

UTAH STATE BULLETIN

OFFICIAL NOTICES OF UTAH STATE GOVERNMENT
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Nancy L. Lancaster, Managing Editor

The *Utah State Bulletin (Bulletin)* is an official noticing publication of the executive branch of Utah state government. The Office 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: Office of Administrative Rules, PO Box 141007, Salt Lake City, Utah 84114-1007, telephone 801-538-3003. 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.

Office of Administrative Rules, Salt Lake City 84114

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SPECIAL NOTICES

Health Health Care Financing, Coverage and Reimbursement Policy

Notice for January 2017 Medicaid Rate Changes

Effective January 1, 2017, Utah Medicaid will adjust its rates consistent with approved methodologies. Rate adjustments include new codes priced consistent with approved Medicaid methodologies, potential adjustments to existing codes, and nursing home rate changes to case mix components consistent with adopted payment methodology. All rate changes are posted to the web and can be viewed at: <http://health.utah.gov/medicaid/stplan/lookup/CoverageLookup.php>.

Health Health Care Financing, Coverage and Reimbursement Policy Administrative Changes and Updates to the Medicaid State Plan

Federal law requires the Department of Health to update the Medicaid State Plan to reflect changes within its organization.

The Department, therefore, will submit a State Plan Amendment (SPA 17-0001-UT, Administrative Changes and Updates to the Medicaid State Plan), which updates organizational changes within the Department and clarifies executive authority to submit State Plan changes.

The Department does not anticipate any impact to total annual expenditures.

This proposed change, if approved, becomes effective January 1, 2017.

A copy of this change 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. A copy of this change is 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 November 16, 2016, 12:00 a.m., and December 01, 2016, 11:59 p.m. are included in this, the December 15, 2016, 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 Office 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 Office 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 January 17, 2017. 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 April 14, 2017, the agency may notify the Office 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 Office of Administrative Rules does not receive a **NOTICE OF EFFECTIVE DATE OF 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

**Administrative Services, Purchasing
and General Services
R33-8-102**

Adding Additional Funds to a Contract

NOTICE OF PROPOSED RULE

(Amendment)

DAR FILE NO.: 41023

FILED: 11/16/2016

RULE ANALYSIS

PURPOSE OF THE RULE OR REASON FOR THE CHANGE: The Procurement Policy Board voted to remove Section R33-8-102 because it is redundant and is in conflict with, and preempted by, Title 63G, Chapter 6a, of the Utah Code. This section was deemed unnecessary.

SUMMARY OF THE RULE OR CHANGE: Section R33-8-102 has been removed from Rule R33-8; however, it is labeled "Reserved".

STATUTORY OR CONSTITUTIONAL AUTHORIZATION FOR THIS RULE: Title 63G, Chapter 6a

ANTICIPATED COST OR SAVINGS TO:

- ◆ **THE STATE BUDGET:** There are no anticipated costs or savings to the state budget because the changes to this rule are technical in nature. The removal of the redundant language from Section R33-8-102 will remove the conflict between the section and its governing statute.
- ◆ **LOCAL GOVERNMENTS:** There are no anticipated costs or savings to local government because the changes to this rule are technical in nature. The removal of the redundant language from Section R33-8-102 will remove the conflict between the section and its governing statute.
- ◆ **SMALL BUSINESSES:** There are no anticipated costs or savings to small businesses because the changes to this rule are technical in nature. The removal of the redundant language from Section R33-8-102 will remove the conflict between the section and its governing statute.
- ◆ **PERSONS OTHER THAN SMALL BUSINESSES, BUSINESSES, OR LOCAL GOVERNMENTAL ENTITIES:** There are no anticipated costs or savings to persons other than small businesses, businesses, or local government entities because the changes to this rule are technical in nature. The removal of the redundant language from Section R33-8-102 will remove the conflict between the section and its governing statute.

COMPLIANCE COSTS FOR AFFECTED PERSONS: There are no compliance costs for affected persons because the changes to this rule are technical in nature. The removal of the redundant language from Section R33-8-102 will remove the conflict between the section and its governing statute.

COMMENTS BY THE DEPARTMENT HEAD ON THE FISCAL IMPACT THE RULE MAY HAVE ON BUSINESSES: There are no anticipated fiscal impacts that this rule may have on businesses.

THE FULL TEXT OF THIS RULE MAY BE INSPECTED, DURING REGULAR BUSINESS HOURS, AT:
ADMINISTRATIVE SERVICES
PURCHASING AND GENERAL SERVICES
ROOM 3150 STATE OFFICE BLDG
450 N STATE ST
SALT LAKE CITY, UT 84114-1201
or at the Office of Administrative Rules.

DIRECT QUESTIONS REGARDING THIS RULE TO:

- ◆ Alan Bachman by phone at 801-538-3105, by FAX at 801-538-3313, or by Internet E-mail at abachman@utah.gov
- ◆ Jared Gardner by phone at 385-646-4561, or by Internet E-mail at jbgardner@graniteschools.org
- ◆ Simone Rudas by phone at 801-538-3240, or by Internet E-mail at srudas@utah.gov

INTERESTED PERSONS MAY PRESENT THEIR VIEWS ON THIS RULE BY SUBMITTING WRITTEN COMMENTS NO LATER THAN AT 5:00 PM ON 01/17/2017

THIS RULE MAY BECOME EFFECTIVE ON: 01/24/2017

AUTHORIZED BY: Jared Gardner, Chair, Procurement Policy Board

R33. Administrative Services, Purchasing and General Services.

R33-8. Exceptions to Standard Procurement Process.

R33-8-102. [Adding Additional Funds to a Contract.]Reserved.
[~~———— (1) Adding funds to an existing contract constitutes an expenditure of public funds without competition and is an exception to the standard procurement process. Two of the purposes of the Utah Procurement Code identified in Section 63G-6a-102 are to ensure the fair and equitable treatment of all persons who deal with the procurement system; and to provide increased economy in state procurement activities. In order to achieve these competing objectives, when adding additional funds to a contract, the following provisions shall apply to executive branch procurement units:~~

~~———— (a) Up to 25 percent in additional funds may be added to the initial total amount of a contract issued and conducted by an executive branch procurement unit if, after reviewing the applicable laws and rules, the chief procurement officer or head of a procurement unit with independent procurement authority approves adding the additional funds:~~

~~———— (b) Over 25 percent in additional funds may be added to the initial total amount of a contract issued and conducted by an executive branch procurement unit if approved by the chief procurement officer or head of an executive branch procurement unit with independent procurement authority and the Attorney~~

~~General's Office. The approval from the Attorney General's Office shall include a written determination that adding the additional funds does not violate state or federal antitrust laws and is consistent with the purpose of ensuring the fair and equitable treatment of all persons who deal with the procurement system.~~

~~_____ (c) Explicit statutory authorization to add additional funds to a specific existing contract issued and conducted by an executive branch agency overrides subsections (a) and (b).~~

~~_____ (d) Additional funds may only be added to an existing contract for the procurement item(s) identified in the scope of work or procurement specifications set forth in the solicitation and resulting contract.]Reserved.~~

KEY: government purchasing, exceptions to procurement requirements, emergency procurements

Date of Enactment or Last Substantive Amendment: [~~August 22, 2016~~2017]

Notice of Continuation: July 8, 2014

Authorizing, and Implemented or Interpreted Law: 63G-6a

Commerce, Real Estate
R162-2e
Appraisal Management Company
Administrative Rules

NOTICE OF PROPOSED RULE

(Amendment)

DAR FILE NO.: 41024

FILED: 11/17/2016

RULE ANALYSIS

PURPOSE OF THE RULE OR REASON FOR THE CHANGE: The purposes of the proposed amendment are to: 1) provide clarity and transparency in communications between an Appraisal Management Company (AMC) and an appraiser with regard to disclosures and notices from an AMC to an appraiser; 2) provide a presumption of compliance for an AMC that its appraisal fees are customary and reasonable if the AMC pays an appraiser consistent with the United States Department of Veterans Affairs fee schedule; 3) clarify the manner in which an AMC may offer an appraisal assignment to an appraiser; and 4) specify that if an AMC uses delivery time for completion of an appraisal report for a tiered panel model or when ranking an appraiser, the AMC shall only use business days in the time calculation.

SUMMARY OF THE RULE OR CHANGE: In Subsection R162-2e-102(3), amends the definition of business day. In Section R162-2e-304, the amendment: 1) changes and adds to the disclosures an AMC is required to disclose to an appraiser; 2) changes and adds to the notices an AMC is required to provide an appraiser; and 3) provides a presumption of compliance for an AMC that pays an appraiser compensation consistent with the United States Department of Veterans Affairs fee schedule. In Section

R162-2e-306, the amendment: 1) specifies the manner in which an AMC may offer an appraisal assignment to an appraiser; and 2) specifies that if an AMC uses delivery time for completion of an appraisal report when ranking an appraiser, the AMC shall only use business days in the time calculation.

STATUTORY OR CONSTITUTIONAL AUTHORIZATION FOR THIS RULE: Section 61-2e-103 and Section 61-2e-301 and Section 61-2e-304 and Section 61-2e-306

ANTICIPATED COST OR SAVINGS TO:

◆ **THE STATE BUDGET:** The division has the staff and budget in place to administer this proposed amendment. It is not expected that the proposed amendment will affect those resources or result in any additional cost or savings to the state budget.

◆ **LOCAL GOVERNMENTS:** Local governments are not required to comply with or enforce the Appraisal Management Company Administrative Rules. No fiscal impact to local government is expected from the proposed amendment.

◆ **SMALL BUSINESSES:** The proposed amendment does not create new obligations for small businesses nor does it increase the cost associated with any existing obligation. No fiscal impact to small business is expected from the proposed amendment.

◆ **PERSONS OTHER THAN SMALL BUSINESSES, BUSINESSES, OR LOCAL GOVERNMENTAL ENTITIES:** The proposed amendment does not create new obligations for persons other than small businesses, businesses, or local government entities nor does it increase the cost associated with any existing obligation. No fiscal impact to persons other than small businesses, businesses, or local government entities is expected from the proposed amendment.

COMPLIANCE COSTS FOR AFFECTED PERSONS: The proposed rule does create new obligations and sets new limitations for AMCs subject to the administrative rules. Some AMCs will likely incur compliance costs but these costs will vary among the AMCs and there is no way to determine the amount of these costs.

COMMENTS BY THE DEPARTMENT HEAD ON THE FISCAL IMPACT THE RULE MAY HAVE ON BUSINESSES: A minor amendment is made to the definition of "business day" in Section R162-2e-102. The amendment to Section R162-2e-304 changes and adds to the disclosures an appraisal management company (AMC) makes to an appraiser and provides a presumption of payment of an appraiser at a customary and reasonable rate, if the compensation is consistent with the fee schedule published by the United States Department of Veterans Affairs Denver Regional Loan Center. Section R162-2e-306 is a new section that specifies the manner in which an AMC may offer an appraisal assignment to an appraiser and the manner in which the time of completion of an appraisal report is to be computed. The changed Section R162-2e-304 and the new section do create new obligations for AMCs, resulting in some additional costs of implementation. However, these changes

are minor, and there is no way to determine with precision the amount of these costs. The fiscal impact to businesses is negligible.

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 Office 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 01/17/2017

THIS RULE MAY BECOME EFFECTIVE ON: 01/24/2017

AUTHORIZED BY: Jonathan Stewart, Director

R162. Commerce, Real Estate.

R162-2e. Appraisal Management Company Administrative Rules.

R162-2e-102. Definitions.

(1) "Affiliation" means a business association:

(a) between:

(i) two individuals registered, licensed, or certified under

Section 61-2b; or

(ii) an individual registered, licensed, or certified under

Section 61-2b and:

(A) an appraisal entity; or

(B) a government agency;

(b) for the purpose of providing an appraisal service; and

(c) regardless of whether an employment relationship

exists between the parties.

(2) The acronym "AMC" stands for appraisal management company.

(3) [~~As used in Subsection R162-2e-201(3)(c)(ii),~~ "Business[~~business~~] day" means a day other than:

(a) a Saturday;

(b) a Sunday; ~~or~~

(c) a state or federal holiday; ~~or~~

~~(d) any other day when the division is closed for business.]~~

(4) "Client" is defined in Section 61-2e-102(10).

(5) "Competency statement" means a statement provided by the AMC to the appraiser that, at a minimum, requires the appraiser to attest that the appraiser:

(a) is competent according to USPAP standards;

(b) recognizes and agrees to comply with:

(i) laws and regulations that apply to the appraiser and to the assignment;

(ii) assignment conditions; and

(iii) the scope of work outlined by the client; and

(c) has access, either independently or through an affiliation pursuant to Subsection (1), to the records necessary to complete a credible appraisal, including:

(i) multiple listing service data; and

(ii) county records.

(6)(a) "Employee" means an individual:

(i) whose manner and means of work performance are subject to the right of control of, or are controlled by, another person; and

(ii) whose compensation for federal income tax purposes is reported, or is required to be reported, on a W-2 form issued by the controlling person.

(b) "Employee" does not include an independent contractor who performs duties other than at the discretion of, and subject to the supervision and instruction of, another person.

(c) For purposes of applying Subsection R162-2e-401(1)(g), an appraiser who completes an assignment is considered to be an employee of the AMC that offers the assignment if:

(i) this subsection (a) describes the employment relationship between the appraiser and the AMC; or

(ii) pursuant to this subsection (a), the appraiser is an employee of a company:

(A) that is wholly owned by the AMC; or

(B) in which the AMC owns a controlling interest.

(7) "Select" means:

(a) for purposes of composing the AMC appraiser panel, to review and evaluate the qualifications of an appraiser who applies to be included on the AMC's appraiser panel; and

(b) for purposes of assigning an appraisal activity to an appraiser:

(i) to choose from the AMC's appraiser panel an individual appraiser or appraisal entity to complete an assignment; or

(ii) to compile, from among the appraisers included in the AMC's appraiser panel, an electronic distribution list of appraisers to whom an assignment will be offered through e-mail.

(8) The acronym "USPAP" stands for Uniform Standards of Professional Appraisal Practice.

R162-2e-304. Required Disclosure -- Customary and Reasonable Compensation.

(1) In addition to the disclosures required by Section 61-2e-304, an AMC shall:

(a) at the time an appraiser is first added to an appraiser panel, the AMC shall:

(i) notify the appraiser in writing;

(A) of the criteria the AMC uses to rank an appraiser on the panel; and

(B) if the AMC uses a tiered panel model, the criteria the AMC uses to distinguish the various tiers.

(b) If the criteria used by an AMC to rank an appraiser changes while an appraiser is on the appraiser panel of an AMC, or if the AMC makes any changes to a tiered panel model, the AMC shall provide written notice of the changes to all appraisers affected by the changes.

(c)[(4)] at the time an assignment is offered, disclose to the appraiser:

(i) the total fee that will be collected by the AMC for the assignment;

(ii) the total amount that the AMC will retain from the fee charged, disclosed as a dollar amount;

(iii)(A) the total amount that the appraiser may expect to earn from the assignment;

(A)(i) disclosed as a dollar amount; and

(B)(i) delineating any fees or costs that will be charged by the AMC to the appraiser;

(iv)(A)(i) the property address;

(B)(i) the legal description; or

(C)(i) equivalent information that would allow the appraiser to determine whether the appraiser has been involved with any service regarding the subject property within the three years preceding the date on which the assignment is offered;

(v)(e) the assignment conditions and scope of work requirements in sufficient detail to allow the appraiser to determine whether the appraiser is competent to complete the assignment; and

(vi)(d) any known deadlines within which the assignment must be completed;

(d)(2) at or before the time the appraiser accepts an assignment, obtain the appraiser's acknowledgment as to the AMC's competency statement; and

~~[(3) before requiring the appraiser to submit a completed report, disclose to the appraiser:~~

~~(a) the total fee that will be collected by the AMC for the assignment; and~~

~~(b) the total amount that the AMC will retain from the fee charged, disclosed as a dollar amount; and]~~

(e)(4) direct the appraiser who performs the real estate appraisal activity to disclose in the body of the appraisal report:

(i)(A) the total compensation, stated as a dollar amount, paid to the appraiser or, if the appraiser is employed by an appraisal company, to the appraiser's employer; and

(ii)(B) the total compensation retained by the AMC in connection with the real estate appraisal activity, stated as a dollar amount.

(2) Within 10 business days of receiving a written request from an appraiser as to why the AMC has decreased the number of assignments offered to the appraiser or has ceased offering the appraiser assignments, an AMC shall notify the appraiser in writing as follows:

(a) if the AMC has determined to decrease the number of assignments it will offer to the appraiser, the reason why the AMC has made this decision;

(b) if the AMC has determined to cease offering assignments to the appraiser, the reason why the AMC has made this decision; and

(c) if the AMC has determined to remove the appraiser from an appraiser panel, the AMC shall provide the appraiser notice as required by Utah Code Section 61-2e-306.

(3) An AMC is presumed to be in compliance with the requirement that the AMC compensate an appraiser at a rate that is customary and reasonable for an appraisal assignment in Utah if the AMC pays compensation consistent with the fee schedule for the state of Utah as published by the United States Department of Veterans Affairs Denver Regional Loan Center Appraisal Fee Schedule, as the fee schedule is updated from time-to-time.

R162-2e-306. Offering an Appraisal Assignment.

(1) An AMC shall not offer an appraisal assignment to a group of two or more appraisers by broadcasting a simultaneous electronic communication by:

(a) email;

(b) text;

(c) placing the assignment on a web page;

(d) recorded telephone message; or

(e) using any other electronic means of communication.

(2) When offering an appraisal assignment to an individual appraiser by means of any electronic communication:

(a) if the appraisal assignment is offered to the appraiser on a business day, an AMC shall allow the appraiser a minimum of 60 minutes to respond to the communication and accept the assignment;

(b) if the appraisal assignment is offered on a day other than a business day, an AMC shall allow the appraiser until 9:00 A.M. Mountain Time on the next business day to respond to the communication and accept the assignment.

(3) If the appraiser declines an assignment or does not respond within the time allotted in Subsection (2) for response, the AMC may offer the assignment to another appraiser.

(4) If an AMC uses delivery time of the completed appraisal report to the AMC in ranking an appraiser or in a tiered panel model, the AMC shall use only business days in the time calculation.

KEY: administrative proceedings, appraisal management company, conduct, registration

Date of Enactment or Last Substantive Amendment: ~~January 28, 2015~~ 2017

Notice of Continuation: April 17, 2015

Authorizing, and Implemented or Interpreted Law: 61-2e-102(4); 61-2e-103; 61-2e-307; 61-2e-305; 61-2e-402(1)

Education, Administration
R277-404
Requirements for Assessments of Student Achievement

NOTICE OF PROPOSED RULE

(Amendment)

DAR FILE NO.: 41033

FILED: 11/29/2016

RULE ANALYSIS

PURPOSE OF THE RULE OR REASON FOR THE CHANGE: Rule R277-404 is amended to provide updated terminology and an updated revision date for a policy incorporated by reference under this rule.

SUMMARY OF THE RULE OR CHANGE: The changes to Rule R277-404 provide updated terminology to the "Benchmark reading assessment" definition; and provide a

revision date change for the "Standard Test Administration and Testing Ethics Policy" from 01/07/2016 to 09/09/2016. The changes to the "Standard Test Administration and Testing Ethics Policy" are slight wording changes and nonsubstantive.

STATUTORY OR CONSTITUTIONAL AUTHORIZATION FOR THIS RULE: Art X, Sec 3 and Section 53A-1-401 and Sections 53A-1-603 through 53A-1-611 and Subsection 53A-15-1403(9)(b)

MATERIALS INCORPORATED BY REFERENCE:

- ◆ Updates Standard Test Administration and Testing Ethics Policy, published by Utah State Board of Education, 09/09/2016

ANTICIPATED COST OR SAVINGS TO:

- ◆ **THE STATE BUDGET:** The amendments to Rule R277-404 provide an updated definition and a revision date change, which likely will not result in a cost or savings to the state budget.
- ◆ **LOCAL GOVERNMENTS:** The amendments to Rule R277-404 provide an updated definition and a revision date change, which likely will not result in a cost or savings to local government.
- ◆ **SMALL BUSINESSES:** The amendments to Rule R277-404 provide an updated definition and a revision date change, which likely will not result in a cost or savings to small businesses.
- ◆ **PERSONS OTHER THAN SMALL BUSINESSES, BUSINESSES, OR LOCAL GOVERNMENTAL ENTITIES:** The amendments to Rule R277-404 provide an updated definition and a revision date change, which likely will not result in a cost or savings to persons other than small businesses, businesses, or local government entities.

COMPLIANCE COSTS FOR AFFECTED PERSONS: The amendments to Rule R277-404 provide an updated definition and a revision date change, which likely will not result in any compliance costs for affected persons.

COMMENTS BY THE DEPARTMENT HEAD ON THE FISCAL IMPACT THE RULE MAY HAVE ON BUSINESSES: To the best of my knowledge, there should be no fiscal impact on businesses resulting from the amendments to this rule.

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

EDUCATION
ADMINISTRATION
250 E 500 S
SALT LAKE CITY, UT 84111-3272
or at the Office of Administrative Rules.

DIRECT QUESTIONS REGARDING THIS RULE TO:

- ◆ Angela Stallings by phone at 801-538-7656, by FAX at 801-538-7768, or by Internet E-mail at angie.stallings@schools.utah.gov

INTERESTED PERSONS MAY PRESENT THEIR VIEWS ON THIS RULE BY SUBMITTING WRITTEN COMMENTS NO LATER THAN AT 5:00 PM ON 01/17/2017

THIS RULE MAY BECOME EFFECTIVE ON: 01/24/2017

AUTHORIZED BY: Angela Stallings, Deputy Superintendent, Policy and Communication

R277. Education, Administration.

R277-404. Requirements for Assessments of Student Achievement.

R277-404-1. Authority and Purpose.

- (1) This rule is authorized by:
 - (a) Utah Constitution Article X, Section 3, which vests general control and supervision over public education in the Board;
 - (b) Sections 53A-1-603 through 53A-1-611, which direct the Board to adopt rules for the maintenance and administration of U-PASS;
 - (c) Subsection 53A-15-1403(9)(b), which requires the Board to adopt rules to establish a statewide procedure for excusing a student from taking certain assessments; and
 - (d) Section 53A-1-401, which allows the Board to make rules to execute the Board's duties and responsibilities under the Utah Constitution and state law.
- (2) The purpose of this rule is to:
 - (a) provide consistent definitions; and
 - (b) assign responsibilities and procedures for a Board developed and directed comprehensive assessment system for all students, as required by state and federal law.

R277-404-2. Definitions.

- (1) "Benchmark reading assessment" means the ~~[Dynamic Indicators of Basic Early Literacy Skills or DIBELS]~~ Board approved literacy assessment that is administered to a student in grade 1, grade 2, and grade 3 at the beginning, middle, and end of year.
- (2) "College readiness assessment" means the American College Testing exam, or ACT.
- (3) "English Learner" or "EL" student" means a student who is learning in English as a second language.
- (4) "English language proficiency assessment" means the World-class Instructional Design and Assessment (WIDA) Assessing Comprehension in English State-to-State (ACCESS), which is designed to measure the acquisition of the academic English language for an English Learner student.
- (5) "Family Educational Rights and Privacy Act of 1974" or "FERPA," 20 U.S.C. 1232g, means a federal law designed to protect the privacy of students' education records.
- (6) "National Assessment of Education Progress" or "NAEP" means the national achievement assessment administered by the United States Department of Education to measure and track student academic progress.
- (7) "Online writing assessment" means the SAGE writing portion of the SAGE English Language Arts Assessment that measures writing performance for a student in grades 3 through 11.

(8) "Pre-post assessment" means an assessment administered at the beginning of the school year and at the end of the school year to determine individual student growth in academic proficiency that has occurred during the school year.

(9) "State required assessment" means an assessment described in Subsection 53A-15-1403(9)(a).

(10) "Student Assessment of Growth and Excellence" or "SAGE" means a computer adaptive assessment for:

(a) English language arts grades 3 through 11;

(b) mathematics:

(i) grades 3 through 8; and

(ii) Secondary I, II, and III; and

(c) science:

(i) grades 4 through 8;

(ii) earth science;

(iii) biology;

(iv) physics; and

(v) chemistry.

(11) "Section 504 accommodation plan" means a plan:

(a) required by Section 504 of the Rehabilitation Act of 1973; and

(b) designed to accommodate an individual who has been determined, as a result of an evaluation, to have a physical or mental impairment that substantially limits one or more major life activities.

(12) "Summative adaptive assessment" means the SAGE assessment, which:

(a) is administered upon completion of instruction to assess a student's achievement;

(b) is administered online under the direct supervision of a licensed educator;

(c) is designed to identify student achievement on the standards for the respective grade and course; and

(d) measures a range of student ability, within the grade or course level standards the student was taught, by adapting to each student's responses, selecting more difficult questions when a student answers correctly and less difficult questions when a student answers incorrectly.

(13)(a) "Utah alternate assessment" means an assessment instrument:

(i) for a student in special education with a disability so severe the student is not able to participate in the components of U-PASS even with an assessment accommodation or modification; and

(ii) that measures progress on the Utah core instructional goals and objectives in the student's IEP.

(b) "Utah alternate assessment" means:

(i) for science, the Utah Alternate Assessment (UAA); and

(ii) for English language arts and mathematics, the Dynamic Learning Maps (DLM).

(14) "Utah eTranscript and Record Exchange" or "UTREx" means a system that allows:

(a) an LEA and the Superintendent to electronically exchange an individual detailed student record; and

(b) electronic transcripts to be sent to any post-secondary institution, private or public, in-state or out-of-state, that participates in the e-transcript service.

(15) "Utah Performance Assessment System for Students" or "U-PASS" means:

(a) the summative adaptive assessment of a student in grades 3 through 12 in basic skills courses;

(b) the online writing assessment in grades 3 through 11;

(c) the college readiness assessment; and

(d) the summative assessment of a student in grade 3 to measure reading grade level using the end of year benchmark reading assessment.

R277-404-3. Incorporation of Standard Test Administration and Testing Ethics Policy by Reference.

(1) This rule incorporates by reference the Standard Test Administration and Testing Ethics Policy, [~~January 7~~September 9, 2016, which establishes:

(a) the purpose of testing;

(b) the state assessments to which the policy applies;

(c) teaching practices before assessment occurs;

(d) required procedures for after an assessment is complete and for providing assessment results;

(e) unethical practices;

(f) accountability for ethical test administration;

(g) procedures related to ethics violations; and

(h) additional resources.

(2) A copy of the Standard Test Administration and Testing Ethics Policy is located at:

(a)

[http://www.schools.utah.gov/assessment/Directors/Resources\[EthicsPolicy\].aspx](http://www.schools.utah.gov/assessment/Directors/Resources[EthicsPolicy].aspx); and

(b) the Utah State Board of Education - 250 East 500 South, Salt Lake City, Utah 84111.

R277-404-4. Assessment System - Superintendent Responsibilities.

(1) The Board's comprehensive assessment system for all students in grades K-12 includes:

(a) the U-PASS assessments;

(b) pre-post kindergarten assessment for a kindergarten student as determined by the LEA;

(c) the benchmark reading assessment;

(d) the Utah alternate assessment, for an eligible student with a disability;

(e) the English language proficiency assessment;

(f) the National Assessment of Educational Progress (NAEP); and

(g) reporting by the Superintendent of U-PASS results.

(2) The report required by Subsection(1)(g) shall include:

(a) student performance based on information that is disaggregated with respect to race, ethnicity, gender, English proficiency, eligibility for special education services, and free or reduced price school lunch status;

(b) security features to maintain the integrity of the system, including statewide uniform assessment dates, assessment administration protocols, and training; and

(c) summative adaptive assessment results disseminated by the Superintendent to an LEA, parent, and other, as appropriate, consistent with FERPA.

(3) The Superintendent shall provide guidelines, timelines, procedures, and assessment ethics training and requirements for all required assessments.

(4) The Superintendent shall designate a testing schedule for each state-required assessment and publish the testing window dates on the Board's website before the beginning of the school year.

R277-404-5. LEA Responsibilities - Time Periods for Assessment Administration.

(1) Except as provided in Section 53A-1-603, an LEA shall develop a comprehensive assessment system plan to include the assessments described in Subsection R277-404-5(1).

(2) The plan shall include:

(a) the dates that the LEA will administer each required assessment;

(b) if the LEA decided to offer its grade 11 students only the college readiness assessment and not the SAGE assessment;

(c) professional development for an educator to fully implement the assessment system;

(d) training for an educator and an appropriate paraprofessional in the requirements of assessment administration ethics;

(e) training for an educator and an appropriate paraprofessional to utilize assessment results effectively to inform instruction; and

(f) adequate oversight of test administration to ensure compliance with Section 53A-1-603 as follows:

(i) an LEA or online provider shall test all enrolled students unless a student has a written parental excuse under Subsection 53A-15-1403(9);

(ii) a student participating in the Statewide Online Education Program is assessed consistent with Section 53A-15-1210; and

(iii) a third party vendor or contractor may not administer or supervise U-PASS.

(3) An LEA shall submit the plan to the Superintendent by September 15 annually.

(4) At least once each school year, an LEA shall provide professional development for all educators, administrators, and standardized assessment administrators concerning guidelines and procedures for standardized assessment administration, including educator responsibility for assessment security and proper professional practices.

(5) LEA assessment staff shall use the Standard Test Administration and Testing Ethics Policy in providing training for all assessment administrators and proctors.

(6) An LEA may not release state assessment data publicly until authorized to do so by the Superintendent.

(7) An LEA educator or trained employee shall administer assessments required under R277-404-5 consistent with the testing schedule published on the Board's website.

(8) An LEA educator or trained employee shall complete all required assessment procedures prior to the end of the assessment window defined by the Superintendent.

(9)(a) If an LEA requires an alternative schedule with assessment dates outside of the Superintendent's published schedule, the LEA shall submit the alternative testing plan to the Superintendent by September 15 annually.

(b) The alternative testing plan shall set dates for summative adaptive assessment administration for courses taught face to face or online.

R277-404-6. School Responsibilities.

(1) An LEA, school, or educator may not use a student's score on a state required assessment to determine:

(a) the student's academic grade, or a portion of the student's academic grade, for the appropriate course; or

(b) whether the student may advance to the next grade level.

(2) An LEA and school shall require an educator and assessment administrator and proctor to individually sign the Testing Ethics signature page provided by Superintendent acknowledging or assuring that the educator administers assessments consistent with ethics and protocol requirements.

(3) All educators and assessment administrators shall conduct assessment preparation, supervise assessment administration, and certify assessment results before providing results to the Superintendent.

(4) All educators and assessment administrators and proctors shall securely handle and return all protected assessment materials, where instructed, in strict accordance with the procedures and directions specified in assessment administration manuals, LEA rules and policies, and the Standard Test Administration and Testing Ethics Policy.

(5) A student's IEP, EL, or Section 504 accommodation plan team shall determine an individual student's participation in statewide assessments consistent with the Utah Participation and Accommodations Policy.

R277-404-7. Student and Parent Participation in Student Assessments in Public Schools; Parental Exclusion from Testing and Safe Harbor Provisions.

(1)(a) Parents are primarily responsible for their children's education and have the constitutional right to determine which aspects of public education, including assessment systems, in which their children participate.

(b) Parents may further exercise their inherent rights to exempt their children from a state required assessment without further consequence by an LEA.

(2) An LEA shall administer state required assessments to all students unless:

(a) the Utah alternate assessment is approved for specific students consistent with federal law and as specified in the student's IEP; or

(b) students are excused by a parent or guardian under Section 53A-15-1403(9) and as provided in this rule.

(3)(a) A parent may exercise the right to exempt their child from a state required assessment.

(b) Except as provided in Subsection (3)(c), upon exercising the right to exempt a child from a state required assessment under this provision, an LEA may not impose an adverse consequence on a child as a result of the exercise of rights under this provision.

(c) If a parent exempts the parent's child from the basic civics test required in Sections 53A-13-109.5 and R277-700-8, the parent's child is not exempt from the graduation requirement in Subsection 53A-13-109.5(2), and may not graduate without

successfully completing the requirements of Sections 53A-13-109.5 and R277-700-8.

(4)(a) In order to exercise the right to exempt a child from a state required assessment under this provision and insure the protections of this provision, a parent shall:

(i) fill out:

(A) the Parental Exclusion from State Assessment Form provided on Board's website; or

(B) an LEA specific form as described in Subsection (4)(b); and

(ii) submit the form:

(A) to the principal or LEA either by email, mail, or in person; and

(B) on an annual basis and at least one day prior to beginning of the assessment.

(b) An LEA may create an LEA specific form for a parent to fill out as described in Subsection (4)(a)(i)(B) if:

(i) the LEA includes a list of local LEA assessments that a parent may exempt the parent's student from as part of the LEA's specific form; and

(ii) the LEA's specific form includes all of the information described in the Parental Exclusion from State Assessment Form provided on Board's website as described in Subsection (4)(a)(i)(A).

(5)(a) A teacher, principal, or other LEA administrator may contact a parent to verify that the parent submitted a parental exclusion form described in Subsection (4)(a)(i).

(b) An LEA may request, but may not require, a parent to meet with a teacher, principal, or other LEA administrator regarding the parent's request to exclude the parent's student from taking a state required assessment.

(6) School grading, teacher evaluations, and student progress reports or grades may not be negatively impacted by students excused from taking a state required assessment.

(7) Any assessment that is not a state required assessment, the administration of the assessments, and the consequence of taking or failing to take the assessments is governed by policy adopted by each LEA.

(8) An LEA shall provide a student's individual test results and scores to the student's parent or guardian upon request and consistent with the protection of student privacy.

(9) An LEA may not reward a student for taking a state required assessment.

R277-404-8. Public Education Employee Compliance with Assessment Requirements, Protocols, and Security.

(1) An educator, test administrator or proctor, administrator, or school employee may not:

(a) provide a student directly or indirectly with a specific question, answer, or the content of any specific item in a standardized assessment prior to assessment administration;

(b) download, copy, print, take a picture of, or make any facsimile of protected assessment material prior to, during, or after assessment administration without express permission of the Superintendent and an LEA administrator;

(c) change, alter, or amend any student online or paper response any other standardized assessment material at any time in a way that alters the student's intended response;

(d) use any prior form of any standardized assessment, including pilot assessment materials, that the Superintendent has not released in assessment preparation without express permission of the Superintendent and an LEA administrator;

(e) violate any specific assessment administrative procedure specified in the assessment administration manual, violate any state or LEA standardized assessment policy or procedure, or violate any procedure specified in the Standard Test Administration and Testing Ethics Policy;

(f) fail to administer a state required assessment;

(g) fail to administer a state required assessment within the designated assessment window;

(h) submit falsified data;

(i) allow a student to copy, reproduce, or photograph an assessment item or component; or

(j) knowingly do anything that would affect the security, validity, or reliability of standardized assessment scores of any individual student, class, or school.

(2) A school employee shall promptly report an assessment violation or irregularity to a building administrator, an LEA superintendent or director, or the Superintendent.

(3) An educator who violates this rule or an assessment protocol is subject to Utah Professional Practices Advisory Commission or Board disciplinary action consistent with R277-515.

(4) All assessment material, questions, and student responses for required assessments is designated protected, consistent with Section 63G-2-305, until released by the Superintendent.

(5)(a) Each LEA shall ensure that all assessment content is secured so that only authorized personnel have access and that assessment materials are returned to Superintendent following testing, as required by the Superintendent.

(b) An individual educator or school employee may not retain or distribute test materials, in either paper or electronic form, for purposes inconsistent with ethical test administration or beyond the time period allowed for test administration.

R277-404-9. Data Exchanges.

(1) The Board's IT Section shall communicate regularly with an LEA regarding the required format for electronic submission of required data.

(2) An LEA shall update UTREx data using the processes and according to schedules determined by the Superintendent.

(3) An LEA shall ensure that any computer software for maintaining or submitting LEA data is compatible with data reporting requirements established in Rule R277-484.

(4) The Superintendent shall provide direction to an LEA detailing the data exchange requirements for each assessment.

(5) An LEA shall ensure that all summative testing data have been collected and certify that the data are ready for accountability purposes no later than July 12.

(6) An LEA shall verify that it has satisfied all the requirements of the Superintendent's directions described in this section.

(7) Consistent with Utah law, the Superintendent shall return assessment results from all required assessments to the school before the end of the school year.

KEY: assessments, student achievements

Date of Enactment or Last Substantive Amendment: [~~August 11, 2016~~2017]

Notice of Continuation: November 29, 2016

Authorizing, and Implemented or Interpreted Law: Art X Sec 3; 53A-1-603 through 53A-1-611; 53A-1-401[(3)]

**Health, Disease Control and
Prevention, Epidemiology
R386-702
Communicable Disease Rule**

NOTICE OF PROPOSED RULE

(Amendment)

DAR FILE NO.: 41038

FILED: 12/01/2016

RULE ANALYSIS

PURPOSE OF THE RULE OR REASON FOR THE CHANGE: This amendment will provide for updates related to 2016 Council of State and Territorial Epidemiologists (CSTE) approved position statements. In addition, significant updates have been made to format in order to improve readability of the rule. Expansion of definitions, along with general edits and updates to improve format and accuracy of language, are proposed. Proposed changes were sent to local health department, infection control, and laboratory partners informally prior to finalizing this revision in order to solicit and include input from these critical partners.

SUMMARY OF THE RULE OR CHANGE: Primary changes proposed in this rule amendment include: 1) making the definitions section more robust and comprehensive; 2) reformatting sections, and separating out some sections to clarify requirements for different types of reporters; 3) adding Chikungunya and Zika virus as explicitly reportable conditions under "arboviral disease"; 4) adding non-seasonal influenza as an explicitly notifiable condition under "influenza infections", and adding it explicitly to the list of immediately notifiable conditions; 5) adding scientific names to all conditions and ensuring formatting throughout the list of reportable conditions is consistent; 6) adding a section regarding reporting of pregnancy for certain reportable conditions; 7) adding *C. difficile* and Zika virus to the list of conditions for which all results are reportable by ELR; 8) adding norovirus and liver function tests (LFTs) (for hepatitis) to the electronic laboratory reporting (ELR) section; 9) removing gonorrhea from the mandatory laboratory sample submission section; 10) adding Zika virus to the mandatory laboratory sample submission section; and 11) correcting formatting and wording errors in order to ensure clarity within sections of the rule. In addition, rabies information is updated according to the 2016 Rabies Compendium, and Compendium information is updated in the "References" section of the rule.

STATUTORY OR CONSTITUTIONAL AUTHORIZATION FOR THIS RULE: Section 26-1-30 and Section 26-6-3 and Title 26, Chapter 23b

MATERIALS INCORPORATED BY REFERENCE:

- ◆ Updates Compendium of Animal Rabies Prevention and Control, 2016, published by Journal of American Veterinary Medicine, authored by National Association of State Public Health Veterinarians (NASPHV) Compendium of Animal Rabies Prevention and Control Committee, 03/01/2016

ANTICIPATED COST OR SAVINGS TO:

◆ **THE STATE BUDGET:** The majority of proposed changes provide clarification or improve language and formatting overall and do not represent additional costs or savings beyond some small savings since less time will be required to review and interpret the rule. The two conditions being added to the list of reportable conditions (chikungunya and Zika virus) have already been implicitly reportable as unusual and emerging infections. Therefore, no additional costs or savings are anticipated through adding these conditions. Zika virus positive samples are already being sent to UPHL and CDC for confirmation; therefore, adding this to the mandatory laboratory sample submission list should be cost-neutral since it is formalizing a process already in place. Gonorrhea samples are not reliably sent to UPHL for testing; therefore, removing gonorrhea from the mandatory laboratory sample submission list should be cost-neutral for the state. Changes for electronic reporting are minimal since they entail minor programming changes in order to modify data feeds from reporting facilities, and to modify UDOH's ability to receive data feeds.

◆ **LOCAL GOVERNMENTS:** The main cost that may be incurred by Local Health Departments (LHDs) is personnel time required to manage detected norovirus outbreaks, if identified through ELR. LHD personnel already investigate these outbreaks, however, when detected through alternate means, so this should not represent a large increase in cost. Chikungunya and Zika virus cases are already being reported and investigated; updating the rule to include them as explicitly reportable is formalizing what is already occurring and is anticipated to be cost-neutral.

◆ **SMALL BUSINESSES:** Electronic laboratory reporting is optional, so modifications to electronic laboratory reporting should not incur significant costs for small laboratories unless they are using it already and need to modify codes in order to add in/modify reporting according to proposed changed in conditions. In that case, costs associated with updating programming to identify and report new conditions and remove conditions will be incurred, but it is anticipated that this will result in significant savings over time since reporting is automated, ultimately requiring significantly less personnel time to manage. While significant savings are anticipated over time, it is not possible to accurately estimate actual costs or savings. This is because costs and savings will vary depending on elements within an entity, for example, the size

and workload related to reportable conditions that is already present. Variables also include if, and what, work has already been done to implement and manage electronic laboratory reporting and if a decision is made to implement it.

◆ PERSONS OTHER THAN SMALL BUSINESSES, BUSINESSES, OR LOCAL GOVERNMENTAL ENTITIES: As noted above, the main cost that may be incurred by LHDs is personnel time required to manage detected norovirus outbreaks, if identified through ELR. LHD personnel already investigate these outbreaks, however, when detected through alternate means, so this should not represent a large increase in cost. Chikungunya and Zika virus cases are already being reported and investigated; updating the rule to include them as explicitly reportable is formalizing what is already occurring and is anticipated to be cost-neutral. Electronic laboratory reporting is optional, so modifications to electronic laboratory reporting should not incur significant costs for laboratories unless they are using it already and need to modify codes in order to add in/modify reporting according to proposed changes in conditions. In that case, costs associated with updating programming to identify and report new conditions and remove conditions will be incurred, but it is anticipated that this will result in significant savings over time since reporting is automated, ultimately requiring significantly less personnel time to manage. While significant savings are anticipated over time, it is not possible to accurately estimate actual costs or savings. This is because costs and savings will vary depending on elements within an entity, for example, the size and workload related to reportable conditions that is already present. Variables also include if, and what, work has already been done to implement and manage electronic laboratory reporting, and if a decision is made to implement it.

COMPLIANCE COSTS FOR AFFECTED PERSONS: There are no direct compliance costs associated with this amendment because potential costs are based on optional reporting methods.

COMMENTS BY THE DEPARTMENT HEAD ON THE FISCAL IMPACT THE RULE MAY HAVE ON BUSINESSES: The proposed amendment adds language related to the 2016 Council of State and Territorial Epidemiologists (CSTE) approved position statements. It also makes extensive changes to improve rule organization, formatting, and readability levels, and also makes general technical edits. There is some fiscal impact on business to individuals or entities under this rule because there may be minor programming changes for electronic reporting data feeds and LHDs may incur cost in its personnel time required to manage detected norovirus outbreaks, if identified through ELR.

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

HEALTH
DISEASE CONTROL AND PREVENTION,
EPIDEMIOLOGY
CANNON HEALTH BLDG
288 N 1460 W

SALT LAKE CITY, UT 84116-3231
or at the Office of Administrative Rules.

DIRECT QUESTIONS REGARDING THIS RULE TO:

◆ Melissa Stevens Dimond by phone at 801-538-6810, by FAX at 801-538-9923, or by Internet E-mail at melissastevens@utah.gov or mail at PO BOX 142104, Salt Lake City, UT 84114-2104

INTERESTED PERSONS MAY PRESENT THEIR VIEWS ON THIS RULE BY SUBMITTING WRITTEN COMMENTS NO LATER THAN AT 5:00 PM ON 01/17/2017

THIS RULE MAY BECOME EFFECTIVE ON: 01/24/2017

AUTHORIZED BY: Joseph Miner, MD, Executive Director

R386. Health, Disease Control and Prevention, Epidemiology.

R386-702. Communicable Disease Rule.

R386-702-1. Purpose Statement.

(1) The Communicable Disease Rule is adopted under authority of Sections 26-1-30, 26-6-3, and 26-23b.

(2) This rule outlines a multidisciplinary approach to communicable and infectious disease control and emphasizes reporting, surveillance, isolation, treatment and epidemiological investigation to identify and control preventable causes of infectious diseases. Reporting requirements and authorizations are specified for communicable and infectious diseases, outbreaks, and unusual occurrence of any disease. Each section has been adopted with the intent of reducing disease morbidity and mortality through the rapid implementation of established practices and procedures.

(3) The successes of medicine and public health dramatically reduced the risk of epidemics and early loss of life due to infectious agents during the twentieth century. However, the emergence of diseases such as Middle Eastern Respiratory Syndrome (MERS), and the rapid spread of diseases such as West Nile virus to the United States from other parts of the world, made possible by advances in transportation, trade, food production, and other factors, highlight the continuing threat to health from infectious diseases. Continual attention to these threats and cooperation among all health care providers, government agencies, and other entities that are partners in protecting the public's health are crucial to maintain and improve the health of the citizens of Utah.

R386-702-2. Definitions.

~~[(1) Terms in this rule are defined in Section 26-6-2 and 26-23b-102, except that for purposes of this rule, "Department" means the Utah Department of Health.~~

~~(2) In addition, for purposes of this rule:~~

~~(a) "Outbreak" means an increase in incidence of disease, or two or more cases of disease with a common exposure.~~

~~(b) "Case" means a person identified as having a disease, health disorder, or condition that meets criteria for being reportable under this rule, or that is otherwise under public health investigation.~~

~~(c) "Suspect case" means a person who a reporting entity, local health department, or Department believes might be a case,~~

but for whom it has not been established that the criteria necessary to become a case have been met.

~~(d) "Good Samaritan" means a person who gives reasonable aid to strangers in grave physical distress.]~~

~~(1) Terms in this rule defined in Section 26-6-2:~~

~~(a) Carrier~~

~~(b) Communicable disease~~

~~(c) Contact~~

~~(d) Epidemic~~

~~(e) Infection~~

~~(f) Schools~~

~~(2) Terms in this rule defined in Section 26-6-6:~~

~~(a) Health care provider~~

~~(3) Terms in this rule defined in Section 26-21-2:~~

~~(a) Assisted living facilities~~

~~(b) Nursing care facilities~~

~~(4) Terms in this rule defined in Section 26-23b-102:~~

~~(a) Bioterrorism~~

~~(5) Terms in this rule defined in Section 26-39-102:~~

~~(a) Childcare programs~~

~~(6) Terms in this rule defined in Section 78B-3-403:~~

~~(a) Health care facilities~~

~~(7) Terms in this rule defined in Section 62A-15-602:~~

~~(a) Mental health facilities~~

~~(8) Terms in this rule defined in Section R386-80-2:~~

~~(a) Local health department~~

~~(9) In addition, for purposes of this rule:~~

~~(a) "Blood and plasma center" is defined as a blood bank, blood storage facility, plasma center, hospital, any another facility where blood or blood products are collected, or any facility where blood services are provided.~~

~~(b) "Care facilities licensed through the Department of Human Services" is described as any facility licensed through the Utah Department of Human Services, and includes adult day care facilities, adult foster care facilities, crisis respite facilities, domestic violence shelters and treatment programs, foster care homes, mental health treatment programs, residential treatment and day treatment facilities for persons with disabilities, substance abuse treatment programs, and youth treatment programs.~~

~~(c) "Case" is defined as any person, living or deceased, identified as having a communicable disease, condition, or syndrome that meets criteria for being reportable under this rule, or that is otherwise under public health investigation.~~

~~(d) "Clinic" is defined as any facility where a health care provider practices.~~

~~(e) "Condition" is defined as an abnormal state of health that may interfere with a person's regular feelings of wellbeing.~~

~~(f) "Correctional facility" is defined as an facility that forcibly confines an individual under the authority of the government, including but not limited to prisons, detention centers, jails, juvenile detention centers.~~

~~(g) "Department" is defined as the Utah Department of Health.~~

~~(h) "Diagnostic facility" is defined as the facility where the case or suspect case was seen and evaluated by a healthcare provider.~~

~~(i) "Dispensary" is defined as an office in a school, hospital, industrial plant, or other organization that dispenses medications or medical supplies.~~

~~(j) "Electronic reporting" is defined as the transmission of laboratory or health related data from reporting entities to the Department using standard message structure and vocabulary, and do not require any hand keying for data to be incorporated into Department databases.~~

~~(k) "Encounter" is defined as an instance of an individual presenting to a health care facility.~~

~~(l) "Event" is defined as any communicable disease, condition, laboratory result, syndrome, outbreak, epidemic, or other public health hazard that meets criteria for being reportable under this rule.~~

~~(m) "Good Samaritan" is defined as a person who gives reasonable aid to strangers in grave physical distress.~~

~~(n) "Invasive disease" is defined as infection occurring in parts of the body where organisms are not normally present, such as the bloodstream, organs, or the meninges.~~

~~(o) "Laboratory" is defined as any facility that receives, refers, or analyzes clinical specimens.~~

~~(p) "Manual reporting" is defined as the transmission of laboratory or health related data from reporting entities to the Department using processes that require hand keying for data to be incorporated into Department databases.~~

~~(q) "Normally sterile site" is defined as a part of the body where organisms are not normally present, such as the bloodstream, organs, or the meninges.~~

~~(r) "Outbreak" is defined as the increased occurrence of any communicable disease, health condition, or syndrome in a community, institution, or region; or two or more cases of a communicable disease, health condition, or syndrome in persons with a common exposure.~~

~~(s) "Public health hazard" is defined as the presence of an infectious organism or condition in the environment which endangers the health of a specified population.~~

~~(t) "Suspect case" is defined as any person, living or deceased, who a reporting entity, local health department, or the Department believes might be a case, but for whom it has not been established that the criteria necessary to become a case have been met.~~

~~(u) "Syndrome" is defined as a set of signs or symptoms that often occur together.~~

R386-702-3. Reportable Events[Diseases, Emergency Illnesses, and Health Conditions].

~~(1) The [Utah]Department[~~of Health~~] declares the following [~~conditions~~]events to be of concern to public health and report[~~able~~]ing [a]is required or authorized by Sections 26-6-6 and [Title]26[~~, Chapter~~]23b[~~of the Utah Health Code~~].~~

~~(a) Acinetobacter species, from any clinical specimen, that is resistant to at least one carbapenem-class antibiotic, or that has demonstrated carbapenemase production~~

~~(b) Acquired Immunodeficiency Syndrome~~

~~(c) Acute Flaccid Myelitis (AFM)~~

~~(d) Adverse event resulting from smallpox vaccination~~

~~(e) Anaplasmosis~~

~~(f) Anthrax~~

~~(g) Arbovirus infection, including Saint Louis encephalitis and West Nile virus infection~~

~~(h) Babesiosis~~

~~(i) Botulism~~

- ~~_____ (j) Brucellosis~~
- ~~_____ (k) Campylobacteriosis~~
- ~~_____ (l) Chaneroid~~
- ~~_____ (m) Chickenpox~~
- ~~_____ (n) Chlamydia trachomatis infection~~
- ~~_____ (o) Cholera~~
- ~~_____ (p) Clostridium difficile, reported via electronic laboratory reporting (ELR) only. Applicable only to laboratories and hospitals currently participating in ELR.~~
- ~~_____ (q) Coccidioidomycosis~~
- ~~_____ (r) Colorado tick fever~~
- ~~_____ (s) Creutzfeldt-Jakob disease and other transmissible human spongiform encephalopathies~~
- ~~_____ (t) Cryptosporidiosis~~
- ~~_____ (u) Cyclospora infection~~
- ~~_____ (v) Cytomegalovirus (CMV), congenital, via ELR (see Utah Administrative Rule R398-4-5 and R386-702-4 (2)(b))~~
- ~~_____ (w) Dengue fever~~
- ~~_____ (x) Diphtheria~~
- ~~_____ (y) Ehrlichiosis, human granulocytic, human monocytic, or unspecified~~
- ~~_____ (z) Encephalitis~~
- ~~_____ (aa)(1) Escherichia coli, from any clinical specimen, that is resistant to at least one carbapenem-class antibiotic, or that has demonstrated carbapenemase production~~
- ~~_____ (aa)(2) Shiga toxin-producing Escherichia coli (STEC) infection~~
- ~~_____ (bb) Enterobacter species, from any clinical specimen, that is resistant to at least one carbapenem-class antibiotic, or that has demonstrated carbapenemase production~~
- ~~_____ (cc) Giardiasis~~
- ~~_____ (dd) Gonorrhea: sexually transmitted and ophthalmia neonatorum~~
- ~~_____ (ee) Haemophilus influenzae, invasive disease~~
- ~~_____ (ff) Hansen Disease (Leprosy)~~
- ~~_____ (gg) Hantavirus pulmonary syndrome (Sin Nombre virus)~~
- ~~_____ (hh) Hemolytic Uremic Syndrome, postdiarrheal~~
- ~~_____ (ii) Hepatitis A~~
- ~~_____ (jj) Hepatitis B, acute, chronic, and perinatal~~
- ~~_____ (kk) Hepatitis C~~
- ~~_____ (ll) Hepatitis, other viral~~
- ~~_____ (mm)(1) Human Immunodeficiency Virus Infection. Special measures for the control of HIV/AIDS are included in R386-702-9.~~
- ~~_____ (nn)(2) Pregnancy in a HIV case~~
- ~~_____ (oo) Influenza-associated hospitalization~~
- ~~_____ (pp) Influenza-associated death, in a person less than 18 years of age~~
- ~~_____ (qq) Klebsiella species, from any clinical specimen, that is resistant to at least one carbapenem-class antibiotic, or that has demonstrated carbapenemase production~~
- ~~_____ (rr) Legionellosis~~
- ~~_____ (ss) Leptospirosis~~
- ~~_____ (tt) Listeriosis~~
- ~~_____ (uu) Lyme Disease~~
- ~~_____ (vv) Malaria~~
- ~~_____ (ww) Measles~~
- ~~_____ (xx) Meningitis (aseptic, bacterial, fungal, parasitic, protozoan, and viral)~~

- ~~_____ (yy) Meningococcal Disease~~
- ~~_____ (zz) Mumps~~
- ~~_____ (aaa) Mycobacteria other than tuberculosis~~
- ~~_____ (bbb) Norovirus, outbreaks only~~
- ~~_____ (ccc) Pertussis~~
- ~~_____ (ddd) Plague~~
- ~~_____ (eee) Poliomyelitis, paralytic and nonparalytic~~
- ~~_____ (fff) Psittacosis~~
- ~~_____ (ggg) Q Fever (Coxiella infection)~~
- ~~_____ (hhh) Rabies, human and animal~~
- ~~_____ (iii) Relapsing fever, tick-borne and louse-borne~~
- ~~_____ (jjj) Rubella, including congenital syndrome~~
- ~~_____ (kkk) Salmonellosis~~
- ~~_____ (lll) Severe Acute Respiratory Syndrome (SARS)~~
- ~~_____ (mmm) Shigellosis~~
- ~~_____ (nnn) Smallpox~~
- ~~_____ (ooo) Spotted fever rickettsioses (including Rocky Mountain Spotted Fever)~~
- ~~_____ (ppp) Staphylococcus aureus from any clinical specimen with resistance or intermediate resistance to vancomycin isolated from any site~~
- ~~_____ (qqq)(1) Streptococcal disease, invasive, due to Streptococcus pneumoniae and Groups A and B isolated from a normally sterile site~~
- ~~_____ (qqq)(2) Streptococcal disease, invasive, other, reported via ELR only. Applicable only to laboratories and hospitals currently participating in ELR.~~
- ~~_____ (rrr) Syphilis, all stages and congenital~~
- ~~_____ (sss) Tetanus~~
- ~~_____ (ttt) Toxic Shock Syndrome, staphylococcal or streptococcal~~
- ~~_____ (uuu) Trichinellosis~~
- ~~_____ (vvv) Tuberculosis. Special Measures for the Control of Tuberculosis are listed in R388-804.~~
- ~~_____ (www) Tularemia~~
- ~~_____ (xxx) Typhoid, cases and carriers~~
- ~~_____ (yyy) Vibriosis~~
- ~~_____ (zzz) Viral hemorrhagic fever~~
- ~~_____ (aaaa) Yellow fever~~
- ~~_____ (bbbb) Any unusual occurrence of infectious or communicable disease or any unusual or increased occurrence of any illness that may indicate a bioterrorism event or public health hazard, including any single case or multiple cases of a newly recognized, emergent or re-emergent disease or disease-producing agent, including newly identified multi-drug resistant bacteria or a novel influenza strain such as a pandemic influenza strain.~~
- ~~_____ (cccc) Any outbreak, epidemic, or unusual or increased occurrence of any illness that may indicate an outbreak or epidemic. This includes suspected or confirmed outbreaks of foodborne disease, waterborne disease, meningitis, encephalitis, disease caused by antimicrobial resistant organisms, any infection that may indicate a bioterrorism event, or of any infection that may indicate a public health hazard.~~
- ~~_____ (2) In addition to the reportable conditions set forth in R386-702-3(1) the Department declares the following reportable emergency illnesses, health conditions, and patient encounter information to be of public health importance and reporting is authorized by Title 26, Chapter 23b, Utah Code, unless made mandatory by the declaration of a public health emergency:~~

~~(a) respiratory illness (including upper or lower respiratory tract infections, difficulty breathing and Adult Respiratory Distress Syndrome);~~

~~(b) gastrointestinal illness (including vomiting, diarrhea, abdominal pain, or any other gastrointestinal distress);~~

~~(c) influenza-like constitutional symptoms and signs;~~

~~(d) neurologic symptoms or signs indicating the possibility of meningitis, encephalitis, or unexplained acute encephalopathy or delirium;~~

~~(e) rash illness;~~

~~(f) hemorrhagic illness;~~

~~(g) botulism-like syndrome;~~

~~(h) lymphadenitis;~~

~~(i) sepsis or unexplained shock;~~

~~(j) febrile illness (illness with fever, chills or rigors);~~

~~(k) nontraumatic coma or sudden death;~~

~~(l) other criteria specified by the Department as indicative of disease outbreaks or injurious exposures of uncertain origin; and~~

~~(m) patient encounter data including, but not limited to, chief complaint and discharge diagnosis data from healthcare settings which support early identification and ruling out of public health threats, disasters, disease outbreaks, suspected incidents, and acts of bioterrorism; assist in characterizing population groups at greatest risk for disease or injury; support assessment of the severity and magnitude of possible threats; or satisfy syndromic surveillance objectives of the Federal Centers for Medicaid and Medicare-Meaningful Use incentive program.]~~

~~(2) Events Reportable by All Entities.~~

~~(a) Acute flaccid myelitis;~~

~~(b) Adverse event resulting from smallpox vaccination (Vaccinia virus, Orthopox virus);~~

~~(c) Anaplasmosis (Anaplasma phagocytophilum);~~

~~(d) Anthrax (Bacillus anthracis);~~

~~(e) Antibiotic resistant organisms from any clinical specimen that meet the following criteria:~~

~~(i) Resistant to a carbapenem, or with demonstrated carbapenemase, in:~~

~~(A) Acinetobacter species,~~

~~(B) Enterobacter species,~~

~~(C) Escherichia coli, or~~

~~(D) Klebsiella species.~~

~~(ii) Resistant or intermediate resistant to vancomycin in:~~

~~(A) Staphylococcus aureus (VISA/VRSA);~~

~~(f) Arbovirus infection, including but not limited to:~~

~~(i) Chikungunya virus infection,~~

~~(ii) West Nile virus infection, and~~

~~(iii) Zika virus infection, including congenital;~~

~~(g) Babesiosis (Babesia spp.);~~

~~(h) Botulism (Clostridium botulinum);~~

~~(i) Brucellosis (Brucella spp.);~~

~~(j) Campylobacteriosis (Campylobacter spp.);~~

~~(k) Chancroid (Haemophilus ducreyi);~~

~~(l) Chickenpox (Varicella zoster virus, VZV, Human herpesvirus 3, HHV-3);~~

~~(m) Chlamydia (Chlamydia trachomatis);~~

~~(n) Coccidioidomycosis (Coccidioides spp.), also known as valley fever;~~

~~(o) Colorado tick fever (Colorado tick fever virus, Coltivirus spp.), also known as American mountain tick fever;~~

~~(p) Cryptosporidiosis (Cryptosporidium spp.);~~

~~(q) Cyclosporiasis (Cyclospora spp., including Cyclospora cayetanensis);~~

~~(r) Dengue fever (Dengue virus);~~

~~(s) Diphtheria (Corynebacterium diphtheriae);~~

~~(t) Ehrlichiosis (Ehrlichia spp.);~~

~~(u) Encephalitis;~~

~~(v) Shiga toxin-producing Escherichia coli (STEC) infection;~~

~~(w) Giardiasis (Giardia lamblia), also known as beaver fever;~~

~~(x) Gonorrhea (Neisseria gonorrhoeae), including sexually transmitted and ophthalmia neonatorum;~~

~~(y) Haemophilus influenzae, invasive disease;~~

~~(z) Hantavirus infection (Sin Nombre virus);~~

~~(aa) Hemolytic uremic syndrome, postdiarrheal;~~

~~(bb) Hepatitis, viral, including but not limited to:~~

~~(i) Hepatitis A,~~

~~(ii) Hepatitis B (acute, chronic, and perinatal),~~

~~(iii) Hepatitis C,~~

~~(iv) Hepatitis D, and~~

~~(v) Hepatitis E;~~

~~(cc) Human immunodeficiency virus (HIV) infection, including acquired immune deficiency syndrome (AIDS) diagnosis;~~

~~(dd) Influenza virus infection:~~

~~(i) Associated with a hospitalization,~~

~~(ii) Associated with a death in a person under 18 years of age, or~~

~~(iii) Suspected or confirmed to be caused by a non-seasonal influenza strain;~~

~~(ee) Legionellosis (Legionella spp.), also known as Legionnaires' disease;~~

~~(ff) Leptospirosis (Leptospira spp.);~~

~~(gg) Listeriosis (Listeria spp., including Listeria monocytogenes);~~

~~(hh) Lyme disease (Borrelia burgdorferi);~~

~~(ii) Malaria (Plasmodium spp.);~~

~~(jj) Measles (Measles virus), also known as rubeola;~~

~~(kk) Meningitis (aseptic, bacterial, fungal, parasitic, protozoan, and viral);~~

~~(ll) Meningococcal disease (Neisseria meningitidis), invasive;~~

~~(mm) Mumps (Mumps virus);~~

~~(nn) Mycobacterial infections, including:~~

~~(i) Tuberculosis (Mycobacterium tuberculosis complex),~~

~~(ii) Leprosy (Mycobacterium leprae), also known as Hansen's Disease,~~

~~(iii) All other mycobacterial infections (Mycobacterium spp.);~~

~~(oo) Pertussis (Bordetella pertussis);~~

~~(pp) Plague (Yersinia pestis);~~

~~(qq) Poliomyelitis (Poliovirus), paralytic and nonparalytic;~~

~~(rr) Psittacosis (Chlamydophila psittaci), also known as ornithosis;~~

~~(ss) Q fever (Coxiella burnetii);~~

~~(tt) Rabies (Rabies virus), human and animal;~~

~~(uu) Relapsing fever (Borrelia spp.), tick-borne and louse-borne;~~

_____ (vv) Rubella (Rubella virus), including congenital syndrome;

_____ (ww) Salmonellosis (Salmonella spp.);

_____ (xx) Severe acute respiratory syndrome, also known as SARS (SARS coronavirus or SARS-CoV);

_____ (yy) Shigellosis (Shigella spp.);

_____ (zz) Smallpox (Variola major and Variola minor);

_____ (aaa) Spotted fever rickettsioses (Rickettsia spp.), including Rocky Mountain spotted fever (Rickettsia rickettsii);

_____ (bbb) Streptococcal disease, invasive, due to:

_____ (i) Streptococcus pneumoniae,

_____ (ii) Group A Streptococcus (Streptococcus pyogenes),

and

_____ (iii) Group B Streptococcus (Streptococcus agalactiae);

_____ (ccc) Syphilis (Treponema pallidum), all stages and congenital;

_____ (ddd) Tetanus (Clostridium tetani);

_____ (eee) Toxic shock syndrome, staphylococcal (Staphylococcus aureus) or streptococcal (Streptococcus pyogenes);

_____ (fff) Transmissible spongiform encephalopathies (prion diseases), including Creutzfeldt-Jakob disease;

_____ (ggg) Trichinellosis (Trichinella spp.);

_____ (hhh) Tularemia (Francisella tularensis);

_____ (iii) Typhoid (Salmonella typhi), cases and carriers;

_____ (jjj) Vibriosis (Vibrio spp.), including Cholera (Vibrio cholerae);

_____ (kkk) Viral hemorrhagic fevers, including but not limited to:

_____ (i) Ebola fever (Ebolavirus spp.),

_____ (ii) Lassa fever (Lassa virus), and

_____ (iii) Marburg fever (Marburg virus);

_____ (lll) Yellow fever (Yellow fever virus).

_____ (3) Perinatally Transmissible Conditions Reportable by All Entities.

_____ (a) Pregnancy is a reportable event for the following communicable diseases, and reporting is required even if the communicable disease was reported to public health prior to the pregnancy:

_____ (i) Hepatitis B infection;

_____ (ii) Hepatitis C infection;

_____ (iii) HIV infection;

_____ (iv) Listeriosis;

_____ (v) Rubella;

_____ (vi) Syphilis infection; and

_____ (vii) Zika virus infection.

_____ (4) Unusual Events Reportable by All Entities.

_____ (a) Unusual events include one or more cases or suspect cases of a communicable disease, condition, or syndrome considered:

_____ (i) Rare, unusual, or new to Utah;

_____ (ii) Previously controlled or eradicated;

_____ (iii) Caused by an unidentified or newly identified organism;

_____ (iv) Exposure or infection that may indicate a bioterrorism event with potential transmission to the public; or

_____ (v) Any other infection not explicitly identified in Subsection R386-702-3(2) that public health considers a public health hazard.

_____ (5) Outbreaks, Epidemics, or Unusual Occurrences of Events Reportable by All Entities.

_____ (a) Entities shall report two or more cases or suspect cases, with or without an identified organism, including but not limited to:

_____ (i) Gastrointestinal illnesses;

_____ (ii) Respiratory illnesses;

_____ (iii) Meningitis or encephalitis;

_____ (iv) Infections caused by antimicrobial resistant organisms;

_____ (v) Illnesses with suspected foodborne or waterborne transmission;

_____ (vi) Illnesses with suspected ongoing transmission in any facility;

_____ (vii) Infections that may indicate a bioterrorism event; or

_____ (viii) Any other infections not explicitly identified in Subsection R386-702-3(2) that public health considers a public health hazard.

_____ (b) Entities shall report increases or shifts in pharmaceutical sales that may indicate changes in disease trends; or

_____ (6) Laboratory Results Reportable by Electronic Reporters.

_____ (a) In addition to laboratory results set forth in Subsection R386-702-3(2), the Department declares the following laboratory results to be reportable by entities reporting electronically.

_____ (b) Entities reporting electronically shall include the following laboratory results or laboratory results that provide presumptive evidence of the following communicable diseases:

_____ (i) Norovirus infection; and

_____ (ii) Streptococcal disease, invasive due to all species.

_____ (c) Entities reporting electronically shall include all laboratory results (positive, negative, equivocal, indeterminate) associated with the following tests or conditions:

_____ (i) CD4+ T-Lymphocyte tests, regardless of known HIV status;

_____ (ii) Chlamydia;

_____ (iii) Clostridium difficile;

_____ (iv) Cytomegalovirus (CMV), congenital (infants less than or equal to 12 months of age);

_____ (v) Gonorrhea;

_____ (vi) Hepatitis A;

_____ (vii) Hepatitis B;

_____ (viii) Hepatitis C, including viral loads;

_____ (ix) HIV, including viral loads and confirmatory tests;

_____ (x) Liver function tests, including ALT, AST, and bilirubin associated with a viral hepatitis case;

_____ (xi) Lyme disease;

_____ (xii) Syphilis;

_____ (xiii) Tuberculosis; and

_____ (xiv) Zika virus.

_____ (d) Non-positive laboratory results reported for the events identified in Subsection R386-702-3(6)(c) will be used for the following purposes as authorized in Utah Health Code Subsections 26-1-30(2)(c), 26-1-30(2)(d), and 26-1-30(2)(f):

_____ (i) To determine when a previously reported case becomes non-infectious;

_____ (ii) To identify newly acquired infections through identification of a seroconversion window; or

(iii) To provide information critical for assignment of a case definition.

(e) Information associated with a non-positive laboratory result will be kept by the Department for a period of 18 months.

(i) At the end of the 18 month period, if the result has not been appended to an existing case, personal identifiers will be stripped and expunged from the result.

(ii) The de-identified result will be added to a de-identified, aggregate dataset.

(iii) The dataset will be kept for use by public health to analyze trends associated with testing patterns and case distribution, and identify and establish prevention and intervention efforts for at-risk populations.

(7) Authorized Reporting of Syndromes and Conditions.

(a) Reporting of encounters for the following syndromes and conditions is authorized by Chapter 26-23b, unless made mandatory by the declaration of a public health emergency:

(i) Respiratory illness, including but not limited to:

(A) Upper or lower respiratory tract infections,

(B) Difficulty breathing, or

(C) Adult respiratory distress syndrome;

(ii) Gastrointestinal illness, including but not limited to:

(A) Vomiting,

(B) Diarrhea, or

(C) Abdominal pain;

(iii) Influenza-like constitutional symptoms or signs;

(iv) Neurologic symptoms or signs indicating the possibility of meningitis, encephalitis, or unexplained acute encephalopathy or delirium;

(v) Rash illness;

(vi) Hemorrhagic illness;

(vii) Botulism-like syndrome;

(viii) Lymphadenitis;

(ix) Sepsis or unexplained shock;

(x) Febrile illness (illness with fever, chills or rigors);

(xi) Nontraumatic coma or sudden death; and

(xii) Other criteria specified by the Department as indicative of disease outbreaks or injurious exposures of uncertain origin.

(b) Reporting of encounters for syndromes and conditions not specified in Subsection R386-702-3(7)(a) is also authorized by Chapter 26-23b, unless made mandatory by the declaration of a public health emergency.

(c) Information included in the reporting of the events identified in Subsection R386-702-3(7)(a) and R386-702-3(7)(b) will be used for the following purposes:

(i) To support early identification and ruling out of public health threats, disasters, outbreaks, suspected incidents, and acts of bioterrorism;

(ii) To assist in characterizing population groups at greatest risk for disease or injury;

(iii) To support assessment of the severity and magnitude of possible threats; or

(iv) To satisfy syndromic surveillance objectives of the Federal Centers for Medicaid and Medicare Meaningful Use incentive program.

(8) Reporting Exceptions

(a) A university or hospital that conducts research studies exempt from reporting AIDS and HIV infection under Section 26-6-3.5 shall seek written approval of reporting exemption from the Department institutional review board prior to the study commencement.

(b) The university or hospital shall submit the following to the HIV Epidemiologist within 30 days of Department institutional review board approval:

(i) A summary of the research protocol, including funding sources and justification for requiring anonymity; and

(ii) Written approval from the Department institutional review board.

(c) The university or hospital shall submit a report that includes all of the indicators specified in Subsection 26-6-3.5(4)(a) to the HIV Epidemiologist annually during an ongoing research study.

(d) The university or hospital shall submit a final report that includes all of the indicators specified in Subsection 26-6-3.5(4)(a) to the HIV Epidemiologist within 30 days of the conclusion of the research study.

(e) Documents can be submitted to the HIV Epidemiologist by fax at (801) 538-9923 or by mail to 288 North 1460 West Salt Lake City, Utah 84116.

R386-702-4. Entities Required to Report[ing].

[(1) Who must report: Each reporting entity shall report each confirmed case, and any individual, who the reporting entity believes, in its professional judgment, is likely to harbor an illness, infection, or condition reportable under R386-702-3(1), and each outbreak, epidemic, or unusual occurrence described in R386-702-3(1)(bbbb) or (cccc) to the local health department or to the Bureau of Epidemiology, Utah Department of Health. Unless otherwise specified, the report of these diseases to the local health department or to the Bureau of Epidemiology, Utah Department of Health shall provide the following information: name, age, sex, address, date of onset, and all other information as prescribed by the Department. A standard report form has been adopted and is supplied to physicians and other reporting entities by the Department. Upon receipt of a report, the local health department shall promptly forward a written or electronic copy of the report to the Bureau of Epidemiology, Utah Department of Health.

(2) Time frames for reporting:

(a) Manual reporting:

(i) Where immediate reporting is required as noted in R386-702-4(4), the reporting entity shall report as soon as possible, but not later than 24 hours after identification. Immediate reporting shall be made by telephone to the local health department or to the Bureau of Epidemiology, Utah Department of Health at 801-538-6191 or 888-EPI-UTAH (888-374-8824).

(ii) All diseases not required to be reported immediately shall be reported within three working days from the time of identification. Reporting entities shall send reports to the local health department by phone, secured fax, secured email, or mail; or to the Bureau of Epidemiology by phone (801-538-6191), secured fax (801-538-9923), secured email (please contact the Bureau of Epidemiology at 801-538-6191 for information on this option), or by mail (288 North 1460 West, P. O. Box 142104, Salt Lake City, Utah 84114-2104).

~~(b) Electronic reporting:~~

~~(i) Hospitals and laboratories are encouraged to report case information electronically in a manner approved of by the Department if the laboratory has the capacity to do so. Refer to <https://health.utah.gov/phaccess/public/ehr/> for information about this option. Please contact the Bureau of Epidemiology at 801-538-6191 for questions regarding this option.~~

~~(ii) When more than one licensed laboratory or hospital is involved in testing a specimen, all entities involved are required to report results.~~

~~(iii) All entities that report electronically shall either choose to report on demand (as each report is released) or batch reports every 24 hours (including holidays and weekends if the entity is open).~~

~~(iv) The following requirements apply to laboratories that are reporting information electronically:~~

~~(1) Laboratories reporting electronically shall send the following information with all reports:~~

~~(A) First and last name of the patient;~~

~~(B) Patient date of birth;~~

~~(C) Patient hospitalization status;~~

~~(D) Name of the reporting facility;~~

~~(E) Name of the testing laboratory;~~

~~(F) Patient address (including street address, unit/apartment number, city, state, and zip code);~~

~~(G) Name and phone number of the requesting health care provider;~~

~~(H) Pregnancy status;~~

~~(I) Specimen source;~~

~~(J) The laboratory's name for, or description of, the test;~~

~~(K) Testing results;~~

~~(L) Test reference range; and~~

~~(M) Test status (e.g. preliminary, final, amended and/or corrected).~~

~~(2) Hospitals reporting electronically shall use HL7 2.5.1 message structure and standard LOINC and SNOMED terminology in accordance with Meaningful Use regulations. Laboratories reporting electronically shall use HL7 2.3.1 or 2.5.1 message structure for all fields and appropriate LOINC codes designating the test performed.~~

~~(3) Laboratories reporting electronically shall submit all local vocabulary codes with translations to UDOH, if applicable.~~

~~(4) Laboratories reporting electronically must report preliminary positive results for immediately notifiable conditions as specified in R386-702-4 (4).~~

~~(c) Electronic reporting of negative results:~~

~~(i) Electronic reporting shall include negative as well as positive results for the following conditions:~~

~~(1) Chlamydia~~

~~(2) Cytomegalovirus (CMV), congenital (see Utah Administrative Rule R398-4-5 and R386-702-4 (2)(b)(i))~~

~~(3) Gonorrhea~~

~~(4) Hepatitis A~~

~~(5) Hepatitis B~~

~~(6) Hepatitis C, including viral loads~~

~~(7) Human Immunodeficiency Virus (HIV), including viral loads and confirmatory tests~~

~~(8) Lyme disease~~

~~(9) Syphilis~~

~~(10) Tuberculosis~~

~~(ii) Negative test results reported for these conditions will be used for the following purposes as authorized in Utah Health Code Section 26-1-30(2)(e),(d), and (f):~~

~~(1) To determine when a previously reported case becomes non-infectious;~~

~~(2) To identify newly acquired infections through identification of a seroconversion window; or~~

~~(3) To provide information critical for assignment of a case definition.~~

~~(iii) Information associated with a negative test result will be retained by the Utah Department of Health for a period of 18 months:~~

~~(1) At the end of the 18 month period, if the result has not been appended to an existing case, personal identifiers will be stripped and expunged from the result.~~

~~(2) The de-identified result will be added to a de-identified, aggregate dataset which will be retained for use by public health to analyze trends associated with testing patterns and case distribution, enabling identification and establishment of prevention and intervention efforts for at-risk populations, and assessment of trends over time in those populations, as authorized by Utah Health Code 26-1-30(2)(f).~~

~~(3) Entities Required to Report Communicable Diseases: Title 26, Chapter 6, Section 6 Utah Code lists those individuals and facilities required to report diseases known or suspected of being communicable.~~

~~(a) Physicians, hospitals, health care facilities, home health agencies, health maintenance organizations, and other health care providers shall report details regarding each case.~~

~~(b) Schools, child care centers, and citizens shall provide any relevant information.~~

~~(c) Laboratories and other testing sites shall report laboratory evidence of any of the reportable diseases. Laboratories and other testing sites shall also report any test result that provides presumptive evidence of infection, which may include positive tests for HIV, syphilis, measles, viral hepatitis, and tuberculosis. This would also include reporting ordered tests for Creutzfeldt-Jakob disease and other prion diseases.~~

~~(i) Detailed lists of reportable laboratory events, e.g. laboratory tests and results that signify a reportable condition, are found at: <https://health.utah.gov/phaccess/public/ehr/>; click on "Spreadsheet of Reportable Events and Vocabulary" to access this list.~~

~~(ii) Events noted within the "Spreadsheet of Reportable Events and Vocabulary" constitute those that are reportable according to this Rule, and as such are considered mandatory for laboratories to report.~~

~~(iii) The "Spreadsheet of Reportable Events and Vocabulary" defines, for laboratory reporting purposes, those unusual occurrences of conditions as noted in R386-702-3 (1)(bbbb) and (eeee).~~

~~(d) Pharmacists shall report unusual prescriptions or patterns of prescribing as specified in section 26-23b-105.~~

~~(4) Immediately Reportable Conditions: Case and suspect case reports of anthrax, botulism (except for infant botulism), cholera, Creutzfeldt-Jakob disease and other suspected~~

~~prion diseases, diphtheria, Haemophilus influenzae (invasive disease), hepatitis A, measles, meningococcal disease, plague, poliomyelitis, rabies, rubella (excluding congenital syndrome), Severe Acute Respiratory Syndrome (SARS), smallpox, Staphylococcus aureus with resistance (VRSA) or intermediate resistance (VISA) to vancomycin isolated from any site, tuberculosis, tularemia, typhoid, viral hemorrhagic fever, yellow fever, and any condition described in R386-702-3(1)(bbbb) or (eeee) are to be made immediately as provided in R386-702-4(2).~~

~~(5) Mandatory Submission of Clinical Material:~~

~~(a) Laboratories shall submit clinical material from all cases identified with organisms listed in (5)(c) below to the Utah Department of Health, Utah Public Health Laboratory (UPHL). Clinical material is defined as:~~

~~(i) A clinical isolate containing the infectious organism for which submission of material is required, or~~

~~(ii) If an isolate is not available, material containing the infectious organism for which submission of material is required, in the following order of preference:~~

~~(A) a patient specimen;~~

~~(B) nucleic acid; or~~

~~(C) other laboratory material.~~

~~(b) Laboratories should alert UPHL via telephone during business hours at (801) 965-2400, or after hours at (801) 560-6586, of all bioterrorism (BT) agents that are being submitted. BT agents are marked below (as (BT)) with other organisms mandated for submission:~~

~~(c) Organisms that are mandated for clinical submission in Utah include:~~

~~(i) Bacillus anthracis (BT);~~

~~(ii) Brucella species (BT);~~

~~(iii) Campylobacter species;~~

~~(iv) Clostridium botulinum (BT);~~

~~(v) Corynebacterium diphtheriae;~~

~~(vi) Shiga toxin-producing Escherichia coli (STEC) (including enrichment and/or MacConkey broths that tested positive by enzyme immunoassay for Shiga toxin);~~

~~(vii) Francisella tularensis (BT);~~

~~(viii) Haemophilus influenzae, from normally sterile sites;~~

~~(ix) Influenza virus (hospitalized cases only);~~

~~(x) Legionella species;~~

~~(xi) Listeria monocytogenes;~~

~~(xii) Measles (rubeola);~~

~~(xiii) Mycobacterium tuberculosis complex;~~

~~(xiv) Neisseria gonorrhoeae;~~

~~(xv) Neisseria meningitidis, from normally sterile sites;~~

~~(xvi) Salmonella species;~~

~~(xvii) Shigella species;~~

~~(xviii) Staphylococcus aureus with resistance or intermediate resistance to vancomycin isolated from any site;~~

~~(xix) Vibrio species;~~

~~(xx) West Nile virus;~~

~~(xxi) Yersinia species (Yersinia pestis, BT); and~~

~~(xxii) any organism implicated in an outbreak when instructed by authorized local or state health department personnel.~~

~~(6) Full reporting of all relevant patient information related to laboratory-confirmed influenza is authorized and may be required by local or state health department personnel for purposes~~

~~of public health investigation of a documented threat to public health.~~

~~(7) Reports of emergency illnesses, health conditions, and patient encounter information under R386-702-3(2) shall be made as soon as practicable using a process and schedule approved by the Department. Full reporting of all relevant patient information is authorized. The report shall include at least, if known:~~

~~(a) name of the facility;~~

~~(b) a patient identifier;~~

~~(c) date of visit;~~

~~(d) time of visit;~~

~~(e) patient's age;~~

~~(f) patient's sex;~~

~~(g) zip code of patient's residence;~~

~~(h) chief complaint(s), reason for visit, and/or diagnosis; and~~

~~(i) whether the patient was admitted to the hospital.~~

~~(8) An entity reporting emergency illnesses, health conditions, and patient encounter information under R386-702-3(2) is authorized to report on other encounters during the same time period that do not meet definition for a reportable emergency illness, health condition, or patient encounter. Submission of an isolate does not replace the requirement to report the case also to the local health department or Bureau of Epidemiology, Utah Department of Health. The report shall include the following information for each such encounter:~~

~~(a) facility name;~~

~~(b) date of visit;~~

~~(c) time of visit;~~

~~(d) patient's age;~~

~~(e) patient's sex; and~~

~~(f) patient's zip code for patient's residence.~~

~~(9) Epidemiological Review: The Department or local health department may conduct an investigation, including review of the hospital and health care facility medical records and contacting the individual patient to protect the public's health.~~

~~(10) Confidentiality of Reports:~~

~~(a) All reports required by this rule are confidential and are not open to public inspection. All information collected pursuant to this rule may not be released or made public, except as provided by Section 26-6-27. Penalties for violation of confidentiality are prescribed in Section 26-6-29.~~

~~(b) Nothing in this rule precludes the discussion of case information with an attending clinician or public health workers.~~

~~(c) Good Samaritans:~~

~~(i) The Department or local health department shall disclose communicable disease-related information regarding the person who was assisted to the medical provider of a good Samaritan when that medical provider submits a request to the Department or local health department. The request must include:~~

~~(A) information regarding the occurrence of the accident, fire, or other life-threatening emergency;~~

~~(B) a description of the exposure risk to the good Samaritan, and~~

~~(C) contact information for the good Samaritan and their medical provider.~~

~~(ii) Information shall be provided to the medical provider of the good Samaritan only in order to ensure that:~~

~~(A) appropriate education and follow-up is provided, and~~

~~_____ (B) confidentiality is maintained for the person who was aided.~~

~~_____ (iii) No identifying information will be shared regarding the person who was assisted with the good Samaritan or their medical provider. The good Samaritan shall receive written information warning them that information regarding the person who was assisted is protected by state law.~~

~~_____ (11) If public health conducts a retrospective surveillance project, such as to assess completeness of case finding or assess another measure of data quality, the department may, at its discretion, waive any penalties for participating facilities, medical providers, laboratories, or other reporters if cases are found that were not originally reported for whatever reason.]~~

~~_____ (1) Section 26-6-6 lists those entities required to report cases or suspect cases of the reportable events set forth in Section R386-702-3. This includes:~~

~~_____ (a) Health care providers, as defined in Section 78B-3-403;~~

~~_____ (b) Health care facilities, as defined in Section 78B-3-403;~~

~~_____ (c) Health care facilities operated by the federal government;~~

~~_____ (d) Mental health facilities, as defined in Section 62A-15-602;~~

~~_____ (e) Care facilities licensed through the Department of Human Services;~~

~~_____ (f) Nursing care facilities and assisted living facilities, as defined in Section 26-21-2;~~

~~_____ (g) Dispensaries;~~

~~_____ (h) Clinics;~~

~~_____ (i) Laboratories;~~

~~_____ (j) Schools, as defined in Section 26-6-2;~~

~~_____ (k) Childcare programs, as defined in Section 26-39-102; and~~

~~_____ (l) Any individual with a knowledge of others who have a communicable disease.~~

~~_____ (2) In addition, the following entities are required to report cases or suspect cases of the reportable events set forth in Section R386-702-3:~~

~~_____ (a) Blood and plasma donation centers; and~~

~~_____ (b) Correctional facilities~~

~~_____ (3) When more than one entity is involved in the processing of a clinical specimen (receiving, forwarding, or analyzing); or the diagnosis, treatment, or care of a case or suspect case; all entities involved are required to report; even when diagnosis or testing is done outside of Utah.~~

~~_____ (4) Health care entities may designate a single person or group of persons to report the events identified in Section R386-702-3 to public health on behalf of their health care providers or medical laboratories, as long as reporting complies with all requirements in this rule.~~

R386-702-5. Mandatory Submission of Clinical Material.

~~_____ (1) Laboratories shall submit clinical material from all cases identified with organisms listed in Subsection R386-702-5(3) below to the Utah Department of Health, Utah Public Health Laboratory (UPHL) within three working days of identification.~~

~~_____ (a) Clinical material is defined as:~~

~~_____ (i) A clinical isolate containing the organism for which submission of material is required; or~~

~~_____ (ii) If an isolate is not available, material containing the organism for which submission of material is required, in the following order of preference:~~

~~_____ (A) a patient specimen,~~

~~_____ (B) nucleic acid, or~~

~~_____ (C) other laboratory material.~~

~~_____ (2) Laboratories submitting clinical material from cases identified with organisms designated by UPHL as potential bioterrorism (BT) agents shall first notify UPHL via telephone immediately.~~

~~_____ (a) UPHL can be contacted during business hours at (801) 965-2400, or after hours at (801) 560-6586, of all BT agents that are being submitted.~~

~~_____ (3) Organisms mandated for standard clinical submission include:~~

~~_____ (a) Campylobacter species;~~

~~_____ (b) Corynebacterium diphtheriae;~~

~~_____ (c) Shiga toxin-producing Escherichia coli (STEC), including enrichment and/or MacConkey broths that tested positive by any method for Shiga toxin;~~

~~_____ (d) Haemophilus influenzae, from normally sterile sites;~~

~~_____ (e) Influenza A virus, unsubtypeable;~~

~~_____ (f) Influenza virus (hospitalized cases only);~~

~~_____ (g) Legionella species;~~

~~_____ (h) Listeria monocytogenes;~~

~~_____ (i) Measles (rubeola) virus;~~

~~_____ (j) Mycobacterium tuberculosis complex;~~

~~_____ (k) Neisseria meningitidis, from normally sterile sites;~~

~~_____ (l) Salmonella species;~~

~~_____ (m) Shigella species;~~

~~_____ (n) Staphylococcus aureus that is resistant or intermediate resistant to vancomycin;~~

~~_____ (o) Vibrio species;~~

~~_____ (p) West Nile virus;~~

~~_____ (q) Yersinia species;~~

~~_____ (r) Zika virus; and~~

~~_____ (s) Any organism implicated in an outbreak when instructed by authorized local or state health department personnel.~~

~~_____ (4) Organisms mandated for BT clinical submission include:~~

~~_____ (a) Bacillus anthracis;~~

~~_____ (b) Brucella species;~~

~~_____ (c) Clostridium botulinum;~~

~~_____ (d) Francisella tularensis; and~~

~~_____ (e) Yersinia pestis.~~

~~_____ (5) Submission of clinical material does not replace the requirement for laboratories to report the event to public health as defined in Sections R386-702-6 and R386-702-7.~~

~~_____ (6) For additional information on this process, contact UPHL at (801) 965-2400.~~

R386-702-6. Reporting Criteria.

~~_____ (1) Manual Reporting~~

~~_____ (a) Reporting Timeframes~~

~~_____ (i) Entities shall report immediately reportable events by telephone as soon as possible, but no later than 24 hours after~~

identification. Events designated as immediately reportable by the Department include cases and suspect cases of:

- (A) Anthrax;
- (B) Botulism, excluding infant botulism;
- (C) Cholera;
- (D) Diphtheria;
- (E) Haemophilus influenzae, invasive disease;
- (F) Hepatitis A;
- (G) Influenza infection suspected or confirmed to be caused by a non-seasonal influenza strain;
- (H) Measles;
- (I) Meningococcal disease, invasive;
- (J) Plague;
- (K) Poliovirus, paralytic and nonparalytic;
- (L) Rabies, human and animal;
- (M) Rubella, excluding congenital syndrome;
- (N) Severe acute respiratory syndrome (SARS);
- (O) Smallpox;
- (P) Staphylococcus aureus from any clinical specimen that is or intermediate resistant to vancomycin;
- (Q) Transmissible spongiform encephalopathies (prion diseases), including Creutzfeldt-Jakob disease;
- (R) Tuberculosis;
- (S) Tularemia;
- (T) Typhoid, cases and carriers;
- (U) Viral hemorrhagic fevers;
- (V) Yellow fever; or
- (W) Any event described in Subsections R386-702-3(4) or R386-702-3(5).

(ii) Entities shall report all events in Subsections R386-702-3(2) and R386-702-3(3) not required to be reported immediately within three working days from the time of identification.

(b) Methods for Reporting

(i) Entities reporting manually shall send reports to either a local health department or the Department by phone, secured fax, secured email, or mail.

(ii) Contact information for the Department is as follows:

(A) Phone: (801) 538-6191 during business hours, or 888-EPI-UTAH (888-374-8824) after hours;

(B) Secured fax: (801) 538-9923;

(C) Secured email: reporting@utah.gov (contact the Department at (801) 538-6191 for information on this option); and

(D) Mail: 288 North 1460 West Salt Lake City, Utah 84116.

(iii) A confidential morbidity report form is available at: <http://health.utah.gov/epi/reporting/>.

(2) Electronic Reporting

(a) Reporting Timeframes

(i) All entities that report electronically must report laboratory results within 24 hours of finalization.

(A) Entities can choose to report in real-time (as each report is released) or batch reports.

(B) Entities reporting electronically must report preliminary positive results for the immediately reportable events specified in Subsection R386-702-6(1)(a)(i).

(b) Methods for Reporting

(i) The Department strongly encourages hospitals and laboratories with the capacity to report events electronically to the Department, in a manner approved by the Department.

(A) For additional information on this process, refer to <https://health.utah.gov/phaccess/public/elr/> or contact the Division of Disease Control and Prevention Informatics Program by phone (801-538-6191) or email (elr@utah.gov).

(ii) Hospitals reporting electronically shall use HL7 2.5.1 message structure, and standard LOINC and SNOMED terminology in accordance with Meaningful Use regulations.

(iii) Laboratories reporting electronically shall use HL7 2.3.1 or 2.5.1 message structure, and appropriate LOINC codes designating the test performed.

(A) Laboratories reporting electronically shall submit all local vocabulary codes with translations to the Division of Disease Control and Prevention Informatics Program, if applicable.

(3) Syndromic Reporting

(a) Reporting Timeframes

(i) Entities reporting syndromes or conditions identified in Subsection R386-702-3(7) shall report as soon as practicable using a schedule approved by the Department.

(b) Methods for Reporting

(i) For information on reporting syndromic data, refer to <https://health.utah.gov/phaccess/public/SS/> or contact the Division of Disease Control and Prevention Informatics Program by phone (801-538-6191) or email (elr@utah.gov).

R386-702-7. Required Information.

(1) Entities shall include as much of the following information as is known when reporting events specified in Subsections R386-702-3(2) through R386-702-3(6) to public health:

(a) Patient information:

(i) Full name;

(ii) Date of birth;

(iii) Address, including street address, city, state, and zip code;

(iv) Telephone number;

(v) Gender;

(vi) Race and ethnicity;

(vii) Date of onset;

(viii) Hospitalization status and date of admission; and

(ix) Pregnancy status and estimated due date.

(b) Diagnostic information:

(i) Name of the diagnostic facility;

(ii) Address, including street address, city, state, and zip code; of the diagnostic facility;

(iii) Telephone number of the diagnostic facility;

(iv) Full name of the ordering or diagnosing health care provider;

(v) Address, including street address, city, state, and zip code; of the ordering or diagnosing health care provider; and

(vi) Telephone number of the ordering or diagnosing health care provider.

(c) Reporter information:

(i) Full name of the person reporting;

(ii) Name of the facility reporting; and

(iii) Telephone number of the person or facility reporting.

(d) Laboratory testing information:

- (i) Name of the laboratory performing the test;
- (ii) The laboratory's name for, or description of, the test;
- (iii) Specimen source;
- (iv) Specimen collection date;
- (v) Testing results;
- (vi) Test reference range; and
- (vii) Test status (e.g. preliminary, final, amended and/or corrected).

(2) Entities shall submit reports that are clearly legible and do not contain any internal codes or abbreviations to the Department.

(3) Entities shall reference <http://health.utah.gov/epi/> reporting, or contacting the Department at (801) 538-6191, for additional reporting specifications, including technical documents, reporting forms, and protocols.

(4) Full reporting of all relevant patient information is authorized when reporting events listed in Subsection R386-702-3(7) to public health.

(a) Entities shall include in reports at least the following information, if known:

- (i) Name of the facility;
- (ii) A patient identifier;
- (iii) Date of visit;
- (iv) Time of visit;
- (v) Patient's age;
- (vi) Patient's gender;
- (vii) Zip code of patient's residence;
- (viii) Chief complaint(s), reason for visit, and/or diagnosis; and
- (ix) Whether the patient was admitted to the hospital.

R386-702-8. Confidentiality of Reports.

(1) All reports required by this rule are confidential and are not open to public inspection. All information collected pursuant to this rule shall not be released or made public, except as provided by Section 26-6-27. Penalties for violation of confidentiality are prescribed in Section 26-6-29.

(2) Nothing in this rule precludes the discussion of case information with an attending clinician or public health workers.

(3) Good Samaritans

(a) The Department or local health department shall disclose communicable disease-related information regarding the person who was assisted to the medical provider of a Good Samaritan when that medical provider submits a request to the Department or local health department. The request must include:

- (i) Information regarding the occurrence of the accident, fire, or other life-threatening emergency;
- (ii) A description of the exposure risk to the Good Samaritan; and
- (iii) Contact information for the Good Samaritan and their medical provider.

(b) The Department or local health department will ensure that the disclosed information:

- (i) Includes enough detail to allow for appropriate education and follow-up to the Good Samaritan; and
- (ii) Ensures confidentiality is maintained for the person who was aided.

(c) No identifying information will be shared with the Good Samaritan or their medical provider regarding the person who was assisted. The Good Samaritan shall receive written information warning them that information regarding the person who was assisted is protected by state law.

R386-702-9. Non-Compliance with Reporting Regulations.

(1) Any person who violates any provision of Section R386-702 may be assessed a penalty as provided in Section 26-23-6.

(a) Willful non-compliance may result in the Department working with other agencies to incur penalties which may include loss of accreditation or licensure.

(2) Records maintained by reporting entities are subject to review by Department personnel to assure the completeness and accuracy of reporting.

(3) If public health conducts a surveillance project, such as assessing the completeness of case finding or assessing another measure of data quality, the Department may, at its discretion, waive any penalties for participating entities if cases are found that were not originally reported for whatever reason.

R386-702-10. Information Necessary for Public Health Investigation and Surveillance.

(1) Reporting entities shall provide the Department or local health department with any records or other materials requested by public health that are necessary to conduct a thorough investigation.

(a) This includes, but is not limited to, medical records, additional laboratory testing results, treatment and vaccination history, clinical material, or contact information for cases, suspect cases, or persons potentially exposed.

(b) The Department or local health department shall be granted on-site access to a facility, when such access is critical to a public health investigation.

R386-702-[5]11. General Measures for the Control of Communicable Diseases.

(1) The local health department shall maintain all reportable disease records as needed to enforce Chapter 6 of the Health Code and this rule, or as requested by the Utah Department of Health.

(2) General Control Measures for Reportable Diseases.

(a) The local health department shall, when an unusual or rare disease occurs in any part of the state or when any disease becomes so prevalent as to endanger the state as a whole, contact the Bureau of Epidemiology, Utah Department of Health for assistance, and shall cooperate with the representatives of the Utah Department of Health.

(b) The local health department shall investigate and control the causes of epidemic, infectious, communicable, and other disease affecting the public health. The local health department shall also provide for the detection, reporting, prevention, and control of communicable, infectious, and acute diseases that are dangerous or important or that may affect the public health. The local health department may require physical examination and measures to be performed as necessary to protect the health of others.

(c) If, in the opinion of the local health officer it is necessary or advisable to protect the public's health that any person shall be kept from contact with the public, the local health officer shall establish, maintain and enforce involuntary treatment, isolation and quarantine as provided by Section 26-6-4. Control measures shall be specific to the known or suspected disease agent. Guidance is available from the Bureau of Epidemiology, Utah Department of Health or official reference listed in R386-702-12.

(3) Prevention of the Spread of Disease From a Case.

The local health department shall take action and measures as may be necessary within the provisions of Section 26-6-4; Title 26, Chapter 6b; and this rule, to prevent the spread of any communicable disease, infectious agent, or any other condition which poses a public health hazard. Action shall be initiated upon discovery of a case or upon receipt of notification or report of any disease.

(4) Prevention of the Spread of Disease or Other Public Health Hazard.

A case, suspected case, carrier, contact, other person, or entity (e.g. facility, hotel, organization) shall, upon request of a public health authority, promptly cooperate during:

(a) An investigation of the circumstances or cause of a case, suspected case, outbreak, or suspected outbreak.

(b) The carrying out of measures for prevention, suppression, and control of a public health hazard, including, but not limited to, procedures of restriction, isolation, and quarantine.

(5) Public Food Handlers.

A person known to be infected with a communicable disease that can be transmitted by food or drink products, or who is suspected of being infected with such a disease, may not engage in the commercial handling of food or drink products, or be employed on any premises handling those types of products, unless those products are packaged off-site and remain in a closed container until purchased for consumption, until the person is determined by the local health department to be free of communicable disease, or incapable of transmitting the infection.

(6) Communicable Diseases in Places Where Food or Drink Products are Handled or Processed.

If a case, carrier, or suspected case of a disease that can be conveyed by food or drink products is found at any place where food or drink products are handled or offered for sale, or if a disease is found or suspected to have been transmitted by these food or drink products, the local health department may immediately prohibit the sale, or removal of drink and all other food products from the premises. Sale or distribution of food or drink products from the premises may be resumed when measures have been taken to eliminate the threat to health from the product and its processing as prescribed by R392-100.

(7) Request for State Assistance.

If a local health department finds it is not able to completely comply with this rule, the local health officer or his representative shall request the assistance of the Utah Department of Health. In such circumstances, the local health department shall provide all required information to the Bureau of Epidemiology. If the local health officer fails to comply with the provisions of this rule, the Utah Department of Health shall take action necessary to enforce this rule.

(8) Approved Laboratories.

Laboratory analyses that are necessary to identify the causative agents of reportable diseases or to determine adequacy of treatment of patients with a disease shall be ordered by the physician or other health care provider to be performed in or referred to a laboratory holding a valid certificate under the Clinical Laboratory Improvement Amendments of 1988.

R386-702-[6]12. Special Measures for Control of Rabies.

(1) Rationale of Treatment.

A physician must evaluate individually each exposure to possible rabies infection. The physician shall also consult with local or state public health officials if questions arise about the need for rabies prophylaxis.

(2) Management of Biting Animals.

(a) A healthy dog, cat, or ferret that bites a person shall be confined and observed at least daily for ten days from the date of bite, regardless of vaccination status, as specified by local animal control ordinances. It is recommended that rabies vaccine not be administered during the observation period. Such animals shall be evaluated by a veterinarian at the first sign of illness during confinement. A veterinarian or animal control officer shall immediately report any illness in the animal to the local health department. If signs suggestive of rabies develop, a veterinarian or animal control officer shall direct that the animal be euthanized, its head removed, and the head shipped under refrigeration, not frozen, for examination of the brain by a laboratory approved by the Utah Department of Health.

(b) If the dog, cat, or ferret shows no signs of rabies or illness during the ten day period, the veterinarian or animal control officer shall direct that the unvaccinated animal be vaccinated against rabies at the owner's expense before release to the owner. If a veterinarian is not available, the animal may be released, but the owner shall have the animal vaccinated within 72 hours of release. If the dog, cat, or ferret was appropriately vaccinated against rabies before the incident, the animal may be released from confinement after the 10-day observation period with no further restrictions.

(c) Any stray or unwanted dog, cat, or ferret that bites a person may be euthanized immediately by a veterinarian or animal control officer, if permitted by local ordinance, and the head submitted, as described in R386-702-6(2)(a), for rabies examination. If the brain is negative by fluorescent-antibody examination for rabies, one can assume that the saliva contained no virus, and the person bitten need not be treated.

(d) Wild animals include raccoons, skunks, coyotes, foxes, bats, the offspring of wild animals crossbred to domestic dogs and cats, and any carnivorous animal other than a domestic dog, cat, or ferret.

(e) Signs of rabies in wild animals cannot be interpreted reliably. If a wild animal bites or scratches a person, the person or attending medical personnel shall notify an animal control or law enforcement officer. A veterinarian, animal control officer or representative of the Division of Wildlife Resources shall kill the animal at once, without unnecessary damage to the head, and submit the brain, as described in R386-702-6(2)(a), for examination for evidence of rabies. If the brain is negative by fluorescent-antibody examination for rabies, one can assume that the saliva contained no virus, and the person bitten need not be treated.

(f) Rabbits, opossums, squirrels, chipmunks, rats, and mice are rarely infected and their bites rarely, if ever, call for rabies prophylaxis or testing. Unusual exposures to any animal should be reported to the local health department or the Bureau of Epidemiology, Utah Department of Health.

(g) When rare, valuable, captive wild animals maintained in zoological parks approved by the United States Department of Agriculture or research institutions, as defined by Section 26-26-1, bite or scratch a human, the Bureau of Epidemiology, Utah Department of Health shall be notified. The provisions of subsection R386-702-6(2)(e) may be waived by the Bureau of Epidemiology, Utah Department of Health if zoological park operators or research institution managers can demonstrate that the following rabies control measures are established:

(i) Employees who work with the animal have received preexposure rabies immunization.

(ii) The person bitten by the animal voluntarily agrees to accept postexposure rabies immunization provided by the zoological park or research facility.

(iii) The director of the zoological park or research facility shall direct that the biting animal be held in complete quarantine for a minimum of four months for dogs and cats, and six months for ferrets~~[180 days]~~. Quarantine requires that the animal be prohibited from direct contact with other animals or humans.

(h) Any animal bitten or scratched by a wild, carnivorous animal or a bat that is not available for testing shall be regarded as having been exposed to rabies. The animal shall be placed in a strict quarantine for four months for dogs and cats, or six months for ferrets.

(i) For maximum protection of the public health, unvaccinated dogs, cats, and ferrets bitten or scratched by a confirmed or suspected rabid animal shall be euthanized immediately by a veterinarian or animal control officer. If the owner is unwilling to have the animal euthanized, the local health officer shall order that the animal be held in strict isolation in a municipal or county animal shelter or a veterinary medical facility approved by the local health department, at the owner's expense, for at least four months for dogs and cats, and six months for ferrets. The animal shall be [and] vaccinated one month before being released. If any illness suggestive of rabies develops in the animal, the veterinarian or animal control officer shall immediately report the illness to the local health department and the veterinarian or animal control officer shall direct that the animal be euthanized and the head shall be handled as described in subsection R386-702-6(2)(a).

(j) Dogs, cats, and ferrets that are currently vaccinated and are bitten by rabid animals, shall be revaccinated immediately by a veterinarian and confined and observed by the animal's owner for 45 days. If any illness suggestive of rabies develops in the animal, the owner shall report immediately to the local health department and the animal shall be euthanized by a veterinarian or animal control officer and the head shall be handled as described in subsection R386-702-6(2)(a).

(k) Livestock exposed to a rabid animal and currently vaccinated with a vaccine approved by the United States Department of Agriculture for that species shall be revaccinated immediately by a veterinarian and observed by the owner for 45 days. Unvaccinated livestock shall be slaughtered immediately.

the owner is unwilling to have the animal slaughtered, the animal shall be kept under close observation by the owner for six months.

(l) Unvaccinated animals other than dogs, cats, ferrets, and livestock bitten by a confirmed or suspected rabid animal shall be euthanized immediately by a veterinarian or animal control officer.

(3) Testing Fees at Utah Public Health Laboratory (UPHL).

(a) Animals being submitted to UPHL for rabies testing must follow criteria defined in The Compendium of Animal Rabies Prevention and Control to be eligible for testing without a fee. Testing of animals that fit this criteria will be eligible for a waived fee for testing. Testing of animals that do not meet this criteria will incur a testing fee as set forth by UPHL.

(b) The following situations will not incur a rabies testing fee if testing is ordered for them through UPHL:

(i) Any bat in an instance where a person or animal has had an exposure, or reasonable probability of exposure, including, but not limited to: known bat bites, exposure to bat saliva, a bat found in a room with a sleeping person or unattended child, or a bat found near a child or mentally impaired or intoxicated person.

(ii) Dogs, cats, or ferrets, regardless of rabies vaccination status, if signs suggestive of rabies are documented in them.

(iii) Wild mammals and hybrids that expose persons, pets, or livestock (e.g., skunks, foxes, coyotes, and raccoons) may be tested.

(iv) Livestock may be tested if signs suggestive of rabies are documented.

(v) UDOH Bureau of Epidemiology staff are available to discuss additional situations that may warrant testing at (801) 538-6191.

(c) The following situations will incur a \$95 testing fee if testing is ordered for them through UPHL:

(i) Any stray with unknown or undocumented vaccination history that exposes a person, if signs suggestive of rabies are not documented, or if the animal has not been confined and observed for at least 10 days.

(ii) Dogs, cats, and ferrets: currently vaccinated animals that expose a person, if signs suggestive of rabies are not documented, or animals have not been confined and observed for at least 10 days.

(iii) Regardless of rabies vaccination status, a healthy dog, cat, or ferret that has not exposed a person.

(iv) Small rodents (e.g., rats, mice, squirrels, chipmunks, voles, or moles) and lagomorphs (rabbits and hares).

(v) Incomplete paperwork accompanying the sample will also result in a fee for testing; a thorough description of the situation must be included with each sample submission.

(vi) UDOH Bureau of Epidemiology staff are available to discuss additional situations that may not warrant testing at (801) 538-6191.

(d) If the submitting party feels they are charged inappropriately for rabies testing, they may send a letter describing the situation and requesting a waiver for fees to the: Utah Department of Health, Bureau of Epidemiology, P.O. Box 142104, Salt Lake City, UT 84114, attention: Zoonotic Diseases Epidemiologist. Information may be submitted electronically via email to: epi@utah.gov, with a note in the subject line "Attention: Zoonotic Diseases Epidemiologist".

(i) The submitting party has 30 days from receipt of the testing fee invoice to file an appeal. The letter must include copies of the original paperwork that was submitted, and a copy of the invoice received, for a waiver to be considered.

(ii) UDOH and UPHL have 30 days to review information after receipt of an appeal request to make an official decision and notify the submitter.

(iii) UDOH Bureau of Epidemiology staff are available to discuss questions about testing fees and the appeal process at (801) 538-6191.

(4) Measures for Standardized Rabies Control Practices.

(a) Humans requiring either pre- or post-exposure rabies prophylaxis shall be treated in accordance with the recommendations of the U.S. Public Health Service Immunization Practices Advisory Committee, as adopted and incorporated by reference in R386-702-12(2). A copy of the recommendations shall be made available to licensed medical personnel, upon request to the Bureau of Epidemiology, Utah Department of Health.

(b) A physician or other health care provider that administers rabies vaccine shall immediately report all serious systemic neuromuscular or anaphylactic reactions to rabies vaccine to the Bureau of Epidemiology, Utah Department of Health, using the process described in R386-702-4.

(c) The Compendium of Animal Rabies Prevention and Control, as adopted and incorporated by reference in R386-702-12(3), is the reference document for animal vaccine use.

(d) A county, city, town, or other political subdivision that requires licensure of animals shall also require rabies vaccination as a prerequisite to obtaining a license.

(e) Animal rabies vaccinations are valid only if performed by or under the direction of a licensed veterinarian in accordance with the Compendium of Animal Rabies Prevention and Control.

(f) All agencies and veterinarians administering vaccine shall document each vaccination on the National Association of State Public Health Veterinarians (NASPHV) form number 51, Rabies Vaccination Certificate, which can be obtained from vaccine manufacturers. The agency or veterinarian shall provide a copy of the report to the animal's owner. Computer-generated forms containing the same information are also acceptable.

(g) Animal rabies vaccines may be sold or otherwise provided only to licensed veterinarians or veterinary biologic supply firms. Animal rabies vaccine may be purchased by the Utah Department of Health and the Utah Department of Agriculture.

(5) Measures to Prevent or Control Rabies Outbreaks.

(a) The most important single factor in preventing human rabies is the maintenance of high levels of immunity in the pet dog, cat, and ferret populations through vaccination.

(i) All dogs, cats, and ferrets in Utah should be immunized against rabies by a licensed veterinarian; and

(ii) Local governments should establish effective programs to ensure vaccination of all dogs, cats, and ferrets and to remove strays and unwanted animals.

(b) If the Utah Department of Health determines that a rabies outbreak is present in an area of the state, the Utah Department of Health may require that:

(i) all dogs, cats, and ferrets in that area and adjacent areas be vaccinated or revaccinated against rabies as appropriate for each animal's age;

(ii) any such animal be kept under the control of its owner at all times until the Utah Department of Health declares the outbreak to be resolved;

(iii) an owner who does not have an animal vaccinated or revaccinated surrender the animal for confinement and possible destruction; and

(iv) such animals found at-large be confined and possibly destroyed.

R386-702-~~7~~13. Special Measures for Control of Typhoid.

(1) Because typhoid control measures depend largely on sanitary precautions and other health measures designed to protect the public, the local health department shall investigate each case of typhoid and strictly manage the infected individual according to the following outline:

(2) Cases: Standard precautions are required during hospitalization. Use contact precautions for diapered or incontinent patients for the duration of illness. Hospital care is desirable during acute illness. Release of the patient from supervision by the local health department shall be based on three or more negative cultures of feces (and of urine in patients with schistosomiasis) taken at least 24 hours apart. Cultures must have been taken at least 48 hours after antibiotic therapy has ended and not earlier than one month after onset of illness as specified in R386-702-7(6). If any of these cultures is positive, repeat cultures at intervals of one month during the 12-month period following onset until at least three consecutive negative cultures are obtained as specified in R386-702-7(6). The patient shall be restricted from food handling, child care, and from providing patient care during the period of supervision by the local health department.

(3) Contacts: Administration of typhoid vaccine is recommended for all household members of known typhoid carriers. Household and close contacts of a carrier shall be restricted from food handling, child care, and patient care until two consecutive negative stool specimens, taken at least 24 hours apart, are submitted, or when approval is granted by the local health officer according to local jurisdiction.

(4) Carriers: If a laboratory or physician identifies a carrier of typhoid, the attending physician shall immediately report the details of the case by telephone to the local health department or the Bureau of Epidemiology, Utah Department of Health using the process described in R386-702-4. Each infected individual shall submit to the supervision of the local health department. Carriers are prohibited from food handling, child care, and patient care until released in accordance with R386-702-7(4)(a) or R386-702-7(4)(b). All reports and orders of supervision shall be kept confidential and may be released only as allowed by Subsection 26-6-27(2)(c).

(a) Convalescent Carriers: Any person who harbors typhoid bacilli for three but less than 12 months after onset is defined as a convalescent carrier. Release from occupational and food handling restrictions may be granted at any time from three to 12 months after onset, as specified in R386-702-7(6).

(b) Chronic Carriers: Any person who continues to excrete typhoid bacilli for more than 12 months after onset of typhoid is a chronic carrier. Any person who gives no history of having had typhoid or who had the disease more than one year previously, and whose feces or urine are found to contain typhoid bacilli is also a chronic carrier.

(c) Other Carriers: If typhoid bacilli are isolated from surgically removed tissues, organs, including the gallbladder or kidney, or from draining lesions such as osteomyelitis, the attending physician shall report the case to the local health department or the Bureau of Epidemiology, Utah Department of Health. If the person continues to excrete typhoid bacilli for more than 12 months, he is a chronic carrier and may be released after satisfying the criteria for chronic carriers in R386-702-7(6).

(5) Carrier Restrictions and Supervision: The local health department shall report all typhoid carriers to the Bureau of Epidemiology, and shall:

- (a) Require the necessary laboratory tests for release;
- (b) Issue written instructions to the carrier;
- (c) Supervise the carrier.

(6) Requirements for Release of Convalescent and Chronic Carriers: The local health officer or his representative may release a convalescent or chronic carrier from occupational and food handling restrictions only if at least one of the following conditions is satisfied:

(a) For carriers without schistosomiasis, three consecutive negative cultures obtained from fecal specimens authenticated by the attending physician, hospital personnel, laboratory personnel, or local health department staff taken at least one month apart and at least 48 hours after antibiotic therapy has stopped;

(b) for carriers with schistosomiasis, three consecutive negative cultures obtained from both fecal and urine specimens authenticated by the attending physician, hospital personnel, laboratory personnel, or local health department staff taken at least one month apart and at least 48 hours after antibiotic therapy has stopped;

(c) the local health officer or his representative determine that additional treatment such as cholecystectomy or nephrectomy has terminated the carrier state; or

(d) the local health officer or his representative determines the carrier no longer presents a risk to public health according to the evaluation of other factors.

R386-702-[8]14. Special Measures for the Control of Ophthalmia Neonatorum.

Every physician or midwife practicing obstetrics or midwifery shall, within three hours of the birth of a child, instill or cause to be instilled in each eye of such newborn one percent silver nitrate solution contained in wax ampules, or tetracycline ophthalmic preparations or erythromycin ophthalmic preparations, as these are the only antibiotics of currently proven efficacy in preventing development of ophthalmia neonatorum. The value of irrigation of the eyes with normal saline or distilled water is unknown and not recommended.

R386-702-[9]15. Special Measures for the Control of HIV/AIDS.

~~(1) Authority for this section is established by Title 26, Chapter 6, Sections 3 and 3.5 of the Utah Communicable Disease Control Act. This section establishes requirements for:~~

~~(a) General reporting of screening, diagnostic, and treatment test results related to Human Immunodeficiency Virus (HIV) and Acquired Immunodeficiency Syndrome (AIDS).~~

- ~~(b) Partner identification and notification.~~
- ~~(2) Reporting of HIV and AIDS:~~
 - ~~(a) A health care provider who administers or causes to have administered any of the following tests shall report all positive and indeterminate results (preliminary and confirmatory) to the Department or the local health department:~~
 - ~~(i) Presence of antibodies to HIV;~~
 - ~~(ii) Presence of HIV antigen;~~
 - ~~(iii) Isolation of HIV;~~
 - ~~(iv) Demonstration of HIV pro-viral DNA;~~
 - ~~(v) Demonstration of HIV specific nucleic acids;~~
 - ~~(vi) HIV viral load determination;~~
 - ~~(vii) Any other test or condition indicative of HIV-infection; and~~
 - ~~(viii) CD4+ T-Lymphocyte tests, regardless of known HIV status.~~
 - ~~(b) A laboratory that analyzes samples for any of the tests listed in R386-702-9(2)(a) shall report all results to the Department or the local health department:~~
 - ~~(i) Specific electronic reporting requirements are described in R386-702-4(2)(b).~~
 - ~~(c) Reports shall include, as available:~~
 - ~~(i) First and last name of the patient;~~
 - ~~(ii) Patient date of birth;~~
 - ~~(iii) Sex;~~
 - ~~(iv) Race;~~
 - ~~(v) Occupation;~~
 - ~~(vi) Patient phone number;~~
 - ~~(vii) Patient hospitalization status;~~
 - ~~(viii) Name and telephone number of the reporting facility;~~
 - ~~(ix) Name and telephone number of the testing laboratory;~~
 - ~~(x) Patient home and work address;~~
 - ~~(xi) Name, address, and phone number of the requesting health care provider;~~
 - ~~(xii) Specimen source;~~
 - ~~(xiii) Testing results;~~
 - ~~(xiv) Laboratory's name for, or description of, the test;~~
 - ~~(xv) Test reference range; and~~
 - ~~(xvi) Test status (e.g. preliminary, final, amended and/or corrected).~~

~~(d) Reports may be made via ELR, or in writing, by telephone, or by other electronic means acceptable to the Department as described in R386-702-4(2).]~~

~~([3]1) Partner identification and notification:~~

~~(a) [i]f an individual is tested and found to have an HIV infection, the Department and/or local health department shall provide partner services, linkage-to-care activities, and promote retention to HIV care.~~

~~([a]2) Definitions:~~

~~([i]a) "Partner" is defined as any individual, including a spouse, who has shared needles, syringes, or drug paraphernalia or who has had sexual contact with an HIV infected individual.~~

~~([i]b) "Spouse" is defined as any individual who is the marriage partner of that person at any time within the ten-year period prior to the diagnosis of HIV infection.~~

(~~iii~~c) "Linkage to care" is defined by a reported CD4+ T-Lymphocyte test and/or HIV viral load determination within three months of HIV positive diagnosis.

(~~iv~~d) "Retention to care" is defined by a reported CD4+ T-Lymphocyte test or HIV viral load determination twice within a 12-month period and at least three months apart.

(~~b~~3) Partner services include:

(~~i~~a) Confidential partner notification within 30 days of receiving a positive HIV result;

(~~ii~~b) Prevention counseling;

(~~iii~~c) Testing for HIV;

(~~iv~~d) Providing recommendations for testing for other sexually transmitted diseases;

(~~v~~e) Providing recommendations for hepatitis screening and vaccination;

(~~iv~~f) Treatment or linkage to medical care within three months of HIV diagnosis; and

(~~v~~g) Linkage or referral to other prevention services and support.

~~_____ (4) A university or hospital that conducts research studies exempt from reporting AIDS and HIV infection under Section 26-6-3.5 shall submit the following to the Department:~~

~~_____ (a) A summary of the research protocol including funding sources and justification for requiring anonymity;~~

~~_____ (b) Written approval of the Utah Department of Health institutional review board; and~~

~~_____ (c) A final report indicating the number of HIV positive and HIV negative individuals enrolled in the study.]~~

R386-702-1[0]6. Special Measures to Prevent Perinatal and Person-to-Person Transmission of Hepatitis B Infection.

(1) A licensed healthcare provider who provides prenatal care shall routinely test each pregnant woman for hepatitis B surface antigen (HBsAg) at an early prenatal care visit. The provisions of this section do not apply if the pregnant woman, after being informed of the possible consequences, objects to the test on the basis of religious or personal beliefs.

(2) The licensed healthcare provider who provides prenatal care sh~~ould~~all repeat the HBsAg test during late pregnancy for those women who tested negative for HBsAg during early pregnancy, but who are at high risk based on:

(a) evidence of clinical hepatitis during pregnancy;

(b) injection drug use;

(c) occurrence during pregnancy or a history of a sexually transmitted disease;

(d) occurrence of hepatitis B in a household or close family contact; or

(e) the judgment of the healthcare provider.

(3) In addition to other reporting required by this rule, each positive HBsAg result detected in a pregnant woman shall be reported to the local health department or the [~~Utah~~]Department[~~of Health~~], as specified in Section 26-6-6. That report shall indicate that the woman was pregnant at time of testing if that information is available to the reporting entity.

(4) A licensed healthcare provider who provides prenatal care shall document a woman's HBsAg test results, or the basis of the objection to the test, in the medical record for that patient.

(5) Every hospital and birthing facility shall develop a policy to assure that:

(a) when a pregnant woman is admitted for delivery, or for monitoring of pregnancy status, the result from a test for HBsAg performed on that woman during that pregnancy is available for review and documented in the hospital record;

(b) when a pregnant woman is admitted for delivery, if the woman's test result is not available to the hospital or birthing facility, the mother is tested for HBsAg as soon as possible, but before discharge from the hospital or birthing facility;

(c) if a pregnant woman who has not had prenatal care during that pregnancy is admitted for monitoring of pregnancy status only, and if the woman's test result is not available to the hospital or birthing facility, the mother is tested for HBsAg status before discharge from the hospital or birthing facility;

(d) positive HBsAg results identified by testing performed or documented during the hospital stay are reported as specified in this rule;

(e) infants born to HBsAg positive mothers receive hepatitis B immune globulin (HBIG) and hepatitis B vaccine, administered at separate injection sites, within 12 hours of birth;

(f) infants born to mothers whose HBsAg status is unknown receive hepatitis B vaccine within 12 hours of birth, and if the infant is born preterm with birth weight less than 2,000 grams, that infant also receives HBIG within 12 hours; and

(g) if at the time of birth the mother's HBsAg status is unknown and the HBsAg test result is later determined to be positive, that infant receives HBIG as soon as possible but within 7 days of birth.

(h) hepatitis B immune globulin (HBIG) administration and birth dose hepatitis B vaccine status of infants born to mothers who are HBsAg-positive[, or whose status is unknown,] are reported within 24 hours of delivery to the local health department and Utah Department of Health Immunization Program at (801) 538-9450.

(6) Local health departments shall perform the following activities or assure that they are performed:

(a) All females between the ages of 12 and 50 years at the time an HBsAg positive test result is reported will be screened for pregnancy status within one week of receipt of that lab result.

(b) Infants born to HBsAg positive mothers complete the hepatitis B vaccine series as specified in the most current version of "The Red Book" as cited in R386-702-13 (4).

(c) Children born to HBsAg positive mothers are tested for HBsAg and antibody against hepatitis B surface antigen (anti-HBs) at 9 to 12[8] months of age (testing is done at least one month after the final dose of hepatitis B vaccine series is administered, and no earlier than 9 months of age) to monitor the success of therapy and identify cases of perinatal hepatitis B infection.

(i) Children who test negative for HBsAg and do not demonstrate serological evidence of immunity against hepatitis B when tested as described in (c) receive three additional vaccine doses and are retested as specified in the most current version of "The Red Book" as cited in R386-702-13 (4).

(d) HBsAg positive mothers are advised regarding how to reduce their risk of transmitting hepatitis B to others.

(e) Household members and sex partners of HBsAg positive mothers are evaluated to determine susceptibility to hepatitis B infection and if determined to be susceptible, are offered or advised to obtain vaccination against hepatitis B.

([f]i) All identified acute hepatitis B cases shall be investigated by the local health department, and identified household and sexual contacts shall be advised to obtain vaccination against hepatitis B.

(7) The provisions of subsections (5) and (6) do not apply if the pregnant woman or the child's guardian, after being informed of the possible consequences, objects to any of the required procedures on the basis of religious or moral beliefs. The hospital or birthing facility shall document the basis of the objection.

(8) Prevention of transmission by individuals with chronic hepatitis B infection.

(i)a) ~~The Department defines a chronic hepatitis B case as a person that is HBsAg positive, [and] total antibody against hepatitis B core antigen (anti-HBc) positive (if [done] performed) and IgM anti-HBc negative.~~

(a)b) An individual with chronic hepatitis B infection shall be advised regarding how to reduce the risk that the individual will transmit hepatitis B to others.

(b)c) Household members and sex partners of individuals with chronic hepatitis B infection shall be evaluated to determine susceptibility to hepatitis B infection, and if determined to be susceptible, shall be offered or advised to obtain vaccination against Hepatitis B.

R386-702-1[4]7. Public Health Emergency.

(1) Declaration of Emergency: With the Governor's and Executive Director's or in the absence of the Executive Director, his designee's, concurrence, the Department or a local health department may declare a public health emergency by issuing an order mandating reporting emergency illnesses or health conditions specified in sections R386-702-3 for a reasonable time.

(2) For purposes of an order issued under this section and for the duration of the public health emergency, the following definitions apply.

(a) "emergency center" means:

(i) a health care facility licensed under the provisions of [Title 26,] Chapter 26-21[Utah Code,] that operates an emergency department; or

(ii) a clinic that provides emergency or urgent health care to an average of 20 or more persons daily.

(b) "encounter" means an instance of an individual presenting at the emergency center who satisfies the criteria in section R386-702-3(2); and

(c) "diagnostic information" means an emergency center's records of individuals who present for emergency or urgent treatment, including the reason for the visit, chief complaint, results of diagnostic tests, presenting diagnosis, and final diagnosis, including diagnostic codes.

(3) Reporting Encounters: The Department shall designate the fewest number of emergency centers as is practicable to obtain the necessary data to respond to the emergency.

(a) Designated emergency centers shall report using the process described in R386-702-4.

(b) An emergency center designated by the Department shall report the encounters to the Department by:

(i) allowing Department representatives or agents, including local health department representatives, to review its diagnostic information to identify encounters during the previous day; or

(ii) reviewing its diagnostic information on encounters during the previous day and reporting all encounters by 9:00 a.m. the following day, or

(iii) identifying encounters and submitting that information electronically to the Department, using a computerized analysis method, and reporting mechanism and schedule approved by the Department; or

(iv) by other arrangement approved by the Department.

(4) For purposes of epidemiological and statistical analysis, the emergency center shall report on encounters during the public health emergency that do not meet the definition for a reportable emergency illness or health condition. The report shall be made using the process described in R386-702-4 and shall include the following information for each such encounter:

(a) facility name;

(b) date of visit;

(c) time of visit;

(d) patient's age;

(e) patient's sex;

(f) patient's zip code for patient's residence.

(5) If either the Department or a local health department collects identifying health information on an individual who is the subject of a report made mandatory under this section, it shall destroy that identifying information upon the earlier of its determination that the information is no longer necessary to carry out an investigation under this section or 180 days after the information was collected. However, the Department and local health departments shall retain identifiable information gathered under other sections of this rule or other legal authority.

(6) Reporting on encounters during the public health emergency does not relieve a reporting entity of its responsibility to report under other sections of this rule or other legal authority.

~~**R386-702-12. Penalties.**~~

~~Any person who violates any provision of R386-702 may be assessed a penalty as provided in Section 26-23-6.~~

R386-702-1[3]8. Official References.

All treatment and management of individuals and animals who have or are suspected of having a communicable or infectious disease that must be reported pursuant to this rule shall comply with the following documents, which are adopted and incorporated by reference:

(1) American Public Health Association. "Control of Communicable Diseases Manual". 20th ed., Heymann, David L., editor, 2015.

(2) Centers for Disease Control and Prevention. "Human Rabies Prevention---United States, 2008: Recommendations of the Advisory Committee on Immunization Practices." Morbidity and Mortality Weekly Report. 57 (RR03) (2008):1-26, 28.

(3) National Association of State Public Health Veterinarians Committee. "Compendium of Animal Rabies Prevention and Control, 201[+]6." Naspvh.org. National Association of State Public Health Veterinarians, [31 May 201+]18 October 2016. Web. http://naspvh.org/Documents/NASPHV_RabiesCompendium.pdf

(4) American Academy of Pediatrics. "Red Book: 2012 Report of the Committee on Infectious Diseases" 30th Edition. Elk Grove Village, IL, American Academy of Pediatrics; 2015.

(5) National Association of State Public Health Veterinarians Animal Contact Compendium Committee 2013. "Compendium of Measures to Prevent Disease Associated with Animals in Public Settings, 2013." Journal of the American Veterinary Medicine Association 243 (2013): 1270-288.

KEY: communicable diseases, quarantines, rabies, rules and procedures

Date of Enactment or Last Substantive Amendment: [February 11, 2016]2017

Notice of Continuation: April 15, 2016

Authorizing, and Implemented or Interpreted Law: 26-1-30; 26-6-3; 26-23b

**Health, Family Health and
Preparedness, Emergency Medical
Services
R426-9
Trauma and EMS System Facility
Designations**

NOTICE OF PROPOSED RULE

(Amendment)

DAR FILE NO.: 41029

FILED: 11/28/2016

RULE ANALYSIS

PURPOSE OF THE RULE OR REASON FOR THE CHANGE: The amendment incorporates criteria for Level 1 and Level 2 trauma center designations. It is based on national guidance to promote efficiency, cost effectiveness, and better patient care objectives. The amendments were approved and supported by the Utah Trauma System Advisory Committee and the Utah EMS Committee.

SUMMARY OF THE RULE OR CHANGE: The amendments include the process whereby Level 1 and Level 2 trauma centers applications can be made and evaluated for need. The intent is to provide a fair method of determining if additional Level 1 or Level 2 trauma centers are needed for a given population center. The process will reduce unnecessary over-designation. Excessive numbers of Level 1 and Level 2 trauma centers would increase the cost to the overall system. It would not allow sufficient types of patients to be routinely treated, and thereby reduce the proficiency of specialized skill sets currently utilized in Level 1 and Level 2 trauma centers.

STATUTORY OR CONSTITUTIONAL AUTHORIZATION FOR THIS RULE: Title 26, Chapter 8a

ANTICIPATED COST OR SAVINGS TO:

◆ **THE STATE BUDGET:** There is no anticipated fiscal impact to the state budget because amendments update and clarify

designation requirements based on need for additional trauma centers.

◆ **LOCAL GOVERNMENTS:** There is no anticipated fiscal impact to local government budgets because amendments establish designation based on need for additional trauma centers.

◆ **SMALL BUSINESSES:** There is no impact on small businesses. These amendments pertain to large hospitals at the highest designation levels.

◆ **PERSONS OTHER THAN SMALL BUSINESSES, BUSINESSES, OR LOCAL GOVERNMENTAL ENTITIES:** There is no anticipated fiscal impacts. The amendments will establish hospital trauma designation levels based on need following national guidelines established by the American College of Surgeons. This prevents the designation of Level I and II trauma centers when none are required. It will allow for additional Level I and II trauma centers when the need is demonstrated.

COMPLIANCE COSTS FOR AFFECTED PERSONS: Affected persons will not have any additional compliance costs. The amendments will possibly reduce the over-designation of higher levels of care, thereby maintaining current cost and preventing unnecessary costs.

COMMENTS BY THE DEPARTMENT HEAD ON THE FISCAL IMPACT THE RULE MAY HAVE ON BUSINESSES: The proposed amendment modifies the process of how an entity can apply to be a Level 1 or Level 2 trauma center and the criteria DOH will use in evaluating the applications for trauma center designations. The amendments were approved and supported by the Utah Trauma System Advisory Committee and the Utah EMS Committee. Since the rule clarifies the application procedures and internal evaluation criteria, it is anticipated that businesses will experience no fiscal impact beyond that required by current rule or statute. I approve publication of this proposed amendment to Rule R426-9.

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

HEALTH
FAMILY HEALTH AND PREPAREDNESS,
EMERGENCY MEDICAL SERVICES
3760 S HIGHLAND DR
SALT LAKE CITY, UT 84106
or at the Office of Administrative Rules.

DIRECT QUESTIONS REGARDING THIS RULE TO:

◆ Guy Dansie by phone at 801-273-6671, by FAX at 801-273-4165, or by Internet E-mail at gdansie@utah.gov or mail at PO BOX 142004, Salt Lake City, UT 84114-2004

INTERESTED PERSONS MAY PRESENT THEIR VIEWS ON THIS RULE BY SUBMITTING WRITTEN COMMENTS NO LATER THAN AT 5:00 PM ON 01/17/2017

THIS RULE MAY BECOME EFFECTIVE ON: 01/24/2017

AUTHORIZED BY: Joseph Miner, MD, Executive Director

R426. Health, Family Health and Preparedness, Emergency Medical Services.

R426-9. Trauma and EMS System Facility Designations.

R426-9-100. Authority and Purpose for Trauma System Standards.

(1) Authority - This rule is established under Title 26, Chapter 8a, 252, Statewide Trauma System, which authorizes the Department to:

(a) establish and actively supervise a statewide trauma system;

(b) establish, by rule, trauma center designation requirements and model state guidelines for triage, treatment, transport, and transfer of trauma patients to the most appropriate health care facility; and

(c) designate trauma care facilities consistent with the trauma center designation requirements and verification process established by the Department and applicable statutes.

(2) This rule provides standards for the categorization of all hospitals and the voluntary designation of Trauma Centers to assist physicians in selecting the most appropriate physician and facility based upon the nature of the patient's critical care problem and the capabilities of the facility.

(3) It is intended that the categorization process be dynamic and updated periodically to reflect changes in national standards, medical facility capabilities, and treatment processes. Also, as suggested by the Utah Medical Association, the standards are in no way to be construed as mandating the transfer of any patient contrary to the wishes of his attending physician, rather the standards serve as an expression of the type of facilities and care available in the respective hospitals for the use of physicians requesting transfer of patients requiring skills and facilities not available in their own hospitals.

R426-9-200. Trauma System Advisory Committee.

(1) The trauma system advisory committee, created pursuant to 26-8a-251, shall:

(a) be a broad and balanced representation of healthcare providers and health care delivery systems; and

(b) conduct meetings in accordance with committee procedures.

(2) The Department shall appoint committee members to serve terms from one to four years.

(3) The Department may re-appoint committee members for one additional term in the position initially appointed by the Department.

(4) Causes for removal of a committee member include the following:

(a) more than two unexcused absences from meetings within 12 calendar months;

(b) more than three excused absences from meetings within 12 calendar months;

(c) conviction of a felony; or

(d) change in organizational affiliation or employment which may affect the appropriate representation of a position on the committee for which the member was appointed.

R426-9-300. Trauma Center Categorization Guidelines.

The Department adopts as criteria for Level I, Level II, Level III, IV and Pediatric trauma center designation, compliance with national standards published in the American College of Surgeons document: Resources for Optimal Care of the Injured Patient 2014.

R426-9-400. Trauma Center Review Process.

(1) The Department shall conduct a quality review site visit of trauma centers and applicants to verify compliance with standards set in R426-9-300. In conducting each evaluation, the Department may consult with experts from the following disciplines:

- (a) trauma surgery;
- (b) emergency medicine;
- (c) emergency or critical care nursing; and
- (d) hospital administration.

(2) A consultant shall not assist the Department in evaluating a facility in which the consultant is employed, practices, or has any financial interest.

R426-9-500. Trauma Center Categorization Process.

The Department shall:

(1) Develop a survey document based upon the Trauma Center Criteria described in R426-9-300.

(2) Periodically survey all Utah hospitals which provide emergency trauma care to determine the maximum level of trauma care which each is capable of providing.

(3) Disseminate survey results to all Utah hospitals, and as appropriate, to ~~[state EMS agencies]~~ Utah licensed ambulance providers.

~~**R426-9-600. Trauma Center Designation Process.**~~

~~(1) Hospitals seeking voluntary designation and all designated Trauma Centers desiring to remain designated, shall apply for designation by submitting the following information to the Department at least 30 days prior to the date of the scheduled site visit:~~

~~(a) A completed and signed application and appropriate fees for trauma center verification;~~

~~(b) a letter from the hospital administrator of continued commitment to comply with current trauma center designation standards as applicable to the applicant's designation level;~~

~~(c) the data specified under R426-9-700 are current;~~

~~(d) Level I and Level II Trauma Centers must submit a copy of the Pre-review Questionnaire (PRQ) from the American College of Surgeons in lieu of the application in 1a above.~~

~~(e) Level III Level IV and Level V trauma centers must submit a complete Department approved application.~~

~~(2) Hospitals desiring to be designated as Level I and Level II Trauma Centers must be verified by the American College of Surgeons (ACS) within three (3) months of the expiration date of previous designation and must submit a copy of the full ACS report detailing the results of the ACS site visit. A Department representative must be present during the entire ACS verification or consultation visit. Hospitals desiring to be Level III or Level IV Trauma Centers must be designated by hosting a formal site visit by the Department.~~

~~_____ (3) The Department and its consultants may conduct observation, review and monitoring activities with any designated trauma center to verify compliance with designation requirements.~~

~~_____ (4) Trauma centers shall be designated for a period of three years unless the designation is rescinded by the Department for non-compliance to standards set forth in R426-9-600 or adjusted to coincide with the American College of Surgeons verification timetable.~~

~~_____ (5) The Department shall disseminate a list of designated trauma centers to all Utah hospitals, and state EMS agencies, and as appropriate, to hospitals in nearby states which refer patients to Utah hospitals.]~~

R426-9-600. Trauma Center Designation Process.

_____ (1) Hospitals seeking voluntary designation and all designated Trauma Centers desiring to remain designated, shall apply for designation by submitting the following information to the Department at least 30 days prior to the date of the scheduled site visit:

_____ (a) a completed and signed application and appropriate fees for trauma center verification;

_____ (b) a letter from the hospital administrator of continued commitment to comply with current trauma center designation standards as applicable to the applicant's designation level;

_____ (c) the data specified under R426-9-7 are current;

_____ (d) Level I and Level II Trauma Centers must submit a copy of the Pre-review Questionnaire (PRO) from the American College of Surgeons in lieu of the application in 1a above;

_____ (e) Level III and Level IV and Level V trauma centers must submit a complete Department approved application.

_____ (2) Hospitals desiring to be designated as Level I and Level II Trauma Centers must be verified by the American College of Surgeons (ACS) within three (3) months of the expiration date of previous designation and must submit a copy of the full ACS report detailing the results of the ACS site visit. A Department representative must be present during the entire ACS verification or consultation visit. Hospitals desiring to be Level III or Level IV Trauma Centers must be designated by hosting a formal site visit by the Department.

_____ (3) Hospitals not previously designated as a Level I or a Level II trauma center, applying for designation after December 31, 2016, will be considered for designation implementing the point system suggested by the American College of Surgeons as follows and using data from the Utah Trauma Registry:

_____ (a) population as defined by the federal Office of Management and Budget total Metropolitan Statistical Area (MSA);

_____ (i) total MSA population of less than 600,000 receives 2 points.

_____ (ii) total MSA population of 600,000 to 1,200,000 receives 4 points.

_____ (iii) total MSA population of 1,200,000 to 1,800,000 receives 6 points.

_____ (iv) total MSA population of 1,800,000 to 2,400,000 receives 8 points.

_____ (v) total MSA population of greater than 2,400,000 receives 10 points.

_____ (b) Median Transport Times (combined air and ground -- scene only no transfer);

_____ (i) median transport time of less than 10 minutes received 0 points.

_____ (ii) median transport time of 10 -- 20 minutes receives 1 points.

_____ (iii) median transport time of 21 -- 30 minutes receives 2 points.

_____ (iv) median transport time of 31 -- 40 minutes receives 3 points.

_____ (v) median transport time of greater than 41 minutes receives 4 points.

_____ (c) Department/System Stakeholder/Community Support:

_____ (i) Department support for a trauma center(if none exist)or an additional trauma center in the MSA -- 5 points.

_____ (ii) Department position that no additional trauma centers are needed -- negative 5 points.

_____ (iii) Trauma System Advisory Committee (or equivalent body) statement of support for a trauma center (if none exist) or an additional trauma center in the MSA -- 5 points.

_____ (iv) community support demonstrated by letters of support from 25- 50% of city and county governing bodies within the MSA -- 1 points.

_____ (v) community support demonstrated by letters of support from over 50% of city and county governing bodies within the MSA -- 2 points.

_____ (d) Severely injured patients (ISS more than 15) discharged from acute care facilities not designated as Level I, II, or III trauma centers:

_____ (i) discharges of 0-200 severely injured patients receives 0 points.

_____ (ii) discharges of 201 -- 400 severely injured patients receives 1 points.

_____ (iii) discharges of 401 -- 600 severely injured patients receives 2 points.

_____ (iv) discharges of 601 -- 800 severely injured patients receives 3 points.

_____ (v) discharges of greater than 800 severely injured patients receives 4 points.

_____ (e) Level I Trauma Centers:

_____ (i) for the existence of each verified Level I trauma center already in the MSA assign 1 negative point.

_____ (ii) for the existence of each verified Level II trauma center already in the MSA assign 1 negative point.

_____ (iii) for the existence of each verified Level III trauma center already in the MSA assign 0.5 negative points.

_____ (f) Numbers of severely injured patients (ISS more than 15) seen in trauma centers (Level I and II) already in the MSA. The expected number of high-ISS patients is calculated as: $500 \times (\text{Number of Level I and Level II centers in the MSA}) = (\text{Expected Number of high ISS patients});$

_____ (i) if the MSA has more than 500 severely injured patients above the expected number assign 2 points.

_____ (ii) if the MSA has 0 - 500 severely injured patients above the expected number assign 1 point.

_____ (iii) if the MSA has 0 - 500 fewer severely injury patients than the expected number assign 1 negative point.

_____ (iv) if the MSA has more than 500 fewer severely injured patients than the expected number assign 2 negative points.

(g) The following scoring system shall be used to allocate trauma centers within the MSAs:

(i) MSAs with scores of 5 points or less shall be allocated 1 Level I or II trauma center;

(ii) MSAs with scores of 6 - 10 points shall be allocated 2 Level I or II trauma centers;

(iii) MSAs with score of 11 - 15 points shall be allocated 3 Level I or II trauma centers;

(iv) MSAs with scores of 16 - 20 points shall be allocated 4 Level I or II trauma centers.

(h) If the number of trauma centers allocated by the model is greater than the existing number of Level I or II trauma centers in the MSA, efforts should be undertaken to recruit and designate additional trauma centers.

(i) If the number of Level I and II trauma centers allocated by the model is less than or equal to the number currently designated, the Department should not designate additional Level I or II trauma centers in the MSA.

R426-9-700. Data Requirements for an Inclusive Trauma System.

(1) All hospitals shall collect, and monthly submit to the Department, Trauma Registry information necessary to maintain an inclusive trauma system. Designated trauma centers shall provide such data in a standardized electronic format approved by the Department. The Department shall provide funds to hospitals, excluding designated trauma centers, for the data collection process. In order to ensure consistent patient data collection, a trauma patient is defined as a patient sustaining a traumatic injury and meeting the following criteria:

(a) At least one of the following injury diagnostic codes: ICD10 Diagnostic Codes: S00-S00 with 7th character modifiers of A, B, or C only, T07, T14, T20-T28 with 7th character modifier of A, T30-T32, T79.A1-T79.A9 with 7th character modifier of A excluding the following isolated injuries: S00, S10, S20, S30, S40, S50, S60, S70, S80, S90. Late effect codes, which are represented using the same range of injury diagnosis codes but with the 7th digit modifier code of D through S are also excluded; and

(b) At least one of the following patient conditions:

Stay at a hospital greater than 12 hours (as measured from the Emergency Department arrival to patient discharge); transferred in or out of reporting hospital via EMS transport (including air ambulance); death resulting from the traumatic injury (independent of hospital admission or hospital transfer status).

(c) The Department adopt by reference the National Trauma Data Standard Data Dictionary for 2016 Admissions published by the American College of Surgeons, and the Utah Trauma Registry State Required Elements for 2016 published by the Department.

R426-9-800. Trauma Triage and Transfer Guidelines.

The Department adopts by reference the 2009 Resources and Guidelines for the Triage and Transfer of Trauma Patients published by the Utah Department of Health as model guidelines for triage, transfer, and transport of trauma patients. The guidelines do not mandate the transfer of any patient contrary to the judgment of the attending physician. They are a resource for pre-hospital and hospital providers to assist in the triage, transfer and transport of

trauma patients to designated trauma centers or acute care hospitals which are appropriate to adequately receive trauma patients.

R426-9-900. Noncompliance to Trauma Standards.

(1) The Department may warn, reduce, deny, suspend, revoke, or place on probation a facility designation, if the Department finds evidence that the facility has not been or will not be operated in compliance to standards adopted under R426-9-300.

(2) A hospital, clinic, health care provider, or health care delivery system may not profess or advertise to be designated as a trauma center if the Department has not designated it as such pursuant to this rule.

R426-9-1000. Resource Hospital Minimum Designation Requirements.

A Resource Hospital shall meet the following minimum requirements for designation:

(1) Be licensed in Utah or another state as a general acute hospital or be a Veteran's Administration hospital operating in Utah;

(2) Have the ability to communicate with other EMS providers operating in the area;

(3) Provide on-line medical control for all pre-hospital EMS providers who request assistance for patient care, 24 hours-a-day, seven days a week;

(4) Create and abide by written pre-hospital emergency patient care protocols for use in providing on-line medical control for pre-hospital EMS providers;

(5) Train new staff on the protocols before the new staff is permitted to provide on-line medical control and annually review protocols with physician and nursing staff;

(6) Annually provide in-service training on the protocols to all physicians and nurses who provide on-line medical control;

(7) Make the protocols immediately available to staff for reference;

(8) Provide on-line medical control which shall include:

(a) direct voice communication with a physician; or

(b) a registered nurse or physician's assistant, who shall to be licensed in Utah, who is in voice contact with a physician;

(9) Implement a quality improvement process which shall include:

(a) representatives from local EMS providers that routinely transport patients to the resource hospital;

(b) quarterly meetings; and

(c) minutes of the quality improvement meetings which are available for Department review;

(10) Identify a coordinator for the pre-hospital quality improvement process;

(11) Cooperate with the pre-hospital EMS providers' off-line medical directors in the quality review process, including granting access to hospital medical records of patients served by the particular pre-hospital EMS provider;

(12) Participate in local and regional forums for performance improvement; and

(13) Assist the Department in evaluating EMS system effectiveness by submitting to the Department, in an electronic format quarterly data specified by the Department.

(14) Designated Trauma Centers are deemed to meet the Resource Hospital standards and are exempt from requirements outlined in this section.

R426-9-1100. Stroke Treatment and Stroke Receiving Facility Minimum Designation Requirements.

(1) A Primary or Comprehensive Stroke Treatment Center or an Acute Stroke Ready Hospital shall be accredited by the Joint Commission or other nationally recognized accrediting body.

(2) A hospital designated as a Stroke Receiving Facility for receiving stroke patients via Emergency Medical Services shall meet the following requirements:

- (a) Be licensed as an acute care hospital in Utah;
- (b) Require physician response to the emergency department in less than thirty (30) minutes for treatment of stroke patients;
- (c) Maintain the ability of physician and nursing staff to utilize a standardized assessment tool for ischemic stroke patients;
- (d) Maintain and utilize approved thrombolytic medications for treatment of patients meeting criteria for administration of thrombolytic therapy;
- (e) Establish a standardized acute stroke protocol and authorize appropriate emergency department staff to implement the protocol when appropriate;
- (f) Have ancillary equipment and personnel available to diagnose and treat acute stroke patients in a timely manner;
- (g) Establish patient transport protocols with designated stroke treatment centers;
- (h) Have a performance improvement program for acute stroke care and report data as required by the Department; and
- (i) Submit to a site visit by representatives of the Department.

(3) Upon designation, the Department may, in consultation with off line EMS medical direction and protocol, recommend direct transport of stroke patients to a Stroke Receiving Center or a Stroke Treatment Center by ~~[an EMS agency]~~ licensed ambulance provider.

R426-9-1200. Percutaneous Coronary Intervention Center Minimum Designation Requirements.

(1) A Percutaneous Coronary Intervention (PCI) Center, for the purpose of receiving acute ST-elevation myocardial infarction (STEMI) patients via ~~[EMS]~~ an ambulance, shall meet the following minimum designation requirements:

- (a) Be licensed as an acute care hospital in Utah;
- (b) Maintain an emergency department staffed by at least one (1) Physician and one (1) Registered Nurse at all times;
- (c) Have the ability to receive 12 lead EKG data from ~~[EMS agencies]~~ licensed ambulance providers transporting patients to the hospital for treatment of ST Segment Elevation Myocardial Infarction (STEMI);
- (d) Maintain the ability to provide cardiac catheterization and PCI of STEMI patients within ninety (90) minutes of patient arrival in the emergency department twenty four (24) hours a day and seven (7) days a week;
- (e) Maintain a performance improvement program for STEMI care and report data to the Department as required by the Department; and
- (f) Submit to a site visit by representatives of the Department.

(2) Upon designation, the Department may, in consultation with offline EMS medical direction and protocol, recommend direct transport of STEMI patients to a STEMI Treatment Center by ~~[an EMS agency]~~ a licensed ambulance provider.

(3) The PCI designation and re-designation period shall be for a period of three years.

R426-9-1300. Patient Receiving Facility Minimum Designation Requirements.

(1) A Patient Receiving Facility shall meet the following minimum designation requirements:

- (a) Have the ability to communicate with ~~[pre-hospital EMS]~~ licensed and designated EMS providers;
- (b) Be staffed or have on-call physician, physician assistant, or nurse practitioner availability during designated hours with a response time of less than 20 minutes;
- (c) Have and maintain ACLS and PALS certification;
- (d) Attend meetings of the local EMS council, if one exists, to participate in the coordination and operations of local licensed and designated EMS providers;
- (e) Abide by off-line protocols approved by the ~~[EMS]~~ licensed ambulance provider's off-line medical director;
- (f) Train staff on protocols used by the ~~[EMS]~~ licensed ambulance providers who transport patients to the Patient Receiving Facility;

(g) Implement a quality improvement process of all patients received at the patient receiving facility with the local resource hospital or trauma center including access to medical records for patients transported by ambulance;

(h) Maintain equipment, services and medications on-site to provide Advanced Life Support (ALS) intervention and appropriate treatment. Equipment and services shall include:

- (i) ECG;
- (ii) ACLS medications;
- (iii) laboratory services;
- (iv) radiology services;
- (v) oxygen delivery systems;
- (vi) airway support equipment and supplies;
- (vii) suction equipment and supplies; and,

(i) Submit to a yearly site visit by representatives of the Department; and

(j) Submit monthly data reports to the Department on all patients received by an ambulance, and in an electronic format provided by the Department.

(2) The Department may recommend the preferential transportation of STEMI patients by ambulance to a Patient Receiving Facility.

KEY: emergency medical services, trauma, reporting, trauma center designation

Date of Enactment or Last Substantive Amendment: ~~July 15, 2016~~ 2017

Authorizing, and Implemented or Interpreted Law: 26-8a-252

Judicial Performance Evaluation
Commission, Administration
R597-3-8
Judicial Written Statements

NOTICE OF PROPOSED RULE
(Amendment)

DAR FILE NO.: 41026
FILED: 11/17/2016

RULE ANALYSIS

PURPOSE OF THE RULE OR REASON FOR THE CHANGE: The part of the statute on which this rule amendment is based was used for the first time this spring. Creating a deadline for written statements will standardize the way the Judicial Performance Evaluation Commission (JPEC) collects them from judges.

SUMMARY OF THE RULE OR CHANGE: The rule amendment imposes a due date for written statements on judges eligible to provide one to JPEC.

STATUTORY OR CONSTITUTIONAL AUTHORIZATION FOR THIS RULE: Section 78A-12-206

ANTICIPATED COST OR SAVINGS TO:

- ◆ THE STATE BUDGET: The change has no impact on the state budget because it only imposes a deadline on judges for submission of written statements.
- ◆ LOCAL GOVERNMENTS: The change has no impact on local governments because it only imposes a deadline on judges for submission of written statements.
- ◆ SMALL BUSINESSES: The commission has no authority with respect to small businesses and no dealings with small businesses; consequently, there is no impact on such entities.
- ◆ PERSONS OTHER THAN SMALL BUSINESSES, BUSINESSES, OR LOCAL GOVERNMENTAL ENTITIES: The only affected persons are the judges who are eligible to submit a written statement to JPEC, pursuant to Subsection 78A-12-206(3).

COMPLIANCE COSTS FOR AFFECTED PERSONS: This rule amendment imposes a deadline. There are no associated compliance costs.

COMMENTS BY THE DEPARTMENT HEAD ON THE FISCAL IMPACT THE RULE MAY HAVE ON BUSINESSES: It is my opinion that application of this amendment will not create any fiscal impact.

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

ADMINISTRATION
ROOM B-330 SENATE BUILDING
420 N STATE ST
SALT LAKE CITY, UT 84114
or at the Office of Administrative Rules.

DIRECT QUESTIONS REGARDING THIS RULE TO:

◆ Jennifer Yim, or by Internet E-mail at jyim@utah.gov or mail at PO BOX 142330, Salt Lake City, UT 84114-2330

INTERESTED PERSONS MAY PRESENT THEIR VIEWS ON THIS RULE BY SUBMITTING WRITTEN COMMENTS NO LATER THAN AT 5:00 PM ON 01/17/2017

THIS RULE MAY BECOME EFFECTIVE ON: 01/24/2017

AUTHORIZED BY: John Ashton, Chair

R597. Judicial Performance Evaluation Commission, Administration.

R597-3. Judicial Performance Evaluations.

R597-3-8. Judicial Written Statements.

If, pursuant to Utah Code Ann. Subsection 78A-12-206(3), a judge is eligible to provide a written statement to be included in the judge's evaluation report, the statement shall be due to commission staff, in writing, no later than one week after the deadline for the judge to file a declaration of the judge's candidacy in the retention election.

KEY: judicial performance evaluations, judges, evaluation cycles, surveys

Date of Enactment or Last Substantive Amendment: [~~April 20,~~ 2016]2017

Notice of Continuation: February 17, 2014

Authorizing, and Implemented or Interpreted Law: 78A-12

Judicial Performance Evaluation
Commission, Administration
R597-3-9
Judicial Discipline

NOTICE OF PROPOSED RULE
(Amendment)

DAR FILE NO.: 41027
FILED: 11/17/2016

RULE ANALYSIS

PURPOSE OF THE RULE OR REASON FOR THE CHANGE: In order for the Judicial Performance Evaluation Commission (JPEC) to provide a credible evaluation of a judge, it needs to be able to consider any public sanctions of a judge that occur up until it votes on whether a judge should be recommended for retention.

SUMMARY OF THE RULE OR CHANGE: The rule expands the time period in which JPEC may consider a public sanction of a judge issued by the Utah Supreme Court. Under the rule, JPEC may consider a public sanction that is issued during the judge's evaluation cycle and after the evaluation cycle is completed and until the commission votes on whether to recommend the judge for retention.

STATUTORY OR CONSTITUTIONAL AUTHORIZATION FOR THIS RULE: Section 78A-12-205

ANTICIPATED COST OR SAVINGS TO:

- ◆ **THE STATE BUDGET:** This change has no impact on state budget because it only expands an evaluation period for one JPEC performance standard, judicial discipline.
- ◆ **LOCAL GOVERNMENTS:** This change has no impact on local government because it only expands an evaluation for one JPEC performance standard, judicial discipline.
- ◆ **SMALL BUSINESSES:** The commission has no authority with respect to small businesses and no dealings with small businesses; consequently, there is no impact on such entities.
- ◆ **PERSONS OTHER THAN SMALL BUSINESSES, BUSINESSES, OR LOCAL GOVERNMENTAL ENTITIES:** The only affected persons are judges about whom the Supreme Court has issued a public sanction and who are subject to a JPEC evaluation.

COMPLIANCE COSTS FOR AFFECTED PERSONS: This rule expands an evaluation period for a JPEC performance standard. There are no associated compliance costs.

COMMENTS BY THE DEPARTMENT HEAD ON THE FISCAL IMPACT THE RULE MAY HAVE ON BUSINESSES: It is my opinion that application of this amendment will not create any fiscal impact.

THE FULL TEXT OF THIS RULE MAY BE INSPECTED, DURING REGULAR BUSINESS HOURS, AT:
 JUDICIAL PERFORMANCE EVALUATION
 COMMISSION
 ADMINISTRATION
 ROOM B-330 SENATE BUILDING
 420 N STATE ST
 SALT LAKE CITY, UT 84114
 or at the Office of Administrative Rules.

DIRECT QUESTIONS REGARDING THIS RULE TO:
 ◆ Jennifer Yim, or by Internet E-mail at jjim@utah.gov or mail at PO BOX 142330, Salt Lake City, UT 84114-2330

INTERESTED PERSONS MAY PRESENT THEIR VIEWS ON THIS RULE BY SUBMITTING WRITTEN COMMENTS NO LATER THAN AT 5:00 PM ON 01/17/2017

THIS RULE MAY BECOME EFFECTIVE ON: 01/24/2017

AUTHORIZED BY: John Ashton, Chair

R597. Judicial Performance Evaluation Commission, Administration.

R597-3. Judicial Performance Evaluations.

R597-3-9. Judicial Discipline.

(1) For the purposes of judicial performance evaluation and pursuant to Utah Code Ann. Section 78A-12-205, the commission shall consider any public sanction of a judge issued by the Supreme Court during the judge's current term, including:

(a) During the judge's midterm and retention evaluation cycles and

(b) After the end of the judge's retention evaluation cycle until the commission votes whether to recommend the judge for retention.

KEY: judicial performance evaluations, judges, evaluation cycles, surveys

Date of Enactment or Last Substantive Amendment: [~~April 20,~~ **2016**] **2017**

Notice of Continuation: February 17, 2014

Authorizing, and Implemented or Interpreted Law: 78A-12

Natural Resources, Parks and
 Recreation

R651-411

OHV Use in State Parks

NOTICE OF PROPOSED RULE

(Amendment)

DAR FILE NO.: 41043

FILED: 12/01/2016

RULE ANALYSIS

PURPOSE OF THE RULE OR REASON FOR THE CHANGE: The Off Highway Vehicle (OHV) Program within the Division of Utah Parks and Recreation is working with the Utah State Legislature for a Recodification of Title 41, Chapter 22, and part of that process, as recommended by the Off Highway Vehicle (OHV) Advisory Council, is to clean up language for certain rules associated with Title 41, Chapter 22.

SUMMARY OF THE RULE OR CHANGE: The OHV Program within the Division of Utah Parks and Recreation is working with the Utah State Legislature for a recodification of Title 41, Chapter 22, and part of that process, as recommended by the OHV Advisory Council, is to clean up certain rules associated with Title 41, Chapter 22. Section R651-411-1 states that an "OHV" means "Off Highway Vehicle" and includes the following vehicle types: four wheel drive automobiles or trucks, all-terrain vehicles (ATVs) designed to carry one or two passengers, and snowmobiles. The language change would be consistent with current program operations, and the Utah Code definitions and would keep the Division of Utah Parks and Recreation operating within the rule.

STATUTORY OR CONSTITUTIONAL AUTHORIZATION FOR THIS RULE: Section 41-22-10 and Section 79-4-501

ANTICIPATED COST OR SAVINGS TO:

- ◆ **THE STATE BUDGET:** This rule would not increase or decrease the state budget as it streamlines consistency between the Utah Code and the rule change.
- ◆ **LOCAL GOVERNMENTS:** The rule change would not have an impact on budgets, either negative or positive, with any local government entities. It would assist with local government information dissemination as it provides consistency with Utah Code definitions.
- ◆ **SMALL BUSINESSES:** The rule change does not affect any small businesses as the rule is mainly geared towards park visitors using OHVs. Any concessionaire opportunities would already need to follow the rule.
- ◆ **PERSONS OTHER THAN SMALL BUSINESSES, BUSINESSES, OR LOCAL GOVERNMENTAL ENTITIES:** The rule changes do not cost or save any persons other than small businesses, businesses, or local government entities with funding as it merely provides consistency with the Utah Code definitions of Section 41-22-2.

COMPLIANCE COSTS FOR AFFECTED PERSONS: There are no compliance costs to affected persons. The rule changes provides consistency with the Utah Code definitions of Section 41-22-2.

COMMENTS BY THE DEPARTMENT HEAD ON THE FISCAL IMPACT THE RULE MAY HAVE ON BUSINESSES: There is no fiscal impact.

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

NATURAL RESOURCES
 PARKS AND RECREATION
 ROOM 116
 1594 W NORTH TEMPLE
 SALT LAKE CITY, UT 84116-3154
 or at the Office of Administrative Rules.

DIRECT QUESTIONS REGARDING THIS RULE TO:

- ◆ Tammy Wright by phone at 801-538-7359, by FAX at 801-538-7378, or by Internet E-mail at tammywright@utah.gov

INTERESTED PERSONS MAY PRESENT THEIR VIEWS ON THIS RULE BY SUBMITTING WRITTEN COMMENTS NO LATER THAN AT 5:00 PM ON 01/17/2017

THIS RULE MAY BECOME EFFECTIVE ON: 01/24/2017

AUTHORIZED BY: Fred Hayes, Director

R651. Natural Resources, Parks and Recreation.

R651-411. OHV Use in State Parks.

R651-411-1. Definitions.

(1) "OHV" for this section has the same meaning as defined in Subsection 41-22-2(13).~~means "off-highway vehicle" and includes the following vehicle types:~~

- ~~(a) Four wheel drive automobiles or trucks;~~
- ~~(b) All terrain vehicles (ATVs) designed to carry one or two passengers; and~~
- ~~(c) Snowmobiles.]~~

R651-411-2. OHV Use-Restrictions.

- (1) OHVs are to be used only in designated areas.
- (2) Designated ice areas for OHV use are only those ice areas that are accessed via the boat ramps to public ice fishing areas. These areas are at Bear Lake, East Canyon, Escalante, Hyrum, Jordanelle, Millsite, Otter Creek, Palisade, Piute, Red Fleet, Rockport, Scofield, Starvation, Steinaker and Yuba state parks.
- (3) Responsibility for any accidents or problems while using OHVs in state parks rests with the user.

KEY: off-highway vehicles

Date of Enactment or Last Substantive Amendment: January 24, 2017~~[July 19, 2004]~~

Notice of Continuation: January 2, 2014

Authorizing, and Implemented or Interpreted Law: 41-22-10; 79-4-501

Natural Resources, Parks and Recreation

R651-614-5

Hunting with Firearms

NOTICE OF PROPOSED RULE

(Amendment)

DAR FILE NO.: 41042

FILED: 12/01/2016

RULE ANALYSIS

PURPOSE OF THE RULE OR REASON FOR THE CHANGE: Section R651-614-5 currently conflicts with Section 76-10-508, Discharge of a firearm from a vehicle, near a highway, or in the direction of any person, building, or vehicle. Minimum distances required when discharging a firearm or other dangerous weapons outlined in Section 76-10-508 are far less restrictive than those required under Section R651-614-5. This has led to confusion with our division staff and the general public. The removal of this section will help to clarify the current law.

SUMMARY OF THE RULE OR CHANGE: Section R651-614-5 currently conflicts with Section 76-10-508. Minimum distances required when discharging a firearm or other dangerous weapon outlined in Section 76-10-508 are far less restrictive than those required under Section R651-614-5. This has led to confusion with our division staff and the general public. The current rule only applies to hunting. Recreational discharge of a firearm or dangerous weapon within park boundaries outside of state park buildings, designated camp or picnic sites, overlooks, golf courses, boat ramps and developed beaches and at least 600 feet from any buildings is currently legal. If a person is hunting with the same weapon the current rule requires a much greater minimum distance. There is no logical reason for the difference in required minimum distances between Section R651-614-5 and Section 76-10-508.

STATUTORY OR CONSTITUTIONAL AUTHORIZATION FOR THIS RULE: Section 79-4-501

ANTICIPATED COST OR SAVINGS TO:

- ◆ **THE STATE BUDGET:** No cost or savings will be incurred to the state budget since this section removal was only done to the Division of Utah Parks and Recreation into compliance with Section 76-10-508, and this change has no financial impact.
- ◆ **LOCAL GOVERNMENTS:** No cost or savings will be incurred to local government since this section removal was only done to the Division of Utah Parks and Recreation into compliance with Section 76-10-508, and this change has no financial impact.
- ◆ **SMALL BUSINESSES:** No cost or savings will be incurred to small business since this section removal was only done to bring the Division of Utah Parks and Recreation into compliance with Section 76-10-508, and this change has no financial impact.
- ◆ **PERSONS OTHER THAN SMALL BUSINESSES, BUSINESSES, OR LOCAL GOVERNMENTAL ENTITIES:** No cost or savings will be incurred to persons other than small businesses, businesses, or local government entities since this section removal was only done to bring the Division of Utah Parks and Recreation into compliance with Section 76-10-508, and this change has no financial impact.

COMPLIANCE COSTS FOR AFFECTED PERSONS: There are no compliance costs for affected persons since this section removal was done to bring the Division of Utah Parks and Recreation into compliance with Section 76-10-508.

COMMENTS BY THE DEPARTMENT HEAD ON THE FISCAL IMPACT THE RULE MAY HAVE ON BUSINESSES: This rule change should have no fiscal impact to business.

THE FULL TEXT OF THIS RULE MAY BE INSPECTED, DURING REGULAR BUSINESS HOURS, AT:
NATURAL RESOURCES
PARKS AND RECREATION

ROOM 116
1594 W NORTH TEMPLE
SALT LAKE CITY, UT 84116-3154
or at the Office of Administrative Rules.

DIRECT QUESTIONS REGARDING THIS RULE TO:

- ◆ Tammy Wright by phone at 801-538-7359, by FAX at 801-538-7378, or by Internet E-mail at tammywright@utah.gov

INTERESTED PERSONS MAY PRESENT THEIR VIEWS ON THIS RULE BY SUBMITTING WRITTEN COMMENTS NO LATER THAN AT 5:00 PM ON 01/17/2017

THIS RULE MAY BECOME EFFECTIVE ON: 01/24/2017

AUTHORIZED BY: Fred Hayes, Director

R651. Natural Resources, Parks and Recreation.

R651-614. Fishing, Hunting and Trapping.

[R651-614-5. Hunting with Firearms.

~~Hunting with rifles and handguns on park areas designated open is prohibited within one mile of all park area facilities, including, but not limited to buildings, camp/picnic sites, overlooks, golf courses, boat ramps and developed beaches. Shotguns and archery equipment are prohibited within one quarter mile of above stated areas.]~~

KEY: parks

Date of Enactment or Last Substantive Amendment: January 24, 2017[~~July 8, 2013~~]

Notice of Continuation: June 27, 2013

Authorizing, and Implemented or Interpreted Law: 79-4-501

Natural Resources, Parks and Recreation **R651-633** Special Closures or Restrictions

NOTICE OF PROPOSED RULE

(Amendment)

DAR FILE NO.: 41044

FILED: 12/01/2016

RULE ANALYSIS

PURPOSE OF THE RULE OR REASON FOR THE CHANGE: Jenny's Canyon Trail was developed in 1996. At that time, it was the only developed trail in the lower canyon of Snow Canyon State Park. When Jenny's Canyon was constructed the recommendation was made to close the trail annually from March 15 to June 1 to protect habitat and tortoises as they came out of hibernation. The seasonal closure was written into Snow Canyon State Park's Tortoise

Management Plan in 2004, as a management strategy. In 2015, the Snow Canyon Citizen Advisory Team (CAT) reviewed existing and potential recreation opportunities in Snow Canyon State Park. They discussed whether or not the need for a seasonal closure still exists. They determined to remove the closure.

SUMMARY OF THE RULE OR CHANGE: When Jenny's Canyon was constructed, the recommendation was made to close the trail annually from March 15 to June 1 to protect habitat and tortoises as they came out of hibernation. The seasonal closure was written into Snow Canyon State Park's Tortoise Management Plan in 2004 as a management strategy. Since the closure was written into the Snow Canyon Tortoise Management Plan a formal proposal was developed and as required under the Red Cliffs Desert Reserve Habitat Conservation Plan, went through review by both the Habitat Conservation Advisory and Technical Committees. In May 2016, after careful review and discussion, the Technical Committee determined that since 1996 multiple trails have been developed in the lower canyon of Snow Canyon State Park, and lifting the seasonal trail closure will not have a significant biological impact on tortoises. The Technical Committee recommended doing away with the closure. Removing the Jenny's Canyon seasonal closure was unanimously approved by the Red Cliffs Desert Reserve Habitat Conservation Advisory Committee in May of 2016. The rule change will expand access.

STATUTORY OR CONSTITUTIONAL AUTHORIZATION FOR THIS RULE: Section 79-4-203 and Section 79-4-304 and Section 79-4-501

ANTICIPATED COST OR SAVINGS TO:

◆ **THE STATE BUDGET:** There is a cost savings to state government of \$300 for sign costs and staff labor for installation of the signs. The closure signs will no longer be in place.

◆ **LOCAL GOVERNMENTS:** There are no costs or savings to local government as the trail affected is in Snow Canyon State Park and does not affect local government. The rule change will allow a longer season for access to the trail.

◆ **SMALL BUSINESSES:** Jenny's Canyon Trail is a very short rail and is seldom used by private business partners. There was never a cost to them, and there won't be a cost with the change in the rule as the change will expand access to the trail by providing a longer season.

◆ **PERSONS OTHER THAN SMALL BUSINESSES, BUSINESSES, OR LOCAL GOVERNMENTAL ENTITIES:** There is no cost or savings associated with persons other than small businesses, businesses, or local government entities because the change will allow a longer season for access to the trail.

COMPLIANCE COSTS FOR AFFECTED PERSONS: There are no compliance costs to affected persons as the change will allow a longer season for access to the trail.

COMMENTS BY THE DEPARTMENT HEAD ON THE FISCAL IMPACT THE RULE MAY HAVE ON BUSINESSES:
The rule change should have a positive impact on business.

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

NATURAL RESOURCES
PARKS AND RECREATION
ROOM 116
1594 W NORTH TEMPLE
SALT LAKE CITY, UT 84116-3154
or at the Office of Administrative Rules.

DIRECT QUESTIONS REGARDING THIS RULE TO:

◆ Tammy Wright by phone at 801-538-7359, by FAX at 801-538-7378, or by Internet E-mail at tammywright@utah.gov

INTERESTED PERSONS MAY PRESENT THEIR VIEWS ON THIS RULE BY SUBMITTING WRITTEN COMMENTS NO LATER THAN AT 5:00 PM ON 01/17/2017

THIS RULE MAY BECOME EFFECTIVE ON: 01/24/2017

AUTHORIZED BY: Fred Hayes, Director

R651. Natural Resources, Parks and Recreation.

R651-633. Special Closures or Restrictions.

R651-633-1. Emergency Closures or Restrictions.

No person shall be in a closed area or participate in a restricted activity which has been posted by the park manager to protect public safety or park resources.

R651-633-2. General Closures or Restrictions.

Persons are prohibited from being in a closed area or participating in a restricted activity as listed for the following park areas:

(1) Coral Pink Sand Dunes State Park - Motorized vehicle use is prohibited in the non-motorized area of the sand dunes, except for limited and restricted access through the travel corridor;

(2) Dead Horse State Park - Hang gliding, para gliding and B.A.S.E. jumping is prohibited;

(3) Deer Creek State Park - Dogs are prohibited below high water line and in or on the reservoir except for guide or service dogs as authorized by Section 26-30-2;

(4) Jordanelle State Park - Dogs are prohibited in the Rock Cliff area except for the Perimeter Trail and designated parking areas except for guide or service dogs as authorized by Section 26-30-2;

(5) Palisade State Park - Cliff diving is prohibited;

(6) Red Fleet State Park - Cliff diving/jumping is prohibited; and

(7) Snow Canyon State Park -

(a) All hiking and walking in the park is limited to roadways, designated trails and slick rock areas and the Sand Dunes area,

~~[(b)] Jenny's Canyon Trail is closed annually from March 15 to June 1.~~

[(e)b] The last half-mile of the Johnson Canyon Trail is closed annually from March 15 through September 14 except by permit or guided walk; this portion of trail is open from September 15 through March 14.

[(d)c] Black Rocks Canyon is closed annually from March 15 to June 30,

[(e)d] West Canyon climbing routes are closed annually from February 1 to June 1.

[(f)e] Dogs are prohibited on all trails and natural areas of the park unless posted open, except for guide or service dogs as authorized by Section 26-30-2.

[(g)f] Hang gliding, para gliding and B.A.S.E. jumping is prohibited.

KEY: parks

Date of Enactment or Last Substantive Amendment: January 24, 2017~~[March 14, 2013]~~

Notice of Continuation: July 5, 2013

Authorizing, and Implemented or Interpreted Law: 79-4-203; 79-4-304; 79-4-501

**Public Service Commission,
Administration
R746-341
Lifeline Rule**

NOTICE OF PROPOSED RULE

(Amendment)

DAR FILE NO.: 41031

FILED: 11/28/2016

RULE ANALYSIS

PURPOSE OF THE RULE OR REASON FOR THE CHANGE: The Lifeline Rule is updated to: 1) align state eligibility requirements for subsidized telephone service with federal standards; and 2) update the participant recertification process per federal guidelines.

SUMMARY OF THE RULE OR CHANGE: The changes are: 1) participation in the Low-Income Home Energy Assistance Program (LIHEAP), the Temporary Assistance to Needy Families (TANF) program, or the National School Lunch Program's Free Lunch program will no longer qualify a Utah consumer for subsidized telephone service under the Lifeline program; 2) results of annual recertification efforts must be reported to eligible telecommunications carriers by the first business day of the month in which the verification was last performed; and 3) a participant who becomes ineligible for the Lifeline program must be given 60 days notice before being de-enrolled.

STATUTORY OR CONSTITUTIONAL AUTHORIZATION FOR THIS RULE: Section 54-4-1 and Section 54-4-4 and Subsection 54-8b-15(7)

ANTICIPATED COST OR SAVINGS TO:

◆ **THE STATE BUDGET:** The state has been administering the Lifeline program for many years and has the budget in place to continue that function. The modification to the eligibility and participant verification rules will not affect the state's administrative duties. No fiscal impact to the state is anticipated.

◆ **LOCAL GOVERNMENTS:** Local governments are not required to enforce or comply with the Lifeline rules. No fiscal impact to local government is anticipated.

◆ **SMALL BUSINESSES:** Small businesses that provide Lifeline telephone service must modify their eligibility review process. While doing so will require some attention, these changes do not create new costs for providers.

◆ **PERSONS OTHER THAN SMALL BUSINESSES, BUSINESSES, OR LOCAL GOVERNMENTAL ENTITIES:** Individuals who have been qualifying for the Lifeline program through participation in the LIHEAP, the TANF program, or the National School Lunch Program's Free Lunch program will have to demonstrate participation in a different low-income assistance program or provide financial information in order to continue participating. It is not anticipated that any individuals who are currently participating in the Lifeline program will lose the subsidy due to the new eligibility programs.

COMPLIANCE COSTS FOR AFFECTED PERSONS: To comply, an affected Lifeline service provider must make minor changes to its eligibility review process. No associated costs are anticipated. An affected Lifeline service recipient must demonstrate participation in a low-income assistance program other than the LIHEAP, the TANF program, or the National School Lunch Program's Free Lunch program in order to retain subsidized telephone service. A service recipient who does not participate in any of the approved low-income assistance programs may still qualify by demonstrating that yearly household income is less than 135% of the federal poverty level. No associated costs are anticipated.

COMMENTS BY THE DEPARTMENT HEAD ON THE FISCAL IMPACT THE RULE MAY HAVE ON BUSINESSES: As explained in the rule analysis, the proposed amendments address administrative duties that are already being performed by affected businesses. These amendments do not impose new costs or result in any other fiscal impact for affected 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 Office of Administrative Rules.

DIRECT QUESTIONS REGARDING THIS RULE TO:

- ◆ Jennie Jonsson by phone at 801-530-6763, or by Internet E-mail at jjonsson@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 01/17/2017

THIS RULE MAY BECOME EFFECTIVE ON: 01/24/2017

AUTHORIZED BY: Jennie Jonsson, Administrative Law Judge

R746. Public Service Commission, Administration.

R746-341. Lifeline Rule.

R746-341-3. Eligibility Requirements.

A. Initial Program-Based Criteria -- An ETC shall provide Lifeline telephone service to an applicant's household which, using an approved application form, is verified by either the program administrator (for State ETCs), or by a federal ETC, in compliance with the procedures set forth in 47 CFR 54.410(c), to be eligible for public assistance under one of the following or its successor programs:

1. Medicaid;
2. Supplemental Nutrition Assistance Program (SNAP or Food Stamps);
3. Supplemental Security Income (SSI);
4. Federal Public Housing Assistance (Section 8); or
5. ~~[Low Income Home Energy Assistance Program (LIHEAP);]~~ Veterans Pension and Survivors Pension Benefit;
6. ~~Temporary Assistance to Needy Families (TANF); or~~
7. ~~National School Lunch Program's Free Lunch Program.]~~

B. Tribal Residents -- A consumer who lives on Tribal lands is eligible for Lifeline service as a "qualifying low-income consumer" as defined by Section 54.400(a) and as an "eligible resident of Tribal lands" as defined by Section 54.400(e) if that consumer meets the qualifications for Lifeline specified Section A. or if the consumer, one or more of the consumer's dependents, or the consumer's household participates in one of the following Tribal-specific federal assistance programs:

1. Bureau of Indian Affairs General Assistance;
2. Tribally-Administered Temporary Assistance for Needy Families (TTANF);
3. Head Start (if income eligibility criteria are met); or
4. Food Distribution Program on Indian Reservations (FDPIR).

C. Initial Income-Based Criteria -- An ETC shall provide Lifeline telephone service to an applicant who certifies via

supporting documentation (to either the ETC for federal ETC customers, or the program administrator for state ETC customers), under penalty of perjury, that the applicant's household income is at or below 135 percent of the then applicable Federal Poverty Guidelines.

1. Income-based eligibility is based on family size and actual income; therefore, an applicant shall certify, under penalty of perjury, the number of individuals residing in the household.

2. An applicant shall certify, under penalty of perjury, that the documentation presented accurately represents the applicant's annual household income. The following documents, or any combination of these documents, are acceptable for Lifeline certification;

- a. Prior year's state, federal, or tribal tax return;
- b. Current year-to-date earnings statement from an employer or three consecutive months of paycheck stubs within the previous twelve months;
- c. Social Security statement of benefits;
- d. Veterans Administration statement of benefits;
- e. Retirement/pension statement of benefits;
- f. Unemployment/Workers Compensation statement of benefits;
- g. Federal or tribal notice letter of participation in Bureau of Indian Affairs General Assistance; or
- h. Divorce decree or child support wage assignment statement.

D. In order to be approved as a qualifying low-income consumer, an applicant must not already be receiving a Lifeline service, and there must not be anyone else in the applicant's household subscribed to a Lifeline service.

E. Eligibility Certification -- The application form for participation shall be supplied by the ETC or the program administrator and shall be consistent with both the federal requirements, then in effect, and any additional information requirements of the program administrator, and shall include:

1. a statement, under penalty of perjury, as to whether the person is participating in one of the programs listed in Subsection R746-341-3(A) or qualifies under other federal eligibility criteria; or a statement, under penalty of perjury, as to whether the person's household income is at or below 135 percent of the current Federal Poverty Guidelines;

2. if qualified by income-based criteria, a statement, under penalty of perjury, that identifies the number of individuals residing in the household and affirms that the documentation presented to support eligibility accurately represents the applicant's household income;

3. a statement that if the applicant is later shown to have submitted false information in an attempt to qualify for the Lifeline program, the applicant shall be responsible to re-pay the benefits received; and

4. the signature of the applicant, either physical or electronic.

F. False Certification Penalties -- A participant who does not qualify, but who has submitted false documentation or statements to qualify for the Lifeline program, is responsible to repay the value of the benefits received to the state Lifeline program, and is subject to whatever penalties are then current for the federal Lifeline program.

G. Tribal Land Lifeline Discounts - This rule does not govern or otherwise affect the Tribal Land Lifeline Discount program.

R746-341-4. Duties of the Program Administrator.

A. Initial Eligibility

1. The program administrator shall process all applications submitted for participation in the state Lifeline telephone service program. The program administrator shall check the NLAD for pre-existing participation if possible. The program administrator shall inform the applicant and the state ETC of the results of the application process.

B. Annual Eligibility Verification

1. The program administrator shall verify on an annual basis the continuing eligibility status of state ETC Lifeline telephone service participants. The annual eligibility verification shall be performed on the participant list as defined by the FCC in its May 22, 2013 Public Notice in Docket No. 11-42 and any subsequent FCC guidance.

2. The annual eligibility verification shall be performed by the program administrator using the same process as outlined in the de-enrollment process in R746-341-4.C. and in accordance with 47 CFR Section 54.410(f)(3).

3. The program administrator shall provide results of the annual recertification efforts to the ETCs pursuant to 47 CFR Section 54.410(f)(4) and will provide all necessary FCC Form 555 information to ETCs ~~[by December 31 of the year in which the annual verification was performed]~~no later than the first business day of the month in which the verification was last performed.

C. De-Enrollment Process

1. The program administrator shall manage the de-enrollment process for state ETC Lifeline ~~[telephone service]~~ participants who are no longer eligible for the program. Upon an initial finding that a Lifeline recipient is no longer eligible to participate in the state the Lifeline program, the program administrator shall send a notice to the participant explaining the participant's Lifeline telephone service benefit will be discontinued after ~~[30]~~60 days unless the participant verifies continuing

eligibility before that date. The notice shall include the reason(s) for the recipient being ineligible and a description of the options available to the recipient to demonstrate eligibility.

2. At the end of ~~[thirty]~~60 days, if the participant has not demonstrated continuing eligibility, the program administrator shall notify the relevant state ETC to discontinue the ineligible participant's Lifeline telephone service benefit. The benefit must be discontinued in the month following notification; thus the next month's benefit cannot be provided.

3. Ineligible past participants may reapply for the Lifeline program, but must do so by submitting a completed application to the program administrator for state program participation, or to a federal ETC for federal only participation, in accordance with the application process in R746-341-3.

D. Participants Switching Between ETCs -- When a current Lifeline telephone service participant desires to change to a different ETC's Lifeline telephone service, the participant and ETCs shall follow the established NLAD procedures. A participant who is not able to complete the switch due to unresolved problems may seek the assistance of the Division of Public Utilities requesting help in resolving the issue.

E. Documentation Retention -- The program administrator shall retain income and program eligibility certification documentation, in electronic format, for as long as required by then current federal Lifeline policies. Copies of the relevant documentation shall be made available on request to auditors from either the federal Lifeline telephone service program or the state Lifeline telephone service program.

KEY: telephone, telecommunications, rules and procedures, lifeline rates

Date of Enactment or Last Substantive Amendment: ~~[January 7, 2015]~~2017

Notice of Continuation: October 19, 2015

Authorizing, and Implemented or Interpreted Law: 54-4-1; 54-4-4; 54-8b-15(7)

End of the Notices of Proposed Rules Section

NOTICES OF CHANGES IN PROPOSED RULES

After an agency has published a **PROPOSED RULE** in the *Utah State Bulletin*, it may receive comment that requires the **PROPOSED RULE** to be altered before it goes into effect. A **CHANGE IN PROPOSED RULE** allows an agency to respond to comments it receives.

As with a **PROPOSED RULE**, a **CHANGE IN PROPOSED RULE** is preceded by a **RULE ANALYSIS**. This analysis provides summary information about the **CHANGE IN PROPOSED RULE** including the name of a contact person, anticipated cost impact of the rule, and legal cross-references.

While the law does not designate a comment period for a **CHANGE IN PROPOSED RULE**, it does provide for a 30-day waiting period. An agency may accept additional comments during this period and, at its option, may designate a comment period or may hold a public hearing. The 30-day waiting period for **CHANGES IN PROPOSED RULES** published in this issue of the *Utah State Bulletin* ends January 17, 2017.

Following the **RULE ANALYSIS**, the text of the **CHANGE IN PROPOSED RULE** is usually printed. The text shows only those changes made since the **PROPOSED RULE** was published in an earlier edition of the *Utah State Bulletin*. Additions made to the rule appear underlined (example). Deletions made to the rule appear struck out with brackets surrounding them (~~example~~). A row of dots in the text between paragraphs (.) indicates that unaffected text, either whole sections or subsections, was removed to conserve space. If a **CHANGE IN PROPOSED RULE** is too long to print, the Office of Administrative Rules may include only the **RULE ANALYSIS**. A copy of rules that are too long to print is available from the agency or from the Office of Administrative Rules.

From the end of the 30-day waiting period through April 14, 2017, an agency may notify the Office of Administrative Rules that it wants to make the **CHANGE IN PROPOSED RULE** effective. When an agency submits a **NOTICE OF EFFECTIVE DATE** for a **CHANGE IN PROPOSED RULE**, the **PROPOSED RULE** as amended by the **CHANGE IN PROPOSED RULE** becomes the effective rule. The agency sets the effective date. The date may be no fewer than 30 days nor more than 120 days after the publication date of the **CHANGE IN PROPOSED RULE**. If the agency designates a public comment period, the effective 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. Alternatively, the agency may file another **CHANGE IN PROPOSED RULE** in response to additional comments received. If the Office of Administrative Rules does not receive a **NOTICE OF EFFECTIVE DATE** or another **CHANGE IN PROPOSED RULE** by the end of the 120-day period after publication, the **CHANGE IN PROPOSED RULE** filing, along with its associated **PROPOSED RULE**, lapses.

CHANGES IN PROPOSED RULES are governed by Section 63G-3-303, Rule R15-2, and Sections R15-4-3, R15-4-4, R15-4-5b, R15-4-7, R15-4-9, and R15-4-10.

The Changes in Proposed Rules Begin on the Following Page

Environmental Quality, Drinking Water R309-535-5 Fluoridation

NOTICE OF CHANGE IN PROPOSED RULE

DAR FILE NO.: 40769
FILED: 11/28/2016

RULE ANALYSIS

PURPOSE OF THE RULE OR REASON FOR THE CHANGE: The Division of Drinking Water is making additional changes to a proposed amendment in response to comments received during the 30-day comment period (10/01/2016 through 10/31/2016) for the proposed amendment to Section R309-535-5 published in the October 1, 2016, Bulletin.

SUMMARY OF THE RULE OR CHANGE: The change in proposed rule for Section R309-535-5 includes minor clarifications to the following requirements: chemical storage, secondary containment, electrical outlets for feed pumps, fluoride injection line, cross connection control, bulk tank venting for fluorosilicic acid installations, water meters for fluoride saturator water lines, and dust control for fluoride saturators and dry feeders. Several minor wording and punctuation changes were also made. (DAR NOTE: The original proposed amendment upon which this change in proposed rule (CPR) was based was published in the October 1, 2016, issue of the Utah State Bulletin, on page 43. Underlining in the rule below indicates text that has been added since the publication of the proposed rule mentioned above; strike-out indicates text that has been deleted. You must view the CPR and the proposed amendment together to understand all of the changes that will be enforceable should the agency make this rule effective.)

STATUTORY OR CONSTITUTIONAL AUTHORIZATION FOR THIS RULE: Subsection 19-4-104(1)(a)(ii)

ANTICIPATED COST OR SAVINGS TO:

- ◆ **THE STATE BUDGET:** The change in proposed rule should entail no costs or savings to the state budget. It should not require additional resources to manage the drinking water program nor should it result in a reduction of resources needed.
- ◆ **LOCAL GOVERNMENTS:** The change in proposed rule should entail no costs or savings to local government because all changes to the rule are technical and clarifying in nature.
- ◆ **SMALL BUSINESSES:** The change in proposed rule should entail no costs or savings to small businesses because all changes to the rule are technical and clarifying in nature.
- ◆ **PERSONS OTHER THAN SMALL BUSINESSES, BUSINESSES, OR LOCAL GOVERNMENTAL ENTITIES:** The change in proposed rule should entail no costs or

savings to persons other than small businesses, businesses, or local government entities because all changes to the rule are technical and clarifying in nature.

COMPLIANCE COSTS FOR AFFECTED PERSONS: Persons affected by the change in proposed rule are owners and operators of Public Water Systems. The change should have no effect on compliance costs for these persons because all changes to the rule are technical and clarifying in nature.

COMMENTS BY THE DEPARTMENT HEAD ON THE FISCAL IMPACT THE RULE MAY HAVE ON BUSINESSES: The change in proposed rule should have no fiscal impact on businesses.

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

ENVIRONMENTAL QUALITY
DRINKING WATER
THIRD FLOOR
195 N 1950 W
SALT LAKE CITY, UT 84116-3085
or at the Office of Administrative Rules.

DIRECT QUESTIONS REGARDING THIS RULE TO:

◆ Bernie Clark by phone at 801-536-0092, or by Internet E-mail at bernieclark@utah.gov

INTERESTED PERSONS MAY PRESENT THEIR VIEWS ON THIS RULE BY SUBMITTING WRITTEN COMMENTS NO LATER THAN AT 5:00 PM ON 01/17/2017

THIS RULE MAY BECOME EFFECTIVE ON: 01/24/2017

AUTHORIZED BY: Ken Bousfield, Director

R309. Environmental Quality, Drinking Water.

R309-535. Facility Design and Operation: Miscellaneous Treatment Methods.

R309-535-5. Fluoridation.

(1) This section does not require the addition of fluoride to drinking water by a public water system. However, a public water system that adds fluoride to drinking water shall comply with the fluoridation facility design and construction requirements of this section.

(2) General Requirements for all Fluoridation Installations.

The following requirements apply to all types of fluoridation.

- (a) Chemicals and Materials.
 - (i) All chemicals used for fluoridation shall be certified to comply with ANSI/NSF Standard 60.
 - (ii) Materials used for fluoridation equipment shall be compatible with chemicals used in the fluoridation process.
 - (iii) Metal parts used in fluoridation equipment and present in the fluoridation room shall be corrosion resistant.

(iv) Lead weights shall not be used in fluoride chemical solutions to keep pump suction lines at the bottom of a day or bulk storage tank.

(b) Chemical Storage.

(i) Fluoride chemicals shall be stored in covered or sealed containers, inside a building, and away from direct sunlight and a source of heat.

(ii) Fluoride chemicals shall not be stored with incompatible chemicals.

(iii) Bags or other containers for dry materials shall be stored on pallets.

(iv) ~~[Fiber drums for storing]~~Containers for dry materials shall be kept closed to keep out moisture.

(v) A solution tank shall be labeled to identify the contents of the tank.

(c) Secondary Containment.

(i) Secondary containment shall be provided for tanks containing corrosive fluoride solutions.

(ii) Secondary containment shall be sized to contain the ~~[quantity]~~maximum volume of solution handled.

(iii) Secondary containment shall be designed to be acid resistant.

(d) Means to Measure.

(i) A means to measure the flow of treated water shall be provided.

(ii) A means shall be provided to measure the solution level in a tank and the quantity of the chemical used.

(iii) A sampling point shall be provided downstream of the fluoridation facility for measuring the fluoride level of treated water.

(e) Fluoride Feed Pump.

(i) Sizing of fluoride feed pumps shall consider prevention of fluoride overfeed and operation efficiency.

(ii) A fluoride feed pump shall have an anti-siphon device.

(f) Electrical Outlet for Fluoride Feed Pump.[

~~_____ (i)]~~ The electrical outlet used for a fluoride feed pump shall have interlock protection by being wired ~~[electrically in series]~~ with the well or service pump, such that the feed pump is only activated when the well or service pump is on.[

~~_____ (ii)]~~ The fluoride feed pump shall not be plugged into a continuously active ("hot") electrical outlet.

(g) Fluoride Injection.

(i) The fluoride injection line shall enter at a point in the lower one-third of the water ~~[pipe]line~~, and the end of the injection line shall be in the lower half of the water ~~[pipe]line~~.

(ii) The fluoride injection point shall allow adequate mixing.

(iii) The fluoride injection point shall not be located upstream of lime softening, ion exchange, or other processes that affect the fluoride level.

(iv) Each injector shall be selected based on the quantity of fluoride to be added, water flow, back pressure, and injector operating pressure.

(v) If injecting fluoride under pressure, a corporation stop ~~[and a safety chain]~~ shall be used at the fluoride injection point ~~[to secure the injection line]~~.

(vi) An anti-siphon device shall be provided for all fluoride feed lines at the injection point.

(h) Minimize Fluoride Overfeed.

(i) In addition to the feed pump control, a secondary control mechanism shall be provided to minimize the possibility of fluoride overfeed. It may be a day tank, liquid level sensor, SCADA control, ~~[a]~~flow switch, etc.

(ii) For fluoridation facilities that do not have operators on site, a day tank is required to minimize fluoride overfeed, unless two alternative secondary controls are provided.

(i) Housing. Fluoridation equipment shall be housed in a secure building that is adequately sized for handling and storing fluoride chemicals.

(j) Heating, Lighting, Ventilation.

(i) The fluoridation building shall be heated, lighted and ventilated to assure proper operation of the equipment and safety of the operator.

(ii) The ventilation in the fluoride operating area shall provide at least six complete room-air changes per hour.

(iii) The fluoride operating area shall be vented to outside atmosphere and away from air intakes.

(iv) Separate switches for fans and lights in the fluoride operating area shall be provided. The switches shall be located outside ~~[of,]~~or near~~;~~ the entrance to the fluoride operating area, and shall be protected from vandalism.

(k) Cross Connection Control. Cross connection~~[s]~~ control shall be ~~[eliminated by physical separation,]~~provided by an air gap~~;~~ or an approved and properly operating backflow prevention assembly.

(3) Additional Requirements for Fluorosilicic Acid Installations.

(a) Fluorosilicic acid shall not be diluted manually on site before injection.

(b) Solution Tank Vents.

~~_____ (i) A bulk tank shall be vented.~~

~~(ii) [A solution tank shall be adequately vented to the outside atmosphere away from air intakes, above grade, and where least susceptible to contamination.]Tank venting shall be to the outside, above grade, away from air intakes, and where least susceptible to contamination (e.g., precipitation, dust, etc.).~~

(iii) A bulk tank shall not share a vent with a day tank if there is a risk of solution overflow from the bulk tank to the day tank.

~~(i)(iv)]~~ A non-corrodible fine mesh (No. 14 or finer) screen shall be placed over the discharge end of a vent.

(c) If separate rooms are provided in a ~~[fluoride building]~~fluoridation facility constructed after January 1, 2017, the design shall include a view window between the control room and the fluorosilicic acid operating area.

(d) Emergency eyewash stations and showers shall be provided.

(e) A neutralizing chemical shall be available on site to handle small quantity accidental acid spills.

(f) The use of personal protective equipment (PPE) is required when handling fluorosilicic acid, and shall include the following:

(i) Full-face shield and splash-proof safety goggles

(ii) Long gauntlet acid-resistant rubber or neoprene gloves with cuffs

(iii) Acid-resistant rubber or neoprene aprons

(iv) Rubber boots

(4) Additional Requirements for Fluoride Saturator Installations.

(a) A water meter shall be provided on the make-up water line for a saturator ~~[so that calculations can be made to confirm that the proper amounts of fluoride solution are being fed. This meter and the master meter shall be read daily and the results recorded] to determine the amount of fluoride solution being fed.~~

(b) The minimum depth of undissolved fluoride chemical required to maintain a saturated solution shall be marked on the outside of the saturator tank.

(c) The saturator shall not be operated in a manner that undissolved chemical is drawn into the pump suction line.

(d) The make-up water supply line shall ~~[at a minimum, either]~~ terminate at least two pipe diameters above the solution tank or have backflow protection.

(e) Make-up Water Softening.

(i) The make-up water used for sodium fluoride saturators shall be softened whenever the hardness exceeds 75 mg/L.

(ii) A sediment filter (20 mesh) shall be installed in the make-up water line going to the saturator. The filter shall be placed between the softener and the water meter.

(f) Dust Control. Creation of fluoride dust shall be minimized during the transfer of dry fluoride compounds; when disposing of empty bags, drums, or barrels; and while cleaning. ~~[Provisions shall be made to minimize the creation of fluoride dust during the transfer of dry fluoride compounds.~~

~~(i) Air exhausted from fluoride handling equipment shall discharge through a dust filter to the atmosphere outside of the building.~~

~~(ii) Provisions shall be made to minimize dust when disposing of empty bags, drums or barrels.~~

~~(iii) A floor drain shall be provided to facilitate floor cleaning.]~~

(g) Emergency eyewash shall be provided.

(h) The use of personal protective equipment (PPE) is required when handling dry chemicals and shall include the following:

(i) National Institute for Occupational Safety and Health (NIOSH) approved particulate respirator with a soft rubber face-to-mask seal and replaceable cartridges

(ii) Chemical dust-resistant safety goggles

(iii) Acid-resistant gloves

(iv) Acid-resistant rubber or neoprene aprons

(v) Rubber boots

(5) Additional Requirements for Fluoride Dry Feed Installations.

(a) Volumetric and gravimetric dry feeders shall include a solution tank.

(b) A mechanical mixer shall be installed in the solution tank.

(c) Dust Control. ~~[Provisions shall be made to minimize the creation of fluoride dust during the transfer of dry fluoride compounds.]~~

(i) Creation of fluoride dust shall be minimized during the transfer of dry fluoride compounds; when disposing of empty bags, drums, or barrels; and while cleaning.

(ii) If a hopper is provided, it shall be equipped with a dust filter and an exhaust fan that places the hopper under negative pressure.

(iii) Air exhausted from fluoride handling equipment shall discharge through a dust filter to the atmosphere outside of the building.

~~[(iii) Provisions shall be made to minimize dust when disposing of empty bags, drums or barrels.~~

~~(iv) A floor drain shall be provided to facilitate floor cleaning.]~~

(d) Emergency eyewash shall be provided.

(e) The use of personal protective equipment (PPE) is required when handling dry chemicals and shall include the following:

(i) National Institute for Occupational Safety and Health (NIOSH) approved particulate respirator with a soft rubber face-to-mask seal and replaceable cartridges

(ii) Chemical dust-resistant safety goggles

(iii) Acid-resistant gloves

(iv) Acid-resistant rubber or neoprene aprons

(v) Rubber boots

KEY: drinking water, miscellaneous treatment, stabilization, iron and manganese control

Date of Enactment or Last Substantive Amendment: [November 7, 2016]2017

Notice of Continuation: March 13, 2015

Authorizing, and Implemented or Interpreted Law: 19-4-104

End of the Notices of Changes in 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 Office of Administrative Rules. **REVIEWS** are effective upon filing.

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

Administrative Services, Archives

R17-9

Electronic Participation at Meetings

**FIVE-YEAR NOTICE OF REVIEW AND STATEMENT
OF CONTINUATION**

DAR FILE NO.: 41034

FILED: 11/30/2016

**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: In accordance with Section 52-4-207, this rule establishes a procedure for electronic participation at meetings.

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 concerning this rule have been received from interested parties.

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 for electronic participation has allowed members of the Utah State Historical Records Advisory Board who live away from the anchor location to participate fully in meetings. Therefore, this rule should be continued.

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

346 S RIO GRANDE
SALT LAKE CITY, UT 84101-1106
or at the Office of Administrative Rules.

DIRECT QUESTIONS REGARDING THIS RULE TO:

♦ Susan Mumford by phone at 801-531-3861, by FAX at 801-531-3867, or by Internet E-mail at smumford@utah.gov

AUTHORIZED BY: Patricia Smith-Mansfield, Director

EFFECTIVE: 11/30/2016

Commerce, Consumer Protection

R152-6

Utah Administrative Procedures Act
Rules

**FIVE-YEAR NOTICE OF REVIEW AND STATEMENT
OF CONTINUATION**

DAR FILE NO.: 41035

FILED: 12/01/2016

**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 13-2-5(1) gives the Director of the Division of Consumer Protection (Division) authorization to issue rules to administer and enforce the chapters listed in Section 13-2-1. In addition, Subsection 63G-4-202(1) gives the Division authorization to designate categories of adjudicative proceedings as informal.

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 is not aware of any written comments regarding the rules. The interpretation of these rules is at times the subject of informal proceedings before the Division.

REASONED JUSTIFICATION FOR THE CONTINUATION OF THE RULE, INCLUDING REASONS WHY THE AGENCY DISAGREES WITH COMMENTS IN OPPOSITION TO THE RULE, IF ANY: Section 63G-4-201 allows agencies to designate hearings as informal. In this rule, the agency designates its hearings as informal in accordance with that statute. Section R152-6-2 designates the Director as the Division's presiding officer, but allows the Director to designate another person to act in his stead, see Section 63G-4-103. Given the volume of Division cases, designation of a presiding officer is critical for the completion of other duties by the Director. Therefore, this rule should be continued.

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

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

DIRECT QUESTIONS REGARDING THIS RULE TO:
 ♦ Jacob Hart by phone at 801-530-6636, or by Internet E-mail at jfhart@utah.gov

AUTHORIZED BY: Daniel O'Bannon, Director

EFFECTIVE: 12/01/2016

Commerce, Consumer Protection
R152-15
Business Opportunity Disclosure Act
Rules

FIVE-YEAR NOTICE OF REVIEW AND STATEMENT OF CONTINUATION
 DAR FILE NO.: 41036
 FILED: 12/01/2016

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 13-2-5(1) gives the Director of the Division of Consumer Protection (Division) authorization to issue rules to administer and enforce the chapters listed in Section 13-2-1.

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 is not aware of any written comments regarding the rules. The interpretation of these rules is at times the subject of informal proceedings before the Division.

REASONED JUSTIFICATION FOR THE CONTINUATION OF THE RULE, INCLUDING REASONS WHY THE AGENCY DISAGREES WITH COMMENTS IN OPPOSITION TO THE RULE, IF ANY: Rule R152-15 is important to the effective administration of the Business Opportunity Disclosure Act. It sets an appropriate filing fee, requires contact information to be disclosed with a filing, describes the procedure for amendments to filings with the Division, and provides other clarifications to businesses seeking to comply with the Business Opportunity Disclosure Act. Section R152-15-3 provides clarification about enforcement of the act with respect to compensated employees or independent contractors receiving support, advice, or training in certain circumstances. Therefore, this rule should be continued.

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

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

DIRECT QUESTIONS REGARDING THIS RULE TO:
 ♦ Jacob Hart by phone at 801-530-6636, or by Internet E-mail at jfhart@utah.gov

AUTHORIZED BY: Francine Giani, Executive Director

EFFECTIVE: 12/01/2016

Commerce, Consumer Protection
R152-20
New Motor Vehicle Warranties

FIVE-YEAR NOTICE OF REVIEW AND STATEMENT OF CONTINUATION
 DAR FILE NO.: 41037
 FILED: 12/01/2016

**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 13-2-5(1) gives the Director of the Division of Consumer Protection (Division) authorization to issue rules to administer and enforce the chapters listed in Section 13-2-1.

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 is not aware of any written comments regarding the rules. The interpretation of these rules is at times the subject of informal proceedings before the Division.

REASONED JUSTIFICATION FOR THE CONTINUATION OF THE RULE, INCLUDING REASONS WHY THE AGENCY DISAGREES WITH COMMENTS IN OPPOSITION TO THE RULE, IF ANY: Rule R152-20 serves an important purpose in furthering enforcement and administration of the New Motor Vehicle Warranties Act. Section R152-20-2 provides definitions for undefined terms within the Act. These definitions provide predictability for enforcement of those terms. The definitions are also useful for those subject to the Act so they have a clear understanding of how to interpret those terms. Subsection R152-20-3(A) provides enforcement clarification for the procedure for repurchase of a leased nonconforming vehicle. Since the vehicle is leased rather than purchased, it is necessary to account for payments owing to the lienholder of record. Subsection R152-20-3(B) provides procedures for circumstances where the exact model of car is no longer in production at the time that the Act would require a replacement vehicle. This allows a workable solution for companies without requiring those companies to replace an exact model that no longer exists. This rule is effective in providing support to the Division's administration and enforcement of the New Motor Vehicle Warranties Act. Therefore, this rule should be continued.

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

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

DIRECT QUESTIONS REGARDING THIS RULE TO:

♦ Jacob Hart by phone at 801-530-6636, or by Internet E-mail at jfhart@utah.gov

AUTHORIZED BY: Daniel O'Bannon, Director

EFFECTIVE: 12/01/2016

Commerce, Consumer Protection
R152-22
Charitable Solicitations Act

**FIVE-YEAR NOTICE OF REVIEW AND STATEMENT
OF CONTINUATION**

DAR FILE NO.: 41039
FILED: 12/01/2016

**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 13-2-5(1) gives the Director of the Division of Consumer Protection (Division) authorization to issue rules to administer and enforce the chapters listed in Section 13-2-1. Within the Charitable Solicitations Act (CSA), the Division is authorized to require additional information as needed in an application for registration or permitting, according to Subsections 13-22-6(1)(xvi) and 13-22-9(1)(xiv). It is also authorized by rule to require an organization that is exempt from registration to file a notice of claim of exemption and file a renewal of a notice of claim of exemption, prescribe the contents of a notice of claim of exemption and its renewal, and require a filing fee for a notice of claim of exemption, according to Section 13-22-8. Finally, by rule, the Division may require terms to be included in an agreement between a charity and a commercial co-venturer, according to Subsection 13-22-22(2).

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 is not aware of any written comments regarding the rules. The interpretation of these rules is at times the subject of informal proceedings before the Division.

REASONED JUSTIFICATION FOR THE CONTINUATION OF THE RULE, INCLUDING REASONS WHY THE AGENCY DISAGREES WITH COMMENTS IN OPPOSITION TO THE RULE, IF ANY: The Division has utilized its statutory authority to issue rules to administer and enforce the CSA both from the Division's general statutory rulemaking powers, as well as the specific provisions authorizing the Division to issue rules within the CSA. This rule governs a variety of issues that affect the Division's ability to register professional fundraisers and charities and enforce the CSA. The Division has defined the term "parent foundation" as it appears in the CSA in Section R152-22-2. Defining what constitutes a parent foundation or parent organization eases the burden of administrative compliance by setting a defined standard for what that means. The rule also provides notice to organizations that the use of a vending device or decal in connection with charitable solicitations creates a presumption

that the party utilizing the vending device or decal is acting as a regulated entity under the chapter. Section R152-22-3 allows the Division to collect additional identifying information and financial information important for the Division to make registration approval decisions. It also clarifies what charities may file that are new and have no financial history similar to Sections R152-22-3 and R152-22-6, and provides administrative guidance for the collection of information useful to the Division in making a permitting decision regarding professional fundraisers. Section R152-22-4 helps charities seeking to comply with the CSA by clarifying that the annual financial report or IRS Form 990 filed must be the most recent filed. It also clarifies that "30 days after the end of the year reported" means 30 days from the end of the registration year with the Division, as opposed to the company's financial year. Section R152-22-5 provides administrative support by describing the process for establishing a claim of exemption from CSA registration with the Division, and allowing the Division to charge a fee to cover the administrative costs of such a filing. The Division receives applications for registrations or permits that are incomplete with some frequency. Section R152-22-7 provides the Division flexibility to process incomplete applications in a grace period, and charge late fees for applications outside of that period. Section R152-22-8 requires written notification from professional fundraisers prior to the commencement of a new fundraising campaign. It also defines "not currently registered" for purposes of determining who a professional fundraiser may provide services for. Section R152-22-9 provides rules for emergency suspension of a registration or permit and establishes procedures for a hearing under an emergency suspension. In the event of fraud or other deceit by a registered charity or permitted fundraiser, it may be necessary for the Division to take action quickly as provided by this rule. Each of these sections under Rule R152-22 provide support to the Division's purposes in administering and enforcing the CSA. Therefore, this rule should be continued.

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

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

DIRECT QUESTIONS REGARDING THIS RULE TO:
 ♦ Jacob Hart by phone at 801-530-6636, or by Internet E-mail at jfhart@utah.gov

AUTHORIZED BY: Daniel O'Bannon, Director

EFFECTIVE: 12/01/2016

Commerce, Consumer Protection
R152-23
 Utah Health Spa Services

FIVE-YEAR NOTICE OF REVIEW AND STATEMENT OF CONTINUATION
 DAR FILE NO.: 41040
 FILED: 12/01/2016

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 13-2-5(1) gives the Director of the Division of Consumer Protection (Division) authorization to issue rules to administer and enforce the chapters listed in Section 13-2-1.

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 is not aware of any written comments regarding the rule. The interpretation of this rule is at times the subject of informal proceedings before the Division.

REASONED JUSTIFICATION FOR THE CONTINUATION OF THE RULE, INCLUDING REASONS WHY THE AGENCY DISAGREES WITH COMMENTS IN OPPOSITION TO THE RULE, IF ANY: Health spas, as an industry, often hold consumer contracts that are prepaid or which contain authorization for continuing payments. Health spas may service thousands of Utah consumers at any given time. As such, it is important for administration and enforcement purposes to ensure that the health spas register with the state and inform the Division of any impending closures. If such a closure is to occur, the Division must be notified and precautions must be followed to prevent a possibility that consumers who have prepaid money or which have recurring payment agreements are not taken advantage of prior to the closing. The rule helps aid in administration and enforcement by providing important enforcement guidance in registration documentation, definitions, contracts, rights of recession, closing procedures, and required bonding. This rule is an active part of the division's administration and enforcement of the Health Spas Services Act. Therefore, this rule should be continued.

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

COMMERCE
 CONSUMER PROTECTION
 HEBER M WELLS BLDG

160 E 300 S
SALT LAKE CITY, UT 84111-2316
or at the Office of Administrative Rules.

DIRECT QUESTIONS REGARDING THIS RULE TO:
♦ Jacob Hart by phone at 801-530-6636, or by Internet E-mail
at jfhart@utah.gov

AUTHORIZED BY: Daniel O'Bannon, Director

EFFECTIVE: 12/01/2016

Commerce, Consumer Protection
R152-42
Uniform Debt-Management Services
Act Rules

**FIVE-YEAR NOTICE OF REVIEW AND STATEMENT
OF CONTINUATION**
DAR FILE NO.: 41041
FILED: 12/01/2016

**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 13-2-5(1) gives the Director of the Division of Consumer Protection (Division) authorization to issue rules to administer and enforce the chapters listed in Section 13-2-1. The Uniform Debt-Management Act also provides rulemaking authority to the Division under Subsection 13-42-102(9)(c), Sections 13-42-112 and 13-42-121, and Subsections 13-42-122(9), 13-42-132(3), and 13-42-132(6).

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 is not aware of any written comments regarding the rule. The interpretation of this rule is at times the subject of informal proceedings before the Division.

REASONED JUSTIFICATION FOR THE CONTINUATION OF THE RULE, INCLUDING REASONS WHY THE AGENCY DISAGREES WITH COMMENTS IN OPPOSITION TO THE RULE, IF ANY: The Uniform Debt-Management Act (the Act) provides several areas where rulemaking by the Division is required or authorized. The Act invites the Division to adopt a base year for purposes of adjusting dollar amounts specified in the Act, which it establishes in Section R152-42-6. The Division is also invited to declare the states where registration

under that State's Uniform Debt-Management Services Act satisfies the Division's licensure requirements, which is established in Section R152-42-3. The Act does not define certification of counselors or what evidence of accreditation by an independent body means, so clarification is provided on those points in Sections R152-42-4 and R152-42-5. Finally, the rule provides for the submission of organizational documents in an application to provide proof that the business was organized by law. This rule either is mandated by the Act, or furthers the administrative and enforcement of the Act by the Division. Therefore, this rule should be continued.

THE FULL TEXT OF THIS RULE MAY BE INSPECTED, DURING REGULAR BUSINESS HOURS, AT:
COMMERCE
CONSUMER PROTECTION
HEBER M WELLS BLDG
160 E 300 S
SALT LAKE CITY, UT 84111-2316
or at the Office of Administrative Rules.

DIRECT QUESTIONS REGARDING THIS RULE TO:
♦ Jacob Hart by phone at 801-530-6636, or by Internet E-mail
at jfhart@utah.gov

AUTHORIZED BY: Daniel O'Bannon, Director

EFFECTIVE: 12/01/2016

Education, Administration
R277-404
Requirements for Assessments of
Student Achievement

**FIVE-YEAR NOTICE OF REVIEW AND STATEMENT
OF CONTINUATION**
DAR FILE NO.: 41032
FILED: 11/29/2016

**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: Sections 53A-1-603 through 53A-1-611 direct the Utah State Board of Education (Board) to adopt rules for the maintenance and administration of U-PASS; Subsection 53A-15-1403(9)(b) requires the Board to adopt rules to establish a statewide procedure for excusing a student from taking certain assessments; and Section 53A-1-401 allows the Board to make rules to execute the Board's duties and responsibilities under the Utah Constitution and state law.

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 comment has 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: Rule R277-404 continues to be necessary because it provides procedures for a Board developed and directed comprehensive assessment system for all students, as required by state and federal law. Therefore, this rule should be continued.

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

EDUCATION
ADMINISTRATION
250 E 500 S
SALT LAKE CITY, UT 84111-3272
or at the Office of Administrative Rules.

DIRECT QUESTIONS REGARDING THIS RULE TO:

♦ Angela Stallings by phone at 801-538-7656, by FAX at 801-538-7768, or by Internet E-mail at angie.stallings@schools.utah.gov

AUTHORIZED BY: Angela Stallings, Deputy Superintendent, Policy and Communication

EFFECTIVE: 11/29/2016

**Health, Disease Control and
Prevention, Environmental Services
R392-400
Temporary Mass Gatherings Sanitation**

**FIVE-YEAR NOTICE OF REVIEW AND STATEMENT
OF CONTINUATION**

DAR FILE NO.: 41028
FILED: 11/21/2016

**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: Rule R392-400 is authorized under Sections 26-1-5, 26-1-30, and 26-15-2. Section 26-1-5 gives the Utah Department of Health (UDOH) rulemaking authority to carry out the provisions of Title 26, and Subsection 26-1-30(4) charges the Department to create rules to protect the public health or to prevent disease and

illness. Section 26-15-2 charges the Department with establishing minimum rules of sanitation necessary to protect the public health. Sanitation at public gatherings incorporate basic tenets from food safety, solid waste, liquid waste, pool safety, and emergency response in order to prevent the spread of disease and illness and to protect the public health.

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 local health departments expressed a desire to revise some of the requirements in Rule R392-400. UDOH participated in a committee to review this rule and make possible changes. The Salt Lake County Health Department (SLCoHD) submitted comments in opposition to the change of definition of a temporary mass gathering, which changed the threshold for events to fall under the auspices of Rule R392-400. The amendment in question would raise the threshold from 500 people for 2 hours to 1,000 people for 2 hours. SLCoHD also submitted comment during the second public comment period requesting specific language be added changing how permits are issued for temporary mass gathering events. Weber-Morgan Health Department submitted a comment opposed to the revision concerning required equipment for emergency response personnel. The amendments take out the specific, extensive list of equipment required of emergency personnel to have on hand and required that personnel hired by event organizers be certified under Section 26-8a-102. Efforts were made multiple times to contact event organizers of perennial events, such as Epic Relays, Ragnar, Lotoja, Tour of Utah, and Red Rock Relay with no response.

REASONED JUSTIFICATION FOR THE CONTINUATION OF THE RULE, INCLUDING REASONS WHY THE AGENCY DISAGREES WITH COMMENTS IN OPPOSITION TO THE RULE, IF ANY: Continuation of Rule R392-400 is recommended as it provides standards for sanitation at temporary mass gatherings statewide. There is a consensus among the local health departments in favor of these amendments, and UDOH concurs. Regarding the Salt Lake County Health Department (SLCoHD) comment: there is consensus among the local health departments, and UDOH concurs, that the change in threshold for defining a temporary mass gathering will have a minimal negative health impact on the health of the public. This change will bring Utah more in line with average similar standards in other states. UDOH understands that SLCoHD has a concern that small events pose a significant health risk from their own local observations, but it is not a concern shared state wide. SLCoHD is encouraged to collect quantitative data to support their claim, and with this data, UDOH may reassess this issue. Regarding the other SLCoHD comment: the proposed amendments do not address permitting, but do change how a "temporary mass gathering" is defined. UDOH rules of sanitation may require an event of location to have a permit from a local health department to operate, but no rule will give direction on how to issue permits. To do so would infringe on

the authority and responsibility of the local health departments. While the intent of the submission is understood, any further amendments would need to not include how an event may be permitted, which is the primary focus of the comment. To meet the perceived intention of the comment would require not adopting the proposed amendments to Rule R392-400 which change the definition of a "temporary mass gathering". The objection to the change in definition, however, has already been discussed and addressed in the first round of public comments. Regarding the Weber-Morgan Health Department comment: the purpose of Rule R392-400 is to provide standards of sanitation to protect the health of patrons at a mass gathering event. It would be inappropriate for this rule to put requirements on another licensed profession aside from environmental health personnel. The changes to Rule R392-400 require in general terms that licensed emergency medical personnel be on-site. It is expected that these professionals will be able to ascertain from a more experienced and learned perspective what equipment, skills, and procedures are needed for them to practice their profession at any event.

THE FULL TEXT OF THIS RULE MAY BE INSPECTED, DURING REGULAR BUSINESS HOURS, AT:
 HEALTH
 DISEASE CONTROL AND PREVENTION,
 ENVIRONMENTAL SERVICES
 CANNON HEALTH BLDG
 288 N 1460 W
 SALT LAKE CITY, UT 84116-3231
 or at the Office of Administrative Rules.

DIRECT QUESTIONS REGARDING THIS RULE TO:
 ♦ Chris Nelson by phone at 801-538-6739, or by Internet E-mail at chrisnelson@utah.gov

AUTHORIZED BY: Joseph Miner, MD, Executive Director

EFFECTIVE: 11/21/2016

Human Services, Public Guardian
 (Office of)
R549-1

Eligibility and Service Priority

FIVE-YEAR NOTICE OF REVIEW AND STATEMENT OF CONTINUATION

DAR FILE NO.: 41030
 FILED: 11/28/2016

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: The office is required to provide procedures and standards for the determination of eligibility and provide services as required by Title 62A, Chapter 14, Part 1.

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 rule needs to be continued in order to provide the public and the agency clear eligibility and service priority information regarding potential clients of the Office of Public Guardian.

THE FULL TEXT OF THIS RULE MAY BE INSPECTED, DURING REGULAR BUSINESS HOURS, AT:
 HUMAN SERVICES
 PUBLIC GUARDIAN (OFFICE OF)
 195 N 1950 W
 SALT LAKE CITY, UT 84116
 or at the Office of Administrative Rules.

DIRECT QUESTIONS REGARDING THIS RULE TO:
 ♦ Julene Robbins by phone at 801-538-4521, by FAX at 801-538-3942, or by Internet E-mail at jhonesrobbins@utah.gov
 ♦ Shannon Alvey by phone at 801-538-4119, by FAX at 801-538-8243, or by Internet E-mail at salvey@utah.gov

AUTHORIZED BY: Shannon Alvey, Director

EFFECTIVE: 11/28/2016

Insurance, Administration
R590-91
 Credit Life Insurance and Credit
 Accident and Health Insurance

FIVE-YEAR NOTICE OF REVIEW AND STATEMENT OF CONTINUATION

DAR FILE NO.: 41025
 FILED: 11/17/2016

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 31A-2-201 gives the commissioner the authority to write rules to implement the

provisions of Title 31A. The rule implements the provisions of Title 31A, Chapter 22, Part 9, regarding reasonable rating, policy form, and operating standards for the transaction of credit life insurance and credit accident and health insurance.

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 regarding this rule during 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: This rule protects the interests of debtors and the public in this state and ensures a fair and equitable credit insurance market by establishing a system of reasonable rating, policy form, and operating standards for transaction of credit life, accident, and health insurance. 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 Office of Administrative Rules.

DIRECT QUESTIONS REGARDING THIS RULE TO:

◆ Steve Gooch by phone at 801-538-3803, by FAX at 801-538-3829, or by Internet E-mail at sgooch@utah.gov

AUTHORIZED BY: Steve Gooch, Information Specialist

EFFECTIVE: 11/17/2016

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 Office 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

Capitol Preservation Board (State)

Administration

No. 40814 (AMD): R131-13. Health Reform -- Health Insurance Coverage in State Contracts -- Implementation

Published: 10/15/2016

Effective: 11/21/2016

Crime Victim Reparations

Administration

No. 40833 (AMD): R270-1-4. Counseling Awards

Published: 10/15/2016

Effective: 11/21/2016

No. 40806 (REP): R270-4. Government Records Access and Management Act

Published: 10/15/2016

Effective: 11/21/2016

Environmental Quality

Drinking Water

No. 40770 (AMD): R309-105-15. Annual Reports

Published: 10/01/2016

Effective: 11/22/2016

No. 40771 (AMD): R309-400-12. Reporting and Record Maintenance Issues

Published: 10/01/2016

Effective: 11/22/2016

Environmental Response and Remediation

No. 40752 (AMD): R311-200. Underground Storage Tanks: Definitions

Published: 10/01/2016

Effective: 01/01/2017

No. 40753 (AMD): R311-201. Underground Storage Tanks: Certification Programs and UST Operator Training

Published: 10/01/2016

Effective: 01/01/2017

No. 40754 (AMD): R311-202. Underground Storage Tank Technical Standards

Published: 10/01/2016

Effective: 01/01/2017

No. 40756 (AMD): R311-206. Underground Storage Tanks: Certificate of Compliance and Financial Assurance Mechanisms

Published: 10/01/2016

Effective: 01/01/2017

No. 40757 (AMD): R311-212. Administration of the Petroleum Storage Tank Loan Program

Published: 10/01/2016

Effective: 01/01/2017

Health

Disease Control and Prevention, Health Promotion

No. 40632 (AMD): R384-415. Electronic-Cigarette Substance Standards

Published: 09/01/2016

Effective: 12/29/2016

Disease Control and Prevention; HIV/AIDS, Tuberculosis Control/Refugee Health

No. 40846 (AMD): R388-805. Ryan White Program

Published: 10/15/2016

Effective: 11/30/2016

Health Care Financing, Coverage and Reimbursement Policy
No. 40845 (AMD): R414-60. Medicaid Policy for Pharmacy Program
Published: 10/15/2016
Effective: 12/01/2016

Center for Health Data, Health Care Statistics
No. 40850 (AMD): R428-1. Health Data Plan and Incorporated Documents
Published: 10/15/2016
Effective: 11/28/2016

No. 40847 (AMD): R428-12. Health Data Authority Survey of Enrollees in Health Plans
Published: 10/15/2016
Effective: 11/21/2016

Labor Commission

Adjudication
No. 40803 (AMD): R602-2-4. Attorney Fees
Published: 10/15/2016
Effective: 11/28/2016

Industrial Accidents
No. 40804 (AMD): R612-200-2. Payment of Benefits, Interest and Attorney Fees
Published: 10/15/2016
Effective: 11/28/2016

No. 40818 (AMD): R612-300-4. General Method for Computing Medical Fees
Published: 10/15/2016
Effective: 11/28/2016

No. 40817 (AMD): R612-300-8. Travel Allowance for Injured Workers
Published: 10/15/2016
Effective: 11/28/2016

No. 40815 (AMD): R612-400-5. Premium Rates for the Uninsured Employers' Fund and the Employers' Reinsurance Fund
Published: 10/15/2016
Effective: 11/28/2016

No. 40819 (REP): R612-500. Procedural Guidelines for the Reemployment Act
Published: 10/15/2016
Effective: 11/28/2016

Natural Resources

Administration
No. 40839 (NEW): R634-2. Health Reform -- Health Insurance Coverage in State Contracts -- Implementation
Published: 10/15/2016
Effective: 11/22/2016

Wildlife Resources
No. 40832 (AMD): R657-41. Conservation and Sportsman Permits
Published: 10/15/2016
Effective: 11/28/2016

Science Technology and Research Governing Authority

Administration
No. 40655 (REP): R856-1. Formation and Funding of Utah Science Technology and Research Innovation Teams
Published: 09/01/2016
Effective: 11/16/2016

No. 40657 (NEW): R856-1. USTAR Technology Acceleration Program Grants
Published: 09/01/2016
Effective: 11/16/2016

No. 40656 (REP): R856-2. Distribution of Utah Science Technology and Research Commercialization Revenues
Published: 09/01/2016
Effective: 11/16/2016

No. 40681 (NEW): R856-2. USTAR University-Industry Partnership Program Grants
Published: 09/01/2016
Effective: 11/16/2016

No. 40682 (NEW): R856-3. USTAR University Technology Acceleration Grants
Published: 09/01/2016
Effective: 11/16/2016

End of the Notices of Rule Effective Dates Section

**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, 2016 through December 01, 2016. 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 Office of Administrative Rules (801-538-3003).

A copy of the **RULES INDEX** is available for public inspection at the Office of Administrative Rules (5110 State Office Building, Salt Lake City, UT), or may be viewed online at the Office's web site (<http://www.rules.utah.gov/>).

RULES INDEX - BY AGENCY (CODE NUMBER)

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	

CODE REFERENCE	TITLE	FILE NUMBER	ACTION	EFFECTIVE DATE	BULLETIN ISSUE/PAGE
ADMINISTRATIVE SERVICES					
<u>Administrative Rules</u>					
R15-1	Administrative Rule Hearings	40907	NSC	11/04/2016	Not Printed
R15-2	Public Petitioning for Rulemaking	40908	NSC	11/04/2016	Not Printed
R15-3	Definitional Clarification of Administrative Rule	40909	NSC	11/04/2016	Not Printed
R15-4	Administrative Rulemaking Procedures	40911	NSC	11/04/2016	Not Printed
R15-5	Administrative Rules Adjudicative Proceedings	40912	NSC	11/04/2016	Not Printed
<u>Archives</u>					
R17-9	Electronic Participation at Meetings	41034	5YR	11/30/2016	Not Printed
<u>Facilities Construction and Management</u>					
R23-19	Facility Use Rules	40226	NSC	03/11/2016	Not Printed
R23-23	Health Reform -- Health Insurance Coverage in State Contracts -- Implementation	40044	NSC	01/15/2016	Not Printed
R23-23	Health Reform -- Health Insurance Coverage in State Contracts -- Implementation	40440	EMR	05/23/2016	2016-12/51
R23-23	Health Reform -- Health Insurance Coverage in State Contracts -- Implementation	40441	AMD	07/22/2016	2016-12/6
R23-25	Administrative Rules Adjudicative Proceedings	40480	5YR	06/09/2016	2016-13/159
R23-31	Executive Residence Commission	40481	5YR	06/09/2016	2016-13/159
R23-32	Rules of Procedure for Conduct of Utah State Building Board Meetings	40945	5YR	11/03/2016	2016-23/123
<u>Finance</u>					
R25-2	Finance Adjudicative Proceedings	40805	5YR	09/20/2016	2016-20/91
R25-7	Travel-Related Reimbursements for State Employees	40548	EMR	07/01/2016	2016-14/161
R25-7	Travel-Related Reimbursements for State Employees	40547	AMD	08/22/2016	2016-14/6
R25-7-8	Reimbursement for Lodging	40986	NSC	12/01/2016	Not Printed
R25-7-10	Reimbursement for Transportation	40042	AMD	02/23/2016	2016-2/4
R25-15	Change Date and Set Aside Provisions for Annual Leave II	39943	NEW	01/13/2016	2015-23/6
<u>Fleet Operations</u>					
R27-4	Vehicle Replacement and Expansion of State Fleet	40824	5YR	09/23/2016	2016-20/91
R27-5	Fleet Tracking	40823	5YR	09/23/2016	2016-20/92
R27-6	Fuel Dispensing Program	40825	5YR	09/23/2016	2016-20/92
R27-8	State Vehicle Maintenance Program	40826	5YR	09/23/2016	2016-20/93
R27-9	Dispensing Compressed Natural Gas to the Public	40827	5YR	09/23/2016	2016-20/93
R27-10	Identification Mark for State Motor Vehicles	40828	5YR	09/23/2016	2016-20/94

Purchasing and General Services

R33-1	Utah Procurement Rules, "General Procurement Provisions," Definitions	40559	AMD	08/22/2016	2016-14/11
R33-4	General Procurement Provisions, Prequalifications, Specifications, and Small Purchases	40560	AMD	08/22/2016	2016-14/15
R33-5	Request for Information	40571	AMD	08/22/2016	2016-14/19
R33-6	Bidding	40561	AMD	08/22/2016	2016-14/24
R33-6-114	Technology Acquisitions for Executive Branch Procurement Units	40048	AMD	02/23/2016	2016-2/6
R33-7	Request for Proposals	40438	NSC	06/13/2016	Not Printed
R33-7	Request for Proposals	40567	AMD	08/22/2016	2016-14/27
R33-8	Exceptions to Procurement Requirements	40570	AMD	08/22/2016	2016-14/34
R33-9	Cancellations, Rejections, and Debarment	40565	AMD	08/22/2016	2016-14/39
R33-12	Terms and Conditions, Contracts, Change Orders and Costs	40562	NSC	07/15/2016	Not Printed
R33-12-502	Technology Modifications	40047	AMD	02/23/2016	2016-2/7
R33-15	Architect-Engineer Services	40563	NSC	07/15/2016	Not Printed
R33-16	Controversies and Protests	40564	NSC	07/15/2016	Not Printed
R33-18	Appeal to the Utah Court of Appeals	40566	NSC	07/15/2016	Not Printed
R33-21	Interaction Between Procurement Units	40568	AMD	08/22/2016	2016-14/42
R33-24	Unlawful Conduct	40569	AMD	08/22/2016	2016-14/44

Risk Management

R37-4	Adjusted Utah Governmental Immunity Act Limitations on Judgments	40282	AMD	06/01/2016	2016-8/6
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AGRICULTURE AND FOOD

Administration

R51-3	Government Records Access and Management Act	40234	5YR	02/29/2016	2016-6/27
R51-4	ADA Complaint Procedure	40235	5YR	02/29/2016	2016-6/27

Animal Industry

R58-2	Diseases, Inspections and Quarantines	40476	5YR	06/09/2016	2016-13/160
R58-4	Use of Animal Drugs and Biologicals in the State of Utah	40478	5YR	06/09/2016	2016-13/160
R58-14	Holding Live Raccoons or Coyotes in Captivity	40477	5YR	06/09/2016	2016-13/161
R58-18	Elk Farming	40584	AMD	09/19/2016	2016-14/46
R58-20	Domesticated Elk Hunting Parks	40585	AMD	09/19/2016	2016-15/6
R58-24	Community Spay and Neuter Grants	40637	5YR	08/02/2016	2016-17/87

Horse Racing Commission (Utah)

R52-7	Horse Racing	39951	AMD	02/02/2016	2015-24/4
R52-7	Horse Racing	40703	5YR	08/25/2016	2016-18/41
R52-7-5	Occupation Licensing and Registration	40366	AMD	06/23/2016	2016-10/8

Marketing and Development

R65-2	Utah Cherry Marketing Order	40367	REP	06/23/2016	2016-10/11
R65-8	Management of the Junior Livestock Show Appropriation	40233	5YR	02/29/2016	2016-6/28
R65-8-2	Establishment of a Forum	40369	AMD	06/23/2016	2016-10/13

Plant Industry

R68-4	Standardization, Marketing, and Phytosanitary Inspection of Fresh Fruits, Vegetables, and Other Plant and Plant Products	40201	5YR	02/08/2016	2016-5/23
R68-7	Utah Pesticide Control Rule	40232	5YR	02/29/2016	2016-6/28
R68-9	Utah Noxious Weed Act	39965	AMD	02/02/2016	2015-24/8
R68-12	Quarantine Pertaining to Mint Wilt	40365	REP	06/23/2016	2016-10/14
R68-18	Quarantine Pertaining to Karnal Bunt	40200	5YR	02/08/2016	2016-5/23

Regulatory Services

R70-330	Raw Milk for Retail	40268	5YR	03/16/2016	2016-8/91
R70-370	Butter	40270	5YR	03/16/2016	2016-8/91
R70-370	Butter	40361	AMD	06/23/2016	2016-10/15

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R70-380	Grade A Condensed and Dry Milk Products and Condensed and Dry Whey	40269	5YR	03/16/2016	2016-8/92
R70-380	Grade A Condensed and Dry Milk Products and Condensed and Dry Whey	40368	AMD	06/23/2016	2016-10/16
R70-410	Grading and Inspection of Shell Eggs with Standard Grade and Weight Classes	40149	5YR	01/20/2016	2016-4/77
R70-530	Food Protection	39950	AMD	02/02/2016	2015-24/12
R70-550	Utah Inland Shellfish Safety Program	40360	AMD	06/23/2016	2016-10/18
R70-920	Packaging and Labeling of Commodities	40634	5YR	08/02/2016	2016-17/87
R70-930	Method of Sale of Commodities	40635	5YR	08/02/2016	2016-17/88
R70-940	Standards and Testing Motor Fuel	40636	5YR	08/02/2016	2016-17/88

ALCOHOLIC BEVERAGE CONTROL

Administration

R81-1	Scope, Definitions, and General Provisions	40376	5YR	05/02/2016	2016-10/73
R81-2	State Stores	40378	5YR	05/02/2016	2016-10/74
R81-3	Package Agencies	40379	5YR	05/02/2016	2016-10/74
R81-4A	Restaurant Liquor Licenses	40381	5YR	05/02/2016	2016-10/75
R81-4F	Reception Center Licenses	40838	5YR	09/28/2016	2016-20/94
R81-5	Club Licenses	40382	5YR	05/02/2016	2016-10/76
R81-6	Special Use Permits	40383	5YR	05/02/2016	2016-10/76
R81-7	Event Permits	40384	5YR	05/02/2016	2016-10/77
R81-8	Manufacturer Licenses (Distillery, Winery, Brewery)	40385	5YR	05/02/2016	2016-10/77
R81-9	Liquor Warehousing Licenses	40386	5YR	05/02/2016	2016-10/78
R81-10C	Beer-Only Restaurant Licenses	40835	5YR	09/28/2016	2016-20/95
R81-10D	Tavern Beer Licenses	40836	5YR	09/28/2016	2016-20/95
R81-11	Beer Wholesaler Licenses	40387	5YR	05/02/2016	2016-10/79
R81-12	Local Industry Representative Licenses (Distillery, Winery, Brewery)	40388	5YR	05/02/2016	2016-10/79

ATTORNEY GENERAL

Administration

R105-2	Records Access and Management	40841	5YR	09/28/2016	2016-20/96
R105-2	Records Access and Management	40840	NSC	10/07/2016	Not Printed

CAPITOL PRESERVATION BOARD (STATE)

Administration

R131-2	Capitol Hill Complex Facility Use	40437	EMR	05/19/2016	2016-12/54
R131-2	Capitol Hill Complex Facility Use	40458	AMD	07/22/2016	2016-12/8
R131-4	Capitol Preservation Board General Procurement Rule	40092	5YR	01/11/2016	2016-3/507
R131-10	Commercial Solicitations	40807	5YR	09/20/2016	2016-20/96
R131-11	Preservation of Free Speech Activities	40808	5YR	09/20/2016	2016-20/97
R131-13	Health Reform -- Health Insurance Coverage in State Contracts -- Implementation	40814	AMD	11/21/2016	2016-20/22

CAREER SERVICE REVIEW OFFICE

Administration

R137-1	Grievance Procedure Rules	40595	5YR	07/11/2016	2016-15/81
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COMMERCE

Administration

R151-2	Government Records Access and Management Act Rule	40616	5YR	07/18/2016	2016-16/45
R151-3	Americans with Disabilities Act Rule	40948	5YR	11/03/2016	2016-23/123
R151-4	Department of Commerce Administrative Procedures Act Rule	40265	5YR	03/15/2016	2016-7/63
R151-14	New Automobile Franchise Act Rule	40293	5YR	03/31/2016	2016-8/92
R151-35	Powersport Vehicle Franchise Act Rule	40949	5YR	11/03/2016	2016-23/124

Consumer Protection

R152-1a	Internet Content Provider Ratings Methods	40604	5YR	07/15/2016	2016-15/81
R152-6	Utah Administrative Procedures Act Rules	41035	5YR	12/01/2016	Not Printed
R152-11	Utah Consumer Sales Practices Act	40342	5YR	04/19/2016	2016-10/80
R152-15	Business Opportunity Disclosure Act Rules	41036	5YR	12/01/2016	Not Printed
R152-15-3	Compensated Employees and Independent Contractors	40414	AMD	07/08/2016	2016-11/2
R152-20	New Motor Vehicle Warranties	41037	5YR	12/01/2016	Not Printed
R152-22	Charitable Solicitations Act	41039	5YR	12/01/2016	Not Printed
R152-23	Utah Health Spa Services	41040	5YR	12/01/2016	Not Printed
R152-26	Telephone Fraud Prevention Act	40341	5YR	04/19/2016	2016-10/80
R152-42	Uniform Debt-Management Services Act Rules	41041	5YR	12/01/2016	Not Printed

Corporations and Commercial Code

R154-2	Utah Uniform Commercial Code, Revised Article 9 Rules	40371	5YR	05/02/2016	2016-10/81
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Occupational and Professional Licensing

R156-1	General Rule of the Division of Occupational and Professional Licensing	40412	AMD	07/11/2016	2016-11/3
R156-3a	Architect Licensing Act Rule	40058	5YR	01/07/2016	2016-3/507
R156-3a	Architect Licensing Act Rule	40763	AMD	11/07/2016	2016-19/2
R156-9	Funeral Service Licensing Act Rule	40354	5YR	04/26/2016	2016-10/81
R156-9a	Uniform Athlete Agents Act Rule	40071	5YR	01/07/2016	2016-3/508
R156-11a	Barber, Cosmetologist/Barber, Esthetician, Electrologist, and Nail Technician Licensing Act Rule	40589	AMD	09/08/2016	2016-15/8
R156-15	Health Facility Administrators Act Rule	40705	5YR	08/25/2016	2016-18/41
R156-15A	State Construction Code Administration and Adoption of Approved State Construction Code Rule	40298	AMD	06/07/2016	2016-9/4
R156-15A	State Construction Code Administration and Adoption of Approved State Construction Code Rule	40526	5YR	06/20/2016	2016-14/171
R156-15A-231	Administration of Building Code Training Fund and Factory Built Housing Fees Account	40622	AMD	09/26/2016	2016-16/6
R156-17b	Pharmacy Practice Act Rule	40217	AMD	04/21/2016	2016-6/4
R156-17b-614a	Operating Standards - General Operating Standards, Class A and B Pharmacy	40218	AMD	04/21/2016	2016-6/11
R156-17b-614a	Operating Standards - General Operating Standards, Class A and B Pharmacy	40407	AMD	07/11/2016	2016-11/7
R156-22-302b	Qualifications for Licensure - Education Requirements	40594	NSC	08/01/2016	Not Printed
R156-24b	Physical Therapist Practice Act Rule	40858	5YR	10/06/2016	2016-21/73
R156-26a	Certified Public Accountant Licensing Act Rule	39982	AMD	02/11/2016	2016-1/4
R156-26a	Certified Public Accountant Licensing Act Rule	40859	5YR	10/06/2016	2016-21/74
R156-28	Veterinary Practice Act Rule	40943	5YR	11/03/2016	2016-23/124
R156-37	Utah Controlled Substances Act Rule	40216	AMD	04/21/2016	2016-6/14
R156-37f	Controlled Substance Database Act Rule	39923	AMD	01/07/2016	2015-23/7
R156-40	Recreational Therapy Practice Act Rule	40352	5YR	04/26/2016	2016-10/82
R156-40a	Athletic Trainer Licensing Act Rule	40941	5YR	11/03/2016	2016-23/125
R156-41	Speech-Language Pathology and Audiology Licensing Act Rule	40942	5YR	11/03/2016	2016-23/126
R156-46b	Division Utah Administrative Procedures Act Rule	40052	5YR	01/05/2016	2016-3/509
R156-47b	Massage Therapy Practice Act Rule	40000	AMD	03/08/2016	2016-2/8
R156-54	Radiologic Technologist, Radiologist Assistant, and Radiology Practical Technician Licensing Act Rule	40486	5YR	06/09/2016	2016-13/162
R156-55a	Utah Construction Trades Licensing Act Rule	40219	AMD	04/21/2016	2016-6/16
R156-55a	Utah Construction Trades Licensing Act Rule	40649	5YR	08/04/2016	2016-17/89
R156-55a-301	License Classifications - Scope of Practice	40351	AMD	06/21/2016	2016-10/19
R156-55a-303b	Continuing Education - Standards	40344	NSC	05/11/2016	Not Printed
R156-55b	Electricians Licensing Act Rule	40651	5YR	08/08/2016	2016-17/90
R156-55b-302c	Qualifications for Licensure - Examination Requirements	40762	AMD	11/07/2016	2016-19/4
R156-55c	Plumber Licensing Act Rule	40131	NSC	02/02/2016	Not Printed

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R156-55c	Plumber Licensing Act Rule	40652	5YR	08/08/2016	2016-17/91
R156-55d	Burglar Alarm Licensing Rule	40164	AMD	03/24/2016	2016-4/10
R156-57	Respiratory Care Practices Act Rule	40355	5YR	04/26/2016	2016-10/83
R156-60b-102	Definitions	39924	AMD	01/07/2016	2015-23/12
R156-60c	Clinical Mental Health Counselor Licensing Act Rule	39911	AMD	01/07/2016	2015-23/14
R156-60d	Substance Use Disorder Counselor Act Rule	40055	5YR	01/05/2016	2016-3/509
R156-64	Deception Detection Examiners Licensing Act Rule	40588	AMD	09/08/2016	2016-15/14
R156-67	Utah Medical Practice Act Rule	40196	5YR	02/08/2016	2016-5/24
R156-69	Dentist and Dental Hygienist Practice Act Rule	40150	5YR	01/21/2016	2016-4/77
R156-70a	Physician Assistant Practice Act Rule	40944	5YR	11/03/2016	2016-23/126
R156-71	Naturopathic Physician Practice Act Rule	40706	5YR	08/25/2016	2016-18/42
R156-72	Acupuncture Licensing Act Rule	40749	5YR	09/08/2016	2016-19/101
R156-72-102	Definitions	40857	NSC	10/20/2016	Not Printed
R156-73	Chiropractic Physician Practice Act Rule	40208	5YR	02/11/2016	2016-5/25
R156-75	Genetic Counselors Licensing Act Rule	40748	5YR	09/08/2016	2016-19/102
R156-76-502	Unprofessional Conduct	40764	AMD	11/07/2016	2016-19/6
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R315-264-73	Operating Record	40665	NSC	08/23/2016	Not Printed
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R315-319	Coal Combustion Residuals Requirements	40266	CPR	09/01/2016	2016-15/72

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R381-60	Hourly Child Care Centers	40163	AMD	03/30/2016	2016-4/15
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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
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	40990	R428-5	5YR	11/10/2016	2016-23/135
	40991	R428-10	5YR	11/10/2016	2016-23/135
	40174	R428-13	AMD	03/25/2016	2016-4/47
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Commerce, Consumer Protection	41040	R152-23	5YR	12/01/2016	Not Printed
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	40327	R277-202	REP	08/12/2016	2016-9/16
	40328	R277-203	REP	08/12/2016	2016-9/22
	40503	R277-211	NEW	08/12/2016	2016-13/14
	40504	R277-212	NEW	08/12/2016	2016-13/18
	40505	R277-213	NEW	08/12/2016	2016-13/26
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	40708	R671-201	AMD	10/31/2016	2016-18/18
	40618	R671-204	AMD	10/31/2016	2016-16/8
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Navajo Trust Fund, Trustees	40613	R661-18	NEW	09/21/2016	2016-15/37
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	40100	R277-510	AMD	03/09/2016	2016-3/8
	40362	R277-510-5	NSC	05/11/2016	Not Printed
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	40664	R926-3	AMD	10/12/2016	2016-17/85
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Transportation, Preconstruction	40914	R930-3	5YR	10/25/2016	2016-22/117
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	40750	R926-3	5YR	09/08/2016	2016-19/118
	40664	R926-3	AMD	10/12/2016	2016-17/85
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	40409	R926-14	EMR	05/10/2016	2016-11/55
	40525	R926-14	AMD	08/23/2016	2016-14/142
	40820	R926-14	NSC	10/07/2016	Not Printed
	40645	R926-15	5YR	08/03/2016	2016-17/97
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Health, Child Care Center Licensing Committee 39898 R381-70 AMD 01/31/2016 2015-22/40
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Education, Administration 40795 R277-715 NEW 11/07/2016 2016-19/25

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Governor, Economic Development 40434 R357-16 NEW 07/15/2016 2016-11/29
 40606 R357-16 NSC 08/01/2016 Not Printed

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Health, Disease Control and Prevention, Health Promotion 40549 R384-205 EMR 07/01/2016 2016-14/167

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	39845	R307-328-4	AMD	02/04/2016	2015-21/47
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	40063	R651-205	5YR	01/07/2016	2016-3/515
	40064	R651-206	5YR	01/07/2016	2016-3/516
	40091	R651-206	NSC	02/02/2016	Not Printed
	40074	R651-215	5YR	01/07/2016	2016-3/520
	40076	R651-217	5YR	01/07/2016	2016-3/522
	40078	R651-219	5YR	01/07/2016	2016-3/523
	40080	R651-221	5YR	01/07/2016	2016-3/524
	40213	R651-412	AMD	04/21/2016	2016-6/22
	40447	R651-601	AMD	07/28/2016	2016-12/44
	40448	R651-602	AMD	07/28/2016	2016-12/46
	40065	R651-611	5YR	01/07/2016	2016-3/527
	40215	R651-637	AMD	04/21/2016	2016-6/23
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	40618	R671-204	AMD	10/31/2016	2016-16/8
	40619	R671-308	AMD	10/31/2016	2016-16/10
	40620	R671-510	AMD	10/31/2016	2016-16/12
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Commerce, Occupational and Professional Licensing	40486	R156-54	5YR	06/09/2016	2016-13/162
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Commerce, Real Estate	40684	R162-2g	5YR	08/18/2016	2016-18/43
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Commerce, Real Estate	40276	R162-2f	AMD	05/31/2016	2016-8/7
	40364	R162-2f-202b	NSC	05/11/2016	Not Printed
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	40695	R643-872	5YR	08/24/2016	2016-18/49	
	40696	R643-874	5YR	08/24/2016	2016-18/50	
	40697	R643-875	5YR	08/24/2016	2016-18/50	
	40698	R643-877	5YR	08/24/2016	2016-18/51	
	40699	R643-879	5YR	08/24/2016	2016-18/51	
	40700	R643-882	5YR	08/24/2016	2016-18/52	
	40701	R643-884	5YR	08/24/2016	2016-18/52	
	40702	R643-886	5YR	08/24/2016	2016-18/53	
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	40742	R645-403	5YR	09/06/2016	2016-19/116	
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