-2-201(3), the commissioner is given the authority to write rules to implement the provisions of Title 31A. Under Section 31A-2-201.1, the commissioner is given the authority to regulate the filing of rates, forms, and reports. Under Subsection 31A-2-202(2), the commissioner can prescribe the forms to be used in filing reports. Section 31A-22-807 allows the commissioner to set loss ratio standards and tests to make sure the benefits provided are reasonable in relation to the premiums paid for the coverage. As a result of these code references, this rule sets forth filing requirements, procedures, and forms to be used in the filing of rates and forms for various types of credit life and credit accident and health insurance products.

SUMMARY OF WRITTEN COMMENTS RECEIVED DURING AND SINCE THE LAST FIVE YEAR REVIEW OF THE RULE FROM INTERESTED PERSONS SUPPORTING OR OPPOSING THE RULE: The department has not received any written comments regarding this rule in the past five years.

REASONED JUSTIFICATION FOR THE CONTINUATION OF THE RULE, INCLUDING REASONS WHY THE AGENCY DISAGREES WITH COMMENTS IN OPPOSITION TO THE RULE, IF ANY: It is important that this rule continue in force to allow the department to provide uniformity among companies selling credit life and credit accident and health products in the United States. The rule allows for uniformity in how a company filing is made and the information and documents to be included, which allows for a uniform review of these rates and forms. Therefore, this rule should be continued.

THE FULL TEXT OF THIS RULE MAY BE INSPECTED, DURING REGULAR BUSINESS HOURS, AT:
 INSURANCE
 ADMINISTRATION
 ROOM 3110 STATE OFFICE BLDG
 450 N MAIN ST
 SALT LAKE CITY, UT 84114-1201
 or at the Division of Administrative Rules.

DIRECT QUESTIONS REGARDING THIS RULE TO:
 ♦ Jilene Whitby by phone at 801-538-3803, by FAX at 801-538-3829, or by Internet E-mail at jwhitby@utah.gov

AUTHORIZED BY: Todd Kiser, Commissioner

EFFECTIVE: 03/18/2014

**Lieutenant Governor, Administration
 R622-2
 Use of the Great Seal of the State of
 Utah**

**FIVE-YEAR NOTICE OF REVIEW AND STATEMENT
 OF CONTINUATION**
 DAR FILE NO.: 38379
 FILED: 03/24/2014

**NOTICE OF REVIEW AND STATEMENT OF
 CONTINUATION**

CONCISE EXPLANATION OF THE PARTICULAR STATUTORY PROVISIONS UNDER WHICH THE RULE IS ENACTED AND HOW THESE PROVISIONS AUTHORIZE OR REQUIRE THE RULE: Pursuant to Subsections 67-1a-

2(1)(d), (e), and (f) of the Utah Code; the lieutenant governor shall ". . . keep custody of the Great Seal of the state of Utah; to keep a register of, and attest, the official acts of the governor; and to affix the Great Seal, with an attestation, to all official documents and instruments to which the official signature of the governor is required."

SUMMARY OF WRITTEN COMMENTS RECEIVED DURING AND SINCE THE LAST FIVE YEAR REVIEW OF THE RULE FROM INTERESTED PERSONS SUPPORTING OR OPPOSING THE RULE: No comments were received.

REASONED JUSTIFICATION FOR THE CONTINUATION OF THE RULE, INCLUDING REASONS WHY THE AGENCY DISAGREES WITH COMMENTS IN OPPOSITION TO THE RULE, IF ANY: Since its conception, the Seal has been employed for specific governmental applications within the state's Executive, Legislative and Judicial Branches. As the Keeper of the Great Seal, the Lieutenant Governor must retain rules for the Seal's lawful protection, application, and use. Therefore, this rule should be continued.

THE FULL TEXT OF THIS RULE MAY BE INSPECTED, DURING REGULAR BUSINESS HOURS, AT:

LIEUTENANT GOVERNOR
ADMINISTRATION
ROOM 220 STATE CAPITOL
350 N STATE ST
SALT LAKE CITY, UT 84114-2325
or at the Division of Administrative Rules.

DIRECT QUESTIONS REGARDING THIS RULE TO:

♦ Spencer Hadley by phone at 801-538-1041, by FAX at 801-538-1133, or by Internet E-mail at spencerhadley@utah.gov

AUTHORIZED BY: Mark Thomas, Chief Deputy

EFFECTIVE: 03/24/2014

Lieutenant Governor, Elections **R623-1**

Lieutenant Governor's Procedure for Regulation of Lobbyist Activities

FIVE-YEAR NOTICE OF REVIEW AND STATEMENT OF CONTINUATION

DAR FILE NO.: 38383
FILED: 03/26/2014

NOTICE OF REVIEW AND STATEMENT OF CONTINUATION

CONCISE EXPLANATION OF THE PARTICULAR STATUTORY PROVISIONS UNDER WHICH THE RULE IS ENACTED AND HOW THESE PROVISIONS AUTHORIZE

OR REQUIRE THE RULE: This rule is required by Section 36-11-404. This section states the lieutenant governor shall make rules that provide for the appointment of an administrative law judge to adjudicate alleged violations and impose penalties, procedures for applications, disapprovals, suspensions, revocations, and reinstatements that comply with the Administrative Procedures Act. This rule provides for those procedures.

SUMMARY OF WRITTEN COMMENTS RECEIVED DURING AND SINCE THE LAST FIVE YEAR REVIEW OF THE RULE FROM INTERESTED PERSONS SUPPORTING OR OPPOSING THE RULE: No comments were received.

REASONED JUSTIFICATION FOR THE CONTINUATION OF THE RULE, INCLUDING REASONS WHY THE AGENCY DISAGREES WITH COMMENTS IN OPPOSITION TO THE RULE, IF ANY: This rule provides procedures for the lieutenant governor's office to: 1) issue lobbyist licenses; 2) disapprove lobbyist applications; 3) suspend and revoke lobbyist licenses; 4) reinstate lobbyist licenses; and 5) appoint administrative law judges. Therefore, this rule should be continued.

THE FULL TEXT OF THIS RULE MAY BE INSPECTED, DURING REGULAR BUSINESS HOURS, AT:

LIEUTENANT GOVERNOR
ELECTIONS
ROOM 220 UTAH STATE CAPITOL
350 N STATE STREET
SALT LAKE CITY, UT 84114
or at the Division of Administrative Rules.

DIRECT QUESTIONS REGARDING THIS RULE TO:

♦ Spencer Hadley by phone at 801-538-1041, by FAX at 801-538-1133, or by Internet E-mail at spencerhadley@utah.gov

AUTHORIZED BY: Mark Thomas, Chief Deputy

EFFECTIVE: 03/26/2014

Lieutenant Governor, Elections **R623-2**

Uniform Ballot Counting Standards

FIVE-YEAR NOTICE OF REVIEW AND STATEMENT OF CONTINUATION

DAR FILE NO.: 38384
FILED: 03/26/2014

NOTICE OF REVIEW AND STATEMENT OF CONTINUATION

CONCISE EXPLANATION OF THE PARTICULAR STATUTORY PROVISIONS UNDER WHICH THE RULE IS

ENACTED AND HOW THESE PROVISIONS AUTHORIZE OR REQUIRE THE RULE: This rule is authorized by 42 U.S.C. 15404; 42 U.S.C. 15403(e); Subsection 67-1a-2(2); and the Utah State Constitution, Article VII, Sections 1, 5, and 14. Subsection 67-1a-2(2) states the the lieutenant governor shall exercise general supervisory authority over all elections. 42 U.S.C. 15403 and 15404 require the chief state election official to provide for a state plan on election reform which uniform and non-discriminatory election technology and administration, and meets the requirements of Section 253(b) or the Help America Vote Act. This rule complies with and provides for the implementation of those requirements.

SUMMARY OF WRITTEN COMMENTS RECEIVED DURING AND SINCE THE LAST FIVE YEAR REVIEW OF THE RULE FROM INTERESTED PERSONS SUPPORTING OR OPPOSING THE RULE: No comments were received.

REASONED JUSTIFICATION FOR THE CONTINUATION OF THE RULE, INCLUDING REASONS WHY THE AGENCY DISAGREES WITH COMMENTS IN OPPOSITION TO THE RULE, IF ANY: The State of Utah needs this rule to establish and maintain uniform and nondiscriminatory standards that define what constitutes a vote and what will be counted for each voting system used in the state. Therefore, this rule should be continued.

THE FULL TEXT OF THIS RULE MAY BE INSPECTED, DURING REGULAR BUSINESS HOURS, AT:
 LIEUTENANT GOVERNOR
 ELECTIONS
 ROOM 220 UTAH STATE CAPITOL
 350 N STATE STREET
 SALT LAKE CITY, UT 84114
 or at the Division of Administrative Rules.

DIRECT QUESTIONS REGARDING THIS RULE TO:
 ♦ Spencer Hadley by phone at 801-538-1041, by FAX at 801-538-1133, or by Internet E-mail at spencerhadley@utah.gov

AUTHORIZED BY: Mark Thomas, Chief Deputy

EFFECTIVE: 03/26/2014

**Lieutenant Governor, Elections
 R623-3**

Utah State Plan on Election Reform

**FIVE-YEAR NOTICE OF REVIEW AND STATEMENT
 OF CONTINUATION**
 DAR FILE NO.: 38385
 FILED: 03/26/2014

**NOTICE OF REVIEW AND STATEMENT OF
 CONTINUATION**

CONCISE EXPLANATION OF THE PARTICULAR STATUTORY PROVISIONS UNDER WHICH THE RULE IS ENACTED AND HOW THESE PROVISIONS AUTHORIZE OR REQUIRE THE RULE: This rule is authorized by 42 U.S.C. 15404; 42 U.S.C. 15403(e); Subsection 67-1a-2(2); and the Utah State Constitution, Article VII, Sections 1, 5, and 14. Subsection 67-1a-2(2) states the the lieutenant governor shall exercise general supervisory authority over all elections. 42 U.S.C. 15403 and 15404 require the chief state election official to provide for a state plan on election reform which includes non-discriminatory complaint procedures, performance goals and measures to carry out the plan, and meets the requirements of Section 253(b) or the Help America Vote Act. This rule complies with and provides for the implementation of those requirements.

SUMMARY OF WRITTEN COMMENTS RECEIVED DURING AND SINCE THE LAST FIVE YEAR REVIEW OF THE RULE FROM INTERESTED PERSONS SUPPORTING OR OPPOSING THE RULE: No comments were received.

REASONED JUSTIFICATION FOR THE CONTINUATION OF THE RULE, INCLUDING REASONS WHY THE AGENCY DISAGREES WITH COMMENTS IN OPPOSITION TO THE RULE, IF ANY: The purpose of this rule is to incorporate by reference the policies and procedures of the Utah State Plan on Election Reform adopted by the State Plan Committee on 11/08/2004. Therefore, this rule should be continued.

THE FULL TEXT OF THIS RULE MAY BE INSPECTED, DURING REGULAR BUSINESS HOURS, AT:
 LIEUTENANT GOVERNOR
 ELECTIONS
 ROOM 220 UTAH STATE CAPITOL
 350 N STATE STREET
 SALT LAKE CITY, UT 84114
 or at the Division of Administrative Rules.

DIRECT QUESTIONS REGARDING THIS RULE TO:
 ♦ Spencer Hadley by phone at 801-538-1041, by FAX at 801-538-1133, or by Internet E-mail at spencerhadley@utah.gov

AUTHORIZED BY: Mark Thomas, Chief Deputy

EFFECTIVE: 03/26/2014

**Public Safety, Driver License
 R708-10**

Driver License Restrictions

**FIVE-YEAR NOTICE OF REVIEW AND STATEMENT
OF CONTINUATION**DAR FILE NO.: 38370
FILED: 03/18/2014**NOTICE OF REVIEW AND STATEMENT OF
CONTINUATION**

CONCISE EXPLANATION OF THE PARTICULAR STATUTORY PROVISIONS UNDER WHICH THE RULE IS ENACTED AND HOW THESE PROVISIONS AUTHORIZE OR REQUIRE THE RULE: Subsection 53-3-104 (1)(a) requires the division to make rules for examining applicants for a license, as necessary for the safety and welfare of the traveling public. Section 53-3-208 grants the division authority to impose restrictions or set forth restrictions on a licensee to assure safe driving.

SUMMARY OF WRITTEN COMMENTS RECEIVED DURING AND SINCE THE LAST FIVE YEAR REVIEW OF THE RULE FROM INTERESTED PERSONS SUPPORTING OR OPPOSING THE RULE: No written comments were received during and since the last five-year review of this rule.

REASONED JUSTIFICATION FOR THE CONTINUATION OF THE RULE, INCLUDING REASONS WHY THE AGENCY DISAGREES WITH COMMENTS IN OPPOSITION TO THE RULE, IF ANY: This rule was repealed and reenacted on 10/22/2013 because some of the information in the rule was defined in Utah statute and all restrictions were reviewed and updated as needed. The title was changed from Classified License System to Driver License Restrictions to accurately reflect the substance of the rule which identifies and defines restrictions that are not contained in statute. Therefore, this rule should be continued.

THE FULL TEXT OF THIS RULE MAY BE INSPECTED, DURING REGULAR BUSINESS HOURS, AT:

PUBLIC SAFETY
DRIVER LICENSE
CALVIN L RAMPTON COMPLEX
4501 S 2700 W 3RD FL
SALT LAKE CITY, UT 84119-5595
or at the Division of Administrative Rules.

DIRECT QUESTIONS REGARDING THIS RULE TO:
♦ Jill Laws by phone at 801-964-4469, by FAX at 801-964-4482, or by Internet E-mail at jlaws@utah.gov

AUTHORIZED BY: Nannette Rolfe, Director

EFFECTIVE: 03/18/2014

Public Safety, Driver License
R708-26
Learner Permit Rule

**FIVE-YEAR NOTICE OF REVIEW AND STATEMENT
OF CONTINUATION**DAR FILE NO.: 38373
FILED: 03/18/2014**NOTICE OF REVIEW AND STATEMENT OF
CONTINUATION**

CONCISE EXPLANATION OF THE PARTICULAR STATUTORY PROVISIONS UNDER WHICH THE RULE IS ENACTED AND HOW THESE PROVISIONS AUTHORIZE OR REQUIRE THE RULE: Subsection 53-3-104(1)(c) requires the division to make rules regarding the restrictions to be imposed on a person driving a motor vehicle with a temporary learner permit or learner permit.

SUMMARY OF WRITTEN COMMENTS RECEIVED DURING AND SINCE THE LAST FIVE YEAR REVIEW OF THE RULE FROM INTERESTED PERSONS SUPPORTING OR OPPOSING THE RULE: No written comments have been received during and since the last five-year review of this rule.

REASONED JUSTIFICATION FOR THE CONTINUATION OF THE RULE, INCLUDING REASONS WHY THE AGENCY DISAGREES WITH COMMENTS IN OPPOSITION TO THE RULE, IF ANY: This rule should be continued to comply with the provisions of Subsection 53-3-104(1)(c).

THE FULL TEXT OF THIS RULE MAY BE INSPECTED, DURING REGULAR BUSINESS HOURS, AT:

PUBLIC SAFETY
DRIVER LICENSE
CALVIN L RAMPTON COMPLEX
4501 S 2700 W 3RD FL
SALT LAKE CITY, UT 84119-5595
or at the Division of Administrative Rules.

DIRECT QUESTIONS REGARDING THIS RULE TO:
♦ Jill Laws by phone at 801-964-4469, by FAX at 801-964-4482, or by Internet E-mail at jlaws@utah.gov

AUTHORIZED BY: Nannette Rolfe, Director

EFFECTIVE: 03/18/2014

Public Safety, Driver License
R708-31
Ignition Interlock Systems

**FIVE-YEAR NOTICE OF REVIEW AND STATEMENT
OF CONTINUATION**DAR FILE NO.: 38374
FILED: 03/18/2014

NOTICE OF REVIEW AND STATEMENT OF CONTINUATION

CONCISE EXPLANATION OF THE PARTICULAR STATUTORY PROVISIONS UNDER WHICH THE RULE IS ENACTED AND HOW THESE PROVISIONS AUTHORIZE OR REQUIRE THE RULE: Subsection 41-6a-518(8) requires the commissioner to make rules setting standards for the certification of ignition interlock systems.

SUMMARY OF WRITTEN COMMENTS RECEIVED DURING AND SINCE THE LAST FIVE YEAR REVIEW OF THE RULE FROM INTERESTED PERSONS SUPPORTING OR OPPOSING THE RULE: No written comments were received during or since the last five-year review of this rule.

REASONED JUSTIFICATION FOR THE CONTINUATION OF THE RULE, INCLUDING REASONS WHY THE AGENCY DISAGREES WITH COMMENTS IN OPPOSITION TO THE RULE, IF ANY: This rule should be continued to meet the statutory requirements of Subsection 41-6a-518(8).

THE FULL TEXT OF THIS RULE MAY BE INSPECTED, DURING REGULAR BUSINESS HOURS, AT:

PUBLIC SAFETY
DRIVER LICENSE
CALVIN L RAMPTON COMPLEX
4501 S 2700 W 3RD FL
SALT LAKE CITY, UT 84119-5595
or at the Division of Administrative Rules.

DIRECT QUESTIONS REGARDING THIS RULE TO:
♦ Jill Laws by phone at 801-964-4469, by FAX at 801-964-4482, or by Internet E-mail at jlaws@utah.gov

AUTHORIZED BY: Nannette Rolfe, Director

EFFECTIVE: 03/18/2014

**Public Safety, Peace Officer Standards
and Training
R728-502
Procedure for POST Instructor
Certification**

**FIVE-YEAR NOTICE OF REVIEW AND STATEMENT
OF CONTINUATION**
DAR FILE NO.: 38377
FILED: 03/19/2014

NOTICE OF REVIEW AND STATEMENT OF CONTINUATION

CONCISE EXPLANATION OF THE PARTICULAR STATUTORY PROVISIONS UNDER WHICH THE RULE IS ENACTED AND HOW THESE PROVISIONS AUTHORIZE OR REQUIRE THE RULE: This rule is authorized by Section 53-6-105 which gives the director of Peace Officer Standards and Training (POST) the authority to establish minimum requirements for the certification of training instructors.

SUMMARY OF WRITTEN COMMENTS RECEIVED DURING AND SINCE THE LAST FIVE YEAR REVIEW OF THE RULE FROM INTERESTED PERSONS SUPPORTING OR OPPOSING THE RULE: No written comments have been received related to this rule.

REASONED JUSTIFICATION FOR THE CONTINUATION OF THE RULE, INCLUDING REASONS WHY THE AGENCY DISAGREES WITH COMMENTS IN OPPOSITION TO THE RULE, IF ANY: Rule R728-502 provides possible POST instructors the requirements, application process, and expectations of becoming an instructor for POST in basic and/or in-service training. Therefore, this rule should be continued.

THE FULL TEXT OF THIS RULE MAY BE INSPECTED, DURING REGULAR BUSINESS HOURS, AT:

PUBLIC SAFETY
PEACE OFFICER STANDARDS AND TRAINING
410 W 9800 S
SANDY, UT 84070
or at the Division of Administrative Rules.

DIRECT QUESTIONS REGARDING THIS RULE TO:
♦ Wade Breur by phone at 801-256-2329, or by Internet E-mail at wbreur@utah.gov

AUTHORIZED BY: Scott Stephenson, Director

EFFECTIVE: 03/19/2014

**Regents (Board of), Salt Lake
Community College
R784-1
Government Records Access and
Management Act Rules**

**FIVE-YEAR NOTICE OF REVIEW AND STATEMENT
OF CONTINUATION**
DAR FILE NO.: 38362
FILED: 03/17/2014

NOTICE OF REVIEW AND STATEMENT OF CONTINUATION

CONCISE EXPLANATION OF THE PARTICULAR STATUTORY PROVISIONS UNDER WHICH THE RULE IS ENACTED AND HOW THESE PROVISIONS AUTHORIZE OR REQUIRE THE RULE: Title 63G, Chapter 2, directs agencies to write rules outlining the process by which the agency responds to Government Records Access and Management Act (GRAMA) requests.

SUMMARY OF WRITTEN COMMENTS RECEIVED DURING AND SINCE THE LAST FIVE YEAR REVIEW OF THE RULE FROM INTERESTED PERSONS SUPPORTING OR OPPOSING THE RULE: No comments have been received.

REASONED JUSTIFICATION FOR THE CONTINUATION OF THE RULE, INCLUDING REASONS WHY THE AGENCY DISAGREES WITH COMMENTS IN OPPOSITION TO THE RULE, IF ANY: This rule should continue because Title 63G, Chapter 2, continues to require it.

THE FULL TEXT OF THIS RULE MAY BE INSPECTED, DURING REGULAR BUSINESS HOURS, AT:

REGENTS (BOARD OF)
SALT LAKE COMMUNITY COLLEGE
ROOM AD150
JAY L NELSON ADMINISTRATION BLDG
4600 S REDWOOD RD
TAYLORSVILLE, UT 84123
or at the Division of Administrative Rules.

DIRECT QUESTIONS REGARDING THIS RULE TO:

◆ Mikel Birch by phone at 801-957-4041, or by Internet E-mail at mikel.birch@slcc.edu
◆ Sarah Stoker by phone at 801-957-4533, or by Internet E-mail at sarah.stoker@slcc.edu

AUTHORIZED BY: Mikel Birch, Director, Risk Management

EFFECTIVE: 03/17/2014

Technology Services, Administration
R895-6
IT Plan Submission Rule for Agencies

FIVE-YEAR NOTICE OF REVIEW AND STATEMENT OF CONTINUATION

DAR FILE NO.: 38386
FILED: 03/27/2014

NOTICE OF REVIEW AND STATEMENT OF CONTINUATION

CONCISE EXPLANATION OF THE PARTICULAR STATUTORY PROVISIONS UNDER WHICH THE RULE IS ENACTED AND HOW THESE PROVISIONS AUTHORIZE OR REQUIRE THE RULE: This rule is issued by the Chief Information Officer (CIO) under the authority of Section 63F-1-206 of the Technology Governance Act, in accordance with Section 63G-3-201 of the Utah Rulemaking Act, and Section 63F-1-204 of the Agency Information Technology Plans.

SUMMARY OF WRITTEN COMMENTS RECEIVED DURING AND SINCE THE LAST FIVE YEAR REVIEW OF THE RULE FROM INTERESTED PERSONS SUPPORTING OR OPPOSING THE RULE: No comments have been received during and since the last five-year review of the rule from interested persons supporting or opposing the rule.

REASONED JUSTIFICATION FOR THE CONTINUATION OF THE RULE, INCLUDING REASONS WHY THE AGENCY DISAGREES WITH COMMENTS IN OPPOSITION TO THE RULE, IF ANY: State agencies are required by statute to submit IT plans for review and approval by the CIO's office. This rule provides the format and content requirements for IT plan submission. Therefore, this rule should be continued.

THE FULL TEXT OF THIS RULE MAY BE INSPECTED, DURING REGULAR BUSINESS HOURS, AT:

TECHNOLOGY SERVICES
ADMINISTRATION
ROOM 6000 STATE OFFICE BUILDING
450 N STATE ST
SALT LAKE CITY, UT 84114
or at the Division of Administrative Rules.

DIRECT QUESTIONS REGARDING THIS RULE TO:

◆ Stephanie Weiss by phone at 801-538-3284, by FAX at 801-538-3622, or by Internet E-mail at stweiss@utah.gov

AUTHORIZED BY: Mark VanOrden, Executive Director and CIO

EFFECTIVE: 03/27/2014

End of the Five-Year Notices of Review and Statements of Continuation Section

NOTICES OF RULE EFFECTIVE DATES

State law provides for agencies to make their administrative rules effective and enforceable after publication in the *Utah State Bulletin*. In the case of **PROPOSED RULES** or **CHANGES IN PROPOSED RULES** with a designated comment period, the law permits an agency to make a rule effective no fewer than seven calendar days after the close of the public comment period, nor more than 120 days after the publication date. In the case of **CHANGES IN PROPOSED RULES** with no designated comment period, the law permits an agency to make a rule effective on any date including or after the thirtieth day after the rule's publication date, but not more than 120 days after the publication date. If an agency fails to file a **NOTICE OF EFFECTIVE DATE** within 120 days from the publication of a **PROPOSED RULE** or a related **CHANGE IN PROPOSED RULE** the rule lapses.

Agencies have notified the Division of Administrative Rules that the rules listed below have been made effective.

NOTICES OF EFFECTIVE DATE are governed by Subsection 63G-3-301(12), Section 63G-3-303, and Sections R15-4-5a and R15-4-5b.

Abbreviations

AMD = Amendment
CPR = Change in Proposed Rule
NEW = New Rule
R&R = Repeal & Reenact
REP = Repeal

Agriculture and Food

Regulatory Services
No. 38262 (R&R): R70-530. Food Protection
Published: 02/15/2014
Effective: 03/27/2014

Alcoholic Beverage Control

Administration
No. 38274 (AMD): R81-1-16. Disqualification Based Upon Conviction of Crime
Published: 02/15/2014
Effective: 03/25/2014

No. 38275 (AMD): R81-7. Single Event Permits
Published: 02/15/2014
Effective: 03/25/2014

No. 38276 (AMD): R81-10b. Temporary Beer Event Permits
Published: 02/15/2014
Effective: 03/25/2014

Commerce

Real Estate
No. 38270 (AMD): R162-2g. Real Estate Appraiser Licensing and Certification Administrative Rules
Published: 02/15/2014
Effective: 03/31/2014

Corrections

Administration
No. 38255 (NEW): R251-111. Government Records Access and Management
Published: 02/15/2014
Effective: 03/26/2014

Environmental Quality

Water Quality
No. 38235 (AMD): R317-1-7. TMDLs
Published: 02/01/2014
Effective: 03/27/2014

No. 38271 (R&R): R317-5. Large Underground Wastewater Disposal (LUWD) Systems
Published: 02/15/2014
Effective: 03/26/2014

Health

Disease Control and Prevention, Health Promotion
No. 38178 (NEW): R384-200. Program Eligibility, Benefits, and Administration
Published: 01/01/2014
Effective: 03/21/2014

Family Health and Preparedness, Emergency Medical Services
No. 38272 (AMD): R426-8. Emergency Medical Services Ambulance Rates and Charges
Published: 02/15/2014
Effective: 03/24/2014

Insurance

Administration
No. 38273 (AMD): R590-186-8. Investigating Unprofessional Conduct
Published: 02/15/2014
Effective: 03/26/2014

**RULES INDEX
BY AGENCY (CODE NUMBER)
AND
BY KEYWORD (SUBJECT)**

The Rules Index is a cumulative index that reflects all effective changes to Utah's administrative rules. The current Index lists changes made effective from January 2, 2014 through April 01, 2014. The Rules Index is published in the Utah State Bulletin and in the annual Utah Administrative Rules Index of Changes. Nonsubstantive changes, while not published in the Bulletin, do become part of the Utah Administrative Code (Code) and are included in this Index, as well as 120-Day (Emergency) rules that do not become part of the Code. The rules are indexed by Agency (Code Number) and Keyword (Subject).

Questions regarding the index and the information it contains should be addressed to the Division of Administrative Rules (801-538-3764).

A copy of the **RULES INDEX** is available for public inspection at the Division of Administrative Rules (5110 State Office Building, Salt Lake City, UT), or may be viewed online at the Division's web site (<http://www.rules.utah.gov/>).

RULES INDEX - BY AGENCY (CODE NUMBER)

ABBREVIATIONS

<p>AMD = Amendment (Proposed Rule) CPR = Change in Proposed Rule EMR = 120-Day (Emergency) Rule EXD = Expired Rule EXP = Expedited Rule EXT = Five-Year Review Extension GEX = Governor's Extension</p>	<p>LNR = Legislative Nonreauthorization NEW = New Rule (Proposed Rule) NSC = Nonsubstantive Rule Change R&R = Repeal and Reenact (Proposed Rule) REP = Repeal (Proposed Rule) 5YR = Five-Year Notice of Review and Statement of Continuation</p>
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CODE REFERENCE	TITLE	FILE NUMBER	ACTION	EFFECTIVE DATE	BULLETIN ISSUE/PAGE
ADMINISTRATIVE SERVICES					
<u>Facilities Construction and Management</u>					
R23-33	Rules for the Prioritization and Scoring of Capital Improvements by the Utah State Building Board	38247	NEW	03/10/2014	2014-3/2
<u>Finance</u>					
R25-7	Travel-Related Reimbursements for State Employees	38175	AMD	02/07/2014	2014-1/4
<u>Fleet Operations</u>					
R27-7-3	Driver Eligibility to Operate a State Vehicle	38073	AMD	03/11/2014	2013-22/14
<u>Purchasing and General Services</u>					
R33-6	Modification and Termination of Contracts for Supplies, Services, Construction, and Technology	38218	EXT	01/02/2014	2014-3/57
R33-7	Cost Principles	38219	EXT	01/02/2014	2014-3/57
R33-9	Insurance Procurement	38220	EXT	01/02/2014	2014-3/57
AGRICULTURE AND FOOD					
<u>Animal Industry</u>					
R58-20	Domesticated Elk Hunting Parks	38251	5YR	01/17/2014	2014-4/67
<u>Regulatory Services</u>					
R70-530	Food Protection	38262	R&R	03/27/2014	2014-4/5
ALCOHOLIC BEVERAGE CONTROL					
<u>Administration</u>					
R81-1-16	Disqualification Based Upon Conviction of Crime	38274	AMD	03/25/2014	2014-4/10
R81-7	Single Event Permits	38275	AMD	03/25/2014	2014-4/11
R81-10b	Temporary Beer Event Permits	38276	AMD	03/25/2014	2014-4/14
ATTORNEY GENERAL					
<u>Administration</u>					
R105-2	Records Access and Management	38245	NSC	01/30/2014	Not Printed
COMMERCE					
<u>Consumer Protection</u>					
R152-21	Credit Services Organizations Act Rules	38266	5YR	01/29/2014	2014-4/67

R152-26	Telephone Fraud Prevention Act	38125	AMD	01/07/2014	2013-23/4
<u>Occupational and Professional Licensing</u>					
R156-1-501	Unprofessional Conduct	38157	AMD	01/21/2014	2013-24/6
R156-1-501	Unprofessional Conduct	38253	NSC	01/31/2014	Not Printed
R156-42a	Occupational Therapy Practice Act Rule	38254	5YR	01/21/2014	2014-4/68
R156-44a	Nurse Midwife Practice Act Rule	38249	5YR	01/16/2014	2014-4/69
R156-46a	Hearing Instrument Specialist Licensing Act Rule	38155	AMD	01/21/2014	2013-24/7
R156-46a	Hearing Instrument Specialist Licensing Act Rule	38257	5YR	01/27/2014	2014-4/69
R156-55a	Utah Construction Trades Licensing Act Rule	38151	AMD	01/21/2014	2013-24/10
R156-61	Psychologist Licensing Act Rule	38233	5YR	01/13/2014	2014-3/49
R156-67	Utah Medical Practice Act Rule	38106	AMD	01/07/2014	2013-23/5
R156-68	Utah Osteopathic Medical Practice Act Rule	38107	AMD	01/07/2014	2013-23/6
R156-69	Dentist and Dental Hygienist Practice Act Rule	38149	AMD	01/21/2014	2013-24/20
R156-72	Acupuncture Licensing Act Rule	38165	AMD	02/10/2014	2014-1/8
R156-80a	Medical Language Interpreter Act Rule	38388	5YR	03/31/2014	Not Printed
R156-81	Retired Volunteer Health Care Practitioner Act Rule	38382	5YR	03/25/2014	Not Printed
<u>Real Estate</u>					
R162-2f	Real Estate Licensing and Practices Rules	38213	AMD	02/25/2014	2014-2/4
R162-2g	Real Estate Appraiser Licensing and Certification Administrative Rules	38270	AMD	03/31/2014	2014-4/16
CORRECTIONS					
<u>Administration</u>					
R251-111	Government Records Access and Management	38255	NEW	03/26/2014	2014-4/25
CRIME VICTIM REPARATIONS					
<u>Administration</u>					
R270-1-13	Awards	38221	EMR	01/04/2014	2014-3/47
R270-3	ADA Complaint Procedure	38258	EXT	01/27/2014	2014-4/75
R270-4	Government Records Access and Management Act	38259	EXT	01/27/2014	2014-4/75
EDUCATION					
<u>Administration</u>					
R277-116	Utah State Board of Education Internal Audit Procedure	38183	AMD	02/07/2014	2014-1/10
R277-117	Utah State Board of Education Protected Documents	38295	5YR	02/13/2014	2014-5/59
R277-400	School Emergency Response Plans	38296	5YR	02/13/2014	2014-5/59
R277-437	Student Enrollment Options	38185	AMD	02/07/2014	2014-1/12
R277-438	Dual Enrollment	38347	5YR	03/14/2014	2014-7/89
R277-470-6	Charter School Mentoring Program	38186	AMD	02/07/2014	2014-1/14
R277-477-3	Distribution of Funds - Local Board or Local Charter Board Approval of School LAND Trust Plans	38326	NSC	04/01/2014	Not Printed
R277-481	Charter School Oversight, Monitoring and Appeals	38187	AMD	02/07/2014	2014-1/15
R277-486	Professional Staff Cost Program	38348	5YR	03/14/2014	2014-7/89
R277-486	Professional Staff Cost Program	38356	NSC	04/01/2014	Not Printed
R277-497	School Grading System	38111	AMD	01/08/2014	2013-23/8
R277-503	Licensing Routes	38240	AMD	03/10/2014	2014-3/4
R277-510-4	NCLB Highly Qualified Assignments - Elementary Teachers 1-8	38289	NSC	02/27/2014	Not Printed
R277-518	Career and Technical Education Licenses	38241	AMD	03/10/2014	2014-3/8
R277-524	Paraprofessional/Paraeducator Programs, Assignments, and Qualifications	38349	5YR	03/14/2014	2014-7/90
R277-525	Special Educator Stipends	38114	AMD	01/08/2014	2013-23/9
R277-527	International Guest Teachers	38190	AMD	02/07/2014	2014-1/18

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R277-528	Use of Public Education Job Enhancement Program (PEJEP) Funds	38242	NEW	03/10/2014	2014-3/12
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R277-709	Education Programs Serving Youth in Custody	38116	AMD	01/14/2014	2013-23/13
R277-724	Criteria for Sponsors Recruiting Day Care Facilities in the Child and Adult Care Food Program	38351	5YR	03/14/2014	2014-7/90
R277-735	Corrections Education Programs	38352	5YR	03/14/2014	2014-7/91
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R280-202	USOR Procedures for Individuals with the Most Severe Disabilities	38353	5YR	03/14/2014	2014-7/91
ENVIRONMENTAL QUALITY					
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R307-103-1	Administrative Procedures	38252	NSC	01/31/2014	Not Printed
R307-110-17	Section IX, Control Measures for Area and Point Sources, Part H, Emissions Limits	38061	AMD	01/09/2014	2013-21/8
R307-150	Emission Inventories	38261	5YR	01/28/2014	2014-4/70
R307-210-2	Oil and Gas Sector: New Source Performance Standards	38104	AMD	03/06/2014	2013-23/17
R307-214-3	Oil and Gas Sector: National Emission Standards for Hazardous Air Pollutants	38105	AMD	03/06/2014	2013-23/18
R307-302	Solid Fuel Burning Devices in Box Elder, Cache, Davis, Salt Lake, Tooele, Utah and Weber Counties	38166	AMD	03/06/2014	2014-1/20
R307-401-19	General Approval Order	37833	AMD	01/06/2014	2013-15/29
R307-401-19	General Approval Order	37833	CPR	01/06/2014	2013-23/55
R307-405	Permits: Major Sources in Attainment or Unclassified Areas (PSD)	38260	5YR	01/28/2014	2014-4/70
R307-840	Lead-Based Paint Program Purpose, Applicability, and Definitions	38330	5YR	03/06/2014	2014-7/92
<u>Drinking Water</u>					
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R309-515	Facility Design and Operation: Source Development	38012	AMD	01/21/2014	2013-19/51
<u>Radiation Control</u>					
R313-22-34	Issuance of Specific Licenses	38145	AMD	02/14/2014	2013-23/19
R313-70-5	Payment of Fees	38146	AMD	02/18/2014	2013-23/22
<u>Solid and Hazardous Waste</u>					
R315-8-14	Landfills	38334	NSC	04/01/2014	Not Printed
R315-12	Administrative Procedures	38335	NSC	04/01/2014	Not Printed
<u>Water Quality</u>					
R317-1-7	TMDLs	38235	AMD	03/27/2014	2014-3/13
R317-5	Large Underground Wastewater Disposal (LUWD) Systems	38271	R&R	03/26/2014	2014-4/26
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<u>Economic Development, Pete Suazo Utah Athletic Commission</u>					
R359-1-604	Boxing - Gloves	38033	AMD	01/24/2014	2013-20/25
<u>Energy Development (Office of)</u>					
R362-2	Renewable Energy Systems Tax Credits	38163	AMD	01/22/2014	2013-24/23

HEALTH

Administration

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Center for Health Data, Health Care Statistics

R428-15 Health Data Authority Health Insurance Claims Reporting 38144 AMD 01/07/2014 2013-23/43

Children's Health Insurance Program

R382-3 Accountable Care Organization Incentives to Appropriately Use Emergency Room Services in the Children's Health Insurance Program 38102 NEW 01/13/2014 2013-23/23

Disease Control and Prevention, Environmental Services

R392-101 Food Safety Manager Certification 38229 5YR 01/10/2014 2014-3/49
 R392-200-4 Site Standards 38177 AMD 02/19/2014 2014-1/24
 R392-302 Design, Construction, and Operation of Public Pools 38089 AMD 02/14/2014 2013-22/69
 R392-303 Public Geothermal Pools and Bathing Places 38285 5YR 02/11/2014 2014-5/60
 R392-303 Public Geothermal Pools and Bathing Places 38176 AMD 02/24/2014 2014-1/25

Disease Control and Prevention, Health Promotion

R384-100 Cancer Reporting Rule 38367 5YR 03/18/2014 Not Printed
 R384-200 Program Eligibility, Benefits, and Administration 38178 NEW 03/21/2014 2014-1/22
 R384-203 Prescription Drug Database Access 38081 NEW 03/01/2014 2013-22/68

Family Health and Preparedness, Children with Special Health Care Needs

R398-4 Cytomegalovirus Public Health Initiative 38139 NEW 01/17/2014 2013-23/25
 R398-10 Autism Spectrum Disorders and Mental Retardation Reporting 38339 5YR 03/12/2014 2014-7/92
 R398-10 Autism Spectrum Disorders and Mental Retardation Reporting 38340 NSC 04/01/2014 Not Printed
 R398-20 Early Intervention 37984 AMD 01/28/2014 2013-19/61

Family Health and Preparedness, Emergency Medical Services

R426-8 Emergency Medical Services Ambulance Rates and Charges 38272 AMD 03/24/2014 2014-4/42
 R426-100 Air Medical Service Rules 38079 REP 01/06/2014 2013-22/119

Family Health and Preparedness, Licensing

R432-2-5 Requirements for a Satellite Service Operation 38086 AMD 01/24/2014 2013-22/123
 R432-3 General Health Care Facility Rules Inspection and Enforcement 38173 AMD 02/27/2014 2014-1/37
 R432-7 Specialty Hospital - Psychiatric Hospital Construction 38391 5YR 04/01/2014 Not Printed
 R432-8 Specialty Hospital - Chemical Dependency/Substance Abuse Construction 38392 5YR 04/01/2014 Not Printed
 R432-9 Specialty Hospital - Rehabilitation Construction Rule 38393 5YR 04/01/2014 Not Printed
 R432-10 Specialty Hospital - Long-Term Acute Care Construction Rule 38394 5YR 04/01/2014 Not Printed
 R432-11 Orthopedic Hospital Construction 38395 5YR 04/01/2014 Not Printed
 R432-12 Small Health Care Facility (Four to Sixteen Beds) Construction Rule 38396 5YR 04/01/2014 Not Printed
 R432-13 Freestanding Ambulatory Surgical Center Construction Rule 38397 5YR 04/01/2014 Not Printed
 R432-30 Adjudicative Procedure 38398 5YR 04/01/2014 Not Printed
 R432-32 Licensing Exemption for Non-Profit Volunteer End-of-Life Care 38399 5YR 04/01/2014 Not Printed

Health Care Financing, Coverage and Reimbursement Policy

R414-1B Prohibition of Payment for Certain Abortion Services 38369 5YR 03/18/2014 Not Printed
 R414-11 Podiatric Services 38371 5YR 03/18/2014 Not Printed

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R414-54	Speech-Language Pathology Services	38227	5YR	01/07/2014	2014-3/50
R414-90	Diabetes Self-Management Training	38368	5YR	03/18/2014	Not Printed
R414-306-5	Medical Transportation	38129	AMD	01/10/2014	2013-23/35
R414-503	Preadmission Screening and Resident Review	38141	R&R	01/07/2014	2013-23/37
R414-511	Medicaid Accountable Care Organization Incentives to Appropriately Use Emergency Room Services	38103	NEW	01/13/2014	2013-23/42

HUMAN RESOURCE MANAGEMENT

Administration

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R477-6-9	Severance Benefit	38092	AMD	01/14/2014	2013-22/125
R477-7	Leave	38084	AMD	01/14/2014	2013-22/126
R477-101	Administrative Law Judge Conduct Committee	38091	NEW	01/14/2014	2013-22/129

HUMAN SERVICES

Administration

R495-882	Termination of Parental Rights	38280	5YR	02/10/2014	2014-5/61
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Child and Family Services

R512-41	Qualifying Adoptive Families and Adoption Placement	38263	5YR	01/28/2014	2014-4/72
R512-43	Adoption Assistance	38217	AMD	03/10/2014	2014-3/15
R512-75	Rules Governing Adjudication of Consumer Complaints	38264	5YR	01/28/2014	2014-4/72
R512-306	Out-of-Home Services, Transition to Adult Living Services, Education and Training Voucher Program	38265	5YR	01/28/2014	2014-4/73

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R527-38	Unenforceable Cases	38277	5YR	02/05/2014	2014-5/61
R527-275	Passport Release	38336	5YR	03/06/2014	2014-7/93

INSURANCE

Administration

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R590-170	Fiduciary and Trust Account Obligations	38283	5YR	02/11/2014	2014-5/62
R590-186-8	Investigating Unprofessional Conduct	38273	AMD	03/26/2014	2014-4/43
R590-195	Car Rental Related Licensing Rule	38307	5YR	02/20/2014	2014-6/75
R590-220	Submission of Accident and Health Insurance Filings	38311	5YR	02/24/2014	2014-6/75
R590-225	Submission of Property and Casualty Rate and Form Filings	38309	5YR	02/20/2014	2014-6/76
R590-226	Submission of Life Insurance Filings	38364	5YR	03/18/2014	Not Printed
R590-226-5	Filing Submission Requirements	38290	NSC	02/27/2014	Not Printed
R590-227	Submission of Annuity Filings	38365	5YR	03/18/2014	Not Printed
R590-228	Submission of Credit Life and Credit Accident and Health Insurance Form and Rate Filings	38366	5YR	03/18/2014	Not Printed
R590-229	Annuity Disclosure	38090	AMD	03/11/2014	2013-22/139
R590-229	Annuity Disclosure	38090	CPR	03/11/2014	2014-3/44
R590-249-1	Authority	38286	NSC	02/27/2014	Not Printed
R590-252	Use of Senior-Specific Certifications and Professional Designations	38282	5YR	02/11/2014	2014-5/62
R590-258-1	Authority	38284	NSC	02/27/2014	Not Printed
R590-268	Small Employer Stop-Loss Insurance	38087	NEW	03/13/2014	2013-22/142

R590-268	Small Employer Stop-Loss Insurance	38087	CPR	03/13/2014	2014-3/45
R590-269	Individual Open Enrollment Period	38088	NEW	01/13/2014	2013-22/144
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R592-8-5	Request for Exemption Process	38246	AMD	03/10/2014	2014-3/20
R592-11	Title Insurance Producer Annual and Controlled Business Reports	38156	AMD	03/10/2014	2013-24/34
R592-11	Title Insurance Producer Annual and Controlled Business Reports	38156	CPR	03/10/2014	2014-4/64
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<u>Administration</u>					
R597-1	General Provisions	38303	5YR	02/17/2014	2014-6/77
R597-3	Judicial Performance Evaluations	38304	5YR	02/17/2014	2014-6/77
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<u>Adjudication</u>					
R602-2-5	Timeliness of Decisions	38193	AMD	02/21/2014	2014-2/7
R602-7	Adjudication of Discrimination Claims	38327	5YR	03/05/2014	2014-7/94
R602-8	Adjudication of Utah Occupational Safety and Health Citation Claims	38328	5YR	03/05/2014	2014-7/94
<u>Boiler and Elevator Safety</u>					
R616-2-3	Safety Codes and Rules for Boilers and Pressure Vessels	38226	AMD	03/10/2014	2014-3/22
LIEUTENANT GOVERNOR					
<u>Administration</u>					
R622-2	Use of the Great Seal of the State of Utah	38379	5YR	03/24/2014	Not Printed
<u>Elections</u>					
R623-1	Lieutenant Governor's Procedure for Regulation of Lobbyist Activities	38383	5YR	03/26/2014	Not Printed
R623-2	Uniform Ballot Counting Standards	38384	5YR	03/26/2014	Not Printed
R623-3	Utah State Plan on Election Reform	38385	5YR	03/26/2014	Not Printed
MONEY MANAGEMENT COUNCIL					
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ABBREVIATIONS

AMD = Amendment (Proposed Rule)	LNR = Legislative Nonreauthorization
CPR = Change in Proposed Rule	NEW = New Rule (Proposed Rule)
EMR = 120-Day (Emergency) Rule	NSC = Nonsubstantive Rule Change
EXD = Expired Rule	R&R = Repeal and Reenact (Proposed Rule)
EXP = Expedited Rule	REP = Repeal (Proposed Rule)
EXT = Five-Year Review Extension	5YR = Five-Year Notice of Review and Statement of Continuation
GEX = Governor's Extension	

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	38328	R602-8	5YR	03/05/2014	2014-7/94	
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	38176	R392-303	AMD	02/24/2014	2014-1/25	
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	38391	R432-7	5YR	04/01/2014	Not Printed	
	38392	R432-8	5YR	04/01/2014	Not Printed	
	38393	R432-9	5YR	04/01/2014	Not Printed	
	38394	R432-10	5YR	04/01/2014	Not Printed	
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	38397	R432-13	5YR	04/01/2014	Not Printed	
	38398	R432-30	5YR	04/01/2014	Not Printed	
	38399	R432-32	5YR	04/01/2014	Not Printed	
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	38257	R156-46a	5YR	01/27/2014	2014-4/69	
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