

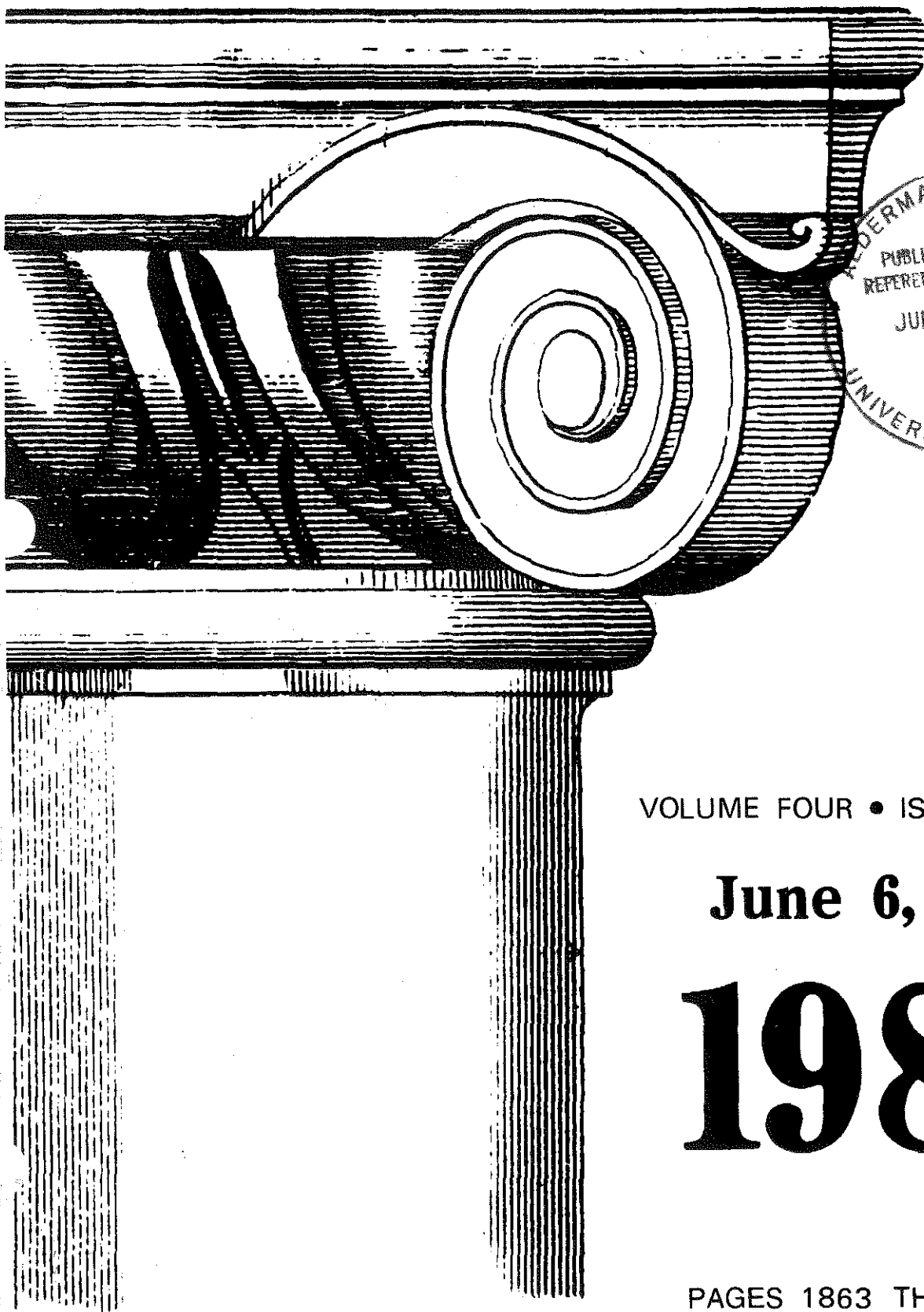
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THE VIRGINIA REGISTER

OF REGULATIONS

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VOLUME FOUR • ISSUE EIGHTEEN

June 6, 1988

1988

PAGES 1863 THROUGH 1946

INFORMATION ABOUT THE VIRGINIA REGISTER OF REGULATIONS

VIRGINIA REGISTER

The *Virginia Register* is an official state publication issued every other week throughout the year. Indexes are published quarterly, and the last index of the year is cumulative.

The *Virginia Register* has several functions. The full text of all regulations, both as proposed and as finally adopted or changed by amendment are required by law to be published in the *Virginia Register of Regulations*.

In addition, the *Virginia Register* is a source of other information about state government, including all Emergency Regulations issued by the Governor, and Executive Orders, the *Virginia Tax Bulletin* issued monthly by the Department of Taxation, and notices of all public hearings and open meetings of state agencies.

ADOPTION, AMENDMENT, AND REPEAL OF REGULATIONS

An agency wishing to adopt, amend, or repeal regulations must first publish in the *Virginia Register* a notice of proposed action; a basis, purpose, impact and summary statement; a notice giving the public an opportunity to comment on the proposal, and the text of the proposed regulations.

Under the provisions of the Administrative Process Act, the Registrar has the right to publish a summary, rather than the full text, of a regulation which is considered to be too lengthy. In such case, the full text of the regulation will be available for public inspection at the office of the Registrar and at the office of the promulgating agency.

Following publication of the proposal in the *Virginia Register*, sixty days must elapse before the agency may take action on the proposal.

During this time, the Governor and the General Assembly will review the proposed regulations. The Governor will transmit his comments on the regulations to the Registrar and the agency and such comments will be published in the *Virginia Register*.

Upon receipt of the Governor's comment on a proposed regulation, the agency (i) may adopt the proposed regulation, if the Governor has no objection to the regulation; (ii) may modify and adopt the proposed regulation after considering and incorporating the Governor's suggestions, or (iii) may adopt the regulation without changes despite the Governor's recommendations for change.

The appropriate standing committee of each branch of the General Assembly may meet during the promulgation or final adoption process and file an objection with the *Virginia Registrar* and the promulgating agency. The objection will be published in the *Virginia Register*. Within twenty-one days after receipt by the agency of a legislative objection, the agency shall file a response with the Registrar, the objecting legislative Committee, and the Governor.

When final action is taken, the promulgating agency must again publish the text of the regulation, as adopted, highlighting and explaining any substantial changes in the final regulation. A thirty-day final adoption period will commence upon publication in the *Virginia Register*.

The Governor will review the final regulation during this time and if he objects, forward his objection to the Registrar and the agency. His objection will be published in the *Virginia Register*. If the Governor finds that changes made to the proposed regulation are substantial, he may suspend the regulatory process for thirty days and require the agency to solicit additional public comment on the substantial changes.

A regulation becomes effective at the conclusion of this thirty-day final adoption period, or at any other later date specified by the promulgating agency, unless (i) a legislative

objection has been filed, in which event the regulation, unless withdrawn, becomes effective on the date specified, which shall be after the expiration of the twenty-one day extension period; or (ii) the Governor exercises his authority to suspend the regulatory process for solicitation of additional public comment, in which event the regulation, unless withdrawn, becomes effective on the date specified which date shall be after the expiration of the period for which the Governor has suspended the regulatory process.

Proposed action on regulations may be withdrawn by the promulgating agency at any time before final action is taken.

EMERGENCY REGULATIONS

If an agency determines that an emergency situation exists, it then requests the Governor to issue an emergency regulation. The emergency regulation becomes operative upon its adoption and filing with the Registrar of Regulations, unless a later date is specified. Emergency regulations are limited in time and cannot exceed a twelve-months duration. The emergency regulations will be published as quickly as possible in the *Virginia Register*.

During the time the emergency status is in effect, the agency may proceed with the adoption of permanent regulations through the usual procedures (See "Adoption, Amendment, and Repeal of Regulations," above). If the agency does not choose to adopt the regulations, the emergency status ends when the prescribed time limit expires.

STATEMENT

The foregoing constitutes a generalized statement of the procedures to be followed. For specific statutory language, it is suggested that Article 2 of Chapter 1.1:1 (§§ 9-6.14:6 through 9-6.14:9) of the Code of Virginia be examined carefully.

CITATION TO THE VIRGINIA REGISTER

The *Virginia Register* is cited by volume, issue, page number, and date. 1:3 VA.R. 75-77 November 12, 1984 refers to Volume 1, Issue 3, pages 75 through 77 of the *Virginia Register* issued on November 12, 1984.

"The *Virginia Register of Regulations*" (USPS-001831) is published bi-weekly, except four times in January, April, July and October for \$85 per year by the Virginia Code Commission, General Assembly Building, Capitol Square, Richmond, Virginia 23219. Telephone (804) 786-3591. Second-Class Postage Rates Paid at Richmond, Virginia. POSTMASTER: Send address changes to the *Virginia Register of Regulations*, P.O. Box 3-AG, Richmond, Virginia 23208-1108.

The *Virginia Register of Regulations* is published pursuant to Article 7 of Chapter 1.1:1 (§ 9-6.14:2 et seq.) of the Code of Virginia. Individual copies are available for \$4 each from the Registrar of Regulations.

Members of the Virginia Code Commission: Dudley J. Emick, Jr., Vice Chairman, Senator; A. L. Philpott, Speaker of the House of Delegates; Russell M. Carneal, Circuit Judge; John Wingo Knowles, Retired Circuit Judge; H. Lane Kneedler, Chief Deputy Attorney General; John A. Banks, Jr., Secretary, Director of the Division of Legislative Services.

Staff of the Virginia Register: Joan W. Smith, Registrar of Regulations; Ann M. Brown, Deputy Registrar of Regulations.

VIRGINIA REGISTER OF REGULATIONS

PUBLICATION DEADLINES AND SCHEDULES

January 1988 through March 1989

MATERIAL SUBMITTED BY
Noon Wednesday

PUBLICATION DATE

Volume 4 - 1987-88

Dec. 30	Jan. 18
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Feb. 24	Mar. 14
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Symbol Key

Roman type indicates existing text of regulations. *Italic type* indicates proposed new text. Language which has been stricken indicates proposed text for deletion.

DEPARTMENT OF HEALTH (STATE BOARD OF)

Title of Regulation: VR 355-17-02. Sewerage Regulations.

Statutory Authority: § 62.1-44.19 of the Code of Virginia.

Public Hearing Dates:

July 27, 1988 - 2 p.m.

July 28, 1988 - 7 p.m.

(See Calendar of Events section
for additional information)

REGISTRAR'S NOTICE: Due to its length, the Sewerage Regulations filed by the Department of Health are not being published. However, in accordance with § 9-6.14:22 of the Code of Virginia, the summary is being published in lieu of the full text. The full text of the regulations is available for public inspection at the office of the Registrar of Regulations and at the Department of Health.

Summary:

The revisions to the Sewerage Regulations were initiated as a result of the Governor's regulatory reform activities. These revisions provide for the significant technological advances, changes in the federal regulations and changes in other state regulations that have affected the original regulations jointly adopted by the State Water Control Board and the Board of Health in 1977. The revisions are formatted in a manner similar to the 1977 Sewerage Regulations which currently regulate the design and operation of sewage treatment systems that discharge to surface waters or utilize land treatment.

The regulations are divided into three parts including: (i) the procedural regulations; (ii) the operational regulations; and (iii) the Manual of Practice. The revised procedures allow for greater specificity in requirements for permit issuance to construct and operate treatment works, sewage collection systems and sewage sludge management systems. Public participation related to permit issuance is also specified.

The revised operational regulations include minor changes in the requirements for sampling, recording and reporting of wastewater testing. In addition, requirements for monitoring of sewage sludge and sewage solids management are specified.

The Manual of Practice contains design requirements and design recommendations for construction of sewage collection systems, sewage treatment works

and sewage sludge management systems including utilization and disposal.

The most significant changes to the 1977 Sewerage Regulations Manual of Practice involve revised standards for: sludge management, alternative technology for biological treatment of wastewater and disinfection, and land treatment of wastewater effluent.

Section 62.1-44.19(8) of Chapter 3.1 of Title 62.1 of the Code of Virginia directs the State Water Control Board and the Virginia Department of Health to promulgate regulations specifying procedures for processing applications and plans and specifying minimum treatment and design requirements for sewerage systems and treatment works. Such revised regulations shall be adopted only after a hearing is held and the department and the board take into consideration the economic and social costs and benefits which can reasonably be expected to be obtained as a result of the regulations as adopted, modified or cancelled.

The revisions to the Sewerage Regulations consist of narrative statements that describe procedural and operational requirements in specific terms and consist of numerical limits that establish design requirements for sewerage systems and treatment works. These statements and limits describe the requirements necessary for reasonable design of sewerage systems and treatment works and appropriate management of sewage sludge products.

* * * * *

Title of Regulation: VR 355-20-2. Virginia Radiation Protection Regulations: Fee Schedule.

Statutory Authority: § 32.1-229.1 of the Code of Virginia.

Public Hearing Date: August 10, 1988 - 10 a.m.

(See Calendar of Events section
for additional information)

Summary:

The Department of Health proposes to establish a fee schedule for the registration of radiation producing machines and for inspections of X-ray machines performed by Department of Health personnel.

The proposed fee schedule is necessary as a result of House Bill 91 passed by the 1987 Session of the General Assembly.

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The major proposals will include:

1. Require a registration fee for diagnostic and therapeutic X-ray machines, particle accelerators and teletherapy machines used in the healing arts.
2. Require the proposed registration fee be collected based on the inspection cycle.
3. Require a registration fee for each machine and additional tube.
4. Exempt state agencies and local governments from the requirement to pay the registration fees.
5. Require payment of an inspection fee for inspections of X-ray machines performed by Department of Health personnel; however, no fee shall be charged for inspections initiated by the Health Department. The inspection fee will be a flat fee based on the type of machine.
6. Require the inspection fees to include all reasonable cost.

VR 355-20-2. Virginia Radiation Protection Regulations: Fee Schedule.

VIRGINIA DEPARTMENT OF HEALTH
BUREAU OF RADIOLOGICAL HEALTH
FEE SCHEDULE
X-RAY PROTECTION PROGRAM

§ 1. Registration fees.

All operators or owners of diagnostic X-ray machines used in the healing arts and capable of producing radiation shall pay the following registration fee:

\$15 for each machine and additional tube(s) that have a required annual inspection, collected annually;

\$15 for each machine and additional tube(s) that have a required inspection every three years, collected every three years.

All operators or owners of therapeutic X-ray, particle accelerators, and teletherapy machines used in the healing arts capable of producing radiation shall pay the following annual registration fee:

\$15 for each machine with a maximum beam energy of less than 1Mev;

\$15 for each machine with a maximum beam energy of 1Mev or greater.

Where the operator or owner of the aforementioned machines is a state agency or local government, that agency is exempt from the payment of the registration fee.

§ 2. Inspection fees.

The following fees shall be charged for surveys requested by the registrant and performed by a Department of Health inspector:

	PER TUBE
General Radiographic (includes: Chiropractic, Mammographic, Podiatric, Veterinary, Cephalometric, and Special Purpose X-ray Systems)	\$190
Fluoroscopic, C-arm Fluoroscopic	\$190
Combination (General Purpose-Fluoroscopic)	\$380
Dental Intraoral, Cephalometric and Panographic	\$65

VIRGINIA HOUSING DEVELOPMENT AUTHORITY

Title of Regulation: VR 400-02-0008. Procedures, Instructions and Guidelines for Virginia Rental Rehabilitation Program.

Statutory Authority: § 36-55.30:3 of the Code of Virginia.

Public Hearing Date: N/A
(See Calendar of Events section for additional information)

Summary:

The proposed amendments to the procedures, instructions and guidelines for Virginia rental rehabilitation program make certain technical and administrative changes which give the authority more flexibility in administering the rental rehabilitation program, while maintaining the program's compliance with applicable federal regulations. These changes include deleting a requirement that income information be based on the U.S. Census, permitting multiple extensions of allocations to localities, amending the notice of funding provisions and permitting waivers of certain program requirements to be granted to localities if such requirements are met on a statewide basis.

VR 400-02-0008. Procedures, Instructions and Guidelines for Virginia Rental Rehabilitation Program.

§ 1. Definitions.

The following words and terms, when used herein, shall have the following meaning, unless the context indicates otherwise.

"Executive Director" means the Executive Director of VHDA or any other officer or employee of VHDA who is authorized to act on behalf of VHDA pursuant to a resolution of the Board.

"Grantee" means any unit of local government that enters into a grant agreement with VHDA to administer a rental rehabilitation grant.

"HUD" means the U. S. Department of Housing and Urban Development.

"Section 8" means Section 8 of the United States Housing Act of 1937, as amended, and the applicable rules and regulations promulgated thereunder.

"VHDA" means Virginia Housing Development Authority.

These definitions supplement those contained in 24 CFR 511.2 and other applicable sections of the Code of Federal Regulations. Only those terms not defined in the Federal Code or used differently herein have been defined.

§ 2. Purpose and applicability.

These procedures, instructions and guidelines are adopted pursuant to Rule 103 of the VHDA Rules and Regulations adopted on January 17, 1984, pursuant to § 36-55.30:3 of the Code of Virginia. The effective date of these procedures, instructions and guidelines is December 18, 1984.

The following procedures, instructions and guidelines are applicable to all grants made by VHDA to units of local government with funds allocated to VHDA by HUD for the purpose of carrying out local rental rehabilitation programs for the benefit of lower income families and persons. Such grants are referred to herein as "rental rehabilitation grants".

These procedures, instructions and guidelines supplement and clarify rather than supercede federal program requirements. VHDA and all local grantees are fully bound by the applicable requirements of 24 CFR Part 511, as well as governing federal and state laws in the administration and use of funds received from HUD under the federal Rental Rehabilitation Program.

Notwithstanding anything to the contrary herein, the Executive Director is authorized with respect to any rental rehabilitation grant to waive or modify any provisions herein where deemed appropriate by him for good cause, to the extent not inconsistent with VHDA's Act, Rules and Regulations, and any applicable federal regulations.

All reviews, analyses, evaluations, inspections, determinations and other actions by VHDA pursuant to the provisions of these procedures, instructions and guidelines shall be made for the sole and exclusive benefit and protection of VHDA, and shall not be construed to waive or modify any of the rights, benefits, privileges, duties, liabilities or responsibilities of VHDA or the grantee under the agreements and documents executed in connection with a rental rehabilitation grant.

The procedures, instructions and guidelines set forth

herein are intended to provide a general description of VHDA's requirements and are not intended to include all actions involved or required in the administration of grants under the Virginia Rental Rehabilitation Program. These procedures, instructions and guidelines are subject to change at any time by VHDA and may be supplemented by policies, procedures, instructions and guidelines adopted by VHDA from time to time with respect to the Virginia Rental Rehabilitation Program.

§ 3. Program eligibility.

A. Eligible localities.

VHDA will accept applications for rental rehabilitation grants from any city, town or county determined by HUD to be eligible for participation in the Virginia Rental Rehabilitation Program. Eligible counties may only use rental rehabilitation grants in areas which have been determined by the federal government to be ineligible for housing assistance from the U.S. Farmers Home Administration. VHDA will maintain a current listing of eligible local governments.

B. Eligible neighborhoods.

Applicants must document that each neighborhood in which rental rehabilitation grants are used meets the following two conditions:

1. Neighborhood income level. According to the 1980 U.S. Census, the median household income in the neighborhood must be at or below 80% of the median household income for the housing market area. The median household income in the neighborhood must be at or below 80% of the median income for the Metropolitan Statistical Area (MSA) in which it is located, or, in the case of a neighborhood not within a MSA, at or below 80% of the median income for the state's nonmetropolitan areas.

2. Rent stability/affordability. Rents in the neighborhood must be stable and generally affordable to lower income persons. An applicant must document rent stability/affordability in one of the following three ways:

a. Rent trends. An applicant may document that, according to the U. S. Census, the increase in average contract rent in the neighborhood between 1970 and 1980 was equal to or less than the increase in average contract rent in the housing market area;

b. Current rent survey. An applicant may survey current neighborhood rents to document that rents are generally at or below the Section 8 Fair Market Rent limits for existing housing; or

c. Other evidence. An applicant may document that, according to the 1980 U. S. Census, the median

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gross rent in the neighborhood was at or below the Section 8 Fair Market Rent limit for an existing two-bedroom unit that was applicable for the housing market area in April, 1980, and provide some type of evidence that the neighborhood housing market has been stable since 1980 (e.g., assessed property values or building permit activity have not increased more rapidly than in the housing market area as a whole).

C. Eligible projects.

Rental rehabilitation grants may only be used to rehabilitate projects meeting the requirements of 24 CFR 511.10(c).

§ 4. Allocation of funds.

A. Types of allocations.

VHDA will accept the following two types of applications from eligible local governments for rental rehabilitation grants:

1. General allocations. VHDA will make allocations of funds to local governments on a first-come, first-served basis for use in carrying out locally-designed rental rehabilitation programs. The following conditions will apply:

a. Each local allocation will be limited to a specific dollar amount.

b. Once a local government has committed 80% of its funds to specific projects, it will be eligible to apply for an additional general allocation.

c. Initial allocations will expire 12 months from the date VHDA enters into a grant agreement with HUD; and any additional allocations will expire 15 months from the date VHDA enters into a grant agreement with HUD. An initial allocation to a grantee will expire 12 months after the date VHDA enters into a grant agreement with the grantee with respect to such allocation; provided, however, that VHDA may, in its discretion, extend the term of an allocation one or more times for a period not to exceed 12 months for each such extension.

d. Upon the expiration of an allocation, any uncommitted grant funds will be recaptured.

e. VHDA will reserve the right to recapture monies from an additional general allocation prior to its expiration, if necessary, due to poor local performance and the need to commit state program funds in a timely manner.

2. Funding for specific projects. VHDA will fund, on a first-come, first-served basis, applications submitted by eligible local governments for specific projects. The

following conditions will apply:

a. Total funding, including any prior general or project allocations, will be limited to a specific dollar amount.

b. A locality with an uncommitted general allocation will be expected to commit these funds to the project prior to requesting additional monies.

The funding limit for specific projects will be lifted only in the event that state grant monies are not being committed in a timely manner.

B. Application procedures.

VHDA ~~will issue a~~ shall, from time to time, give notice of funds availability to all eligible units of local governments in each federal fiscal year in which grant funds are allocated to throughout the Commonwealth. Such notice ~~will may~~ include the applicable funding limits and a timetable for the submission and review of applications for each type of funds allocation.

Specific application requirements and review procedures will be provided in application packets and through such workshops/training sessions as VHDA deems appropriate. Applications for grant funds will be expected to include the following types of information:

1. General allocations. Applications for general allocations will include an identification and description of program neighborhoods; the locality's method of identifying and selecting projects; a description of local program operating procedures; a description of steps to be taken to ensure adequate maintenance and operation of projects receiving rental rehabilitation funds; a description of steps to be taken to encourage the use of minority and women-owned businesses; a description of the anticipated form of assistance to be provided to property owners and the means by which the amount of assistance will be determined; an indication of the anticipated source of matching funds; a description of any assistance to be provided to property owners in obtaining matching funds; an affirmative marketing plan (see § 5.I.2.); an agreement to comply with all federal and state program requirements; and other information as requested by VHDA in the application packet.

2. Funding for specific projects. An application for funding for a specific project will include information concerning the project's conformance with neighborhood standards; a description of local program operating procedures; a description of steps to be taken to ensure adequate project maintenance and operation; a description of steps to be taken to encourage the use of minority and women-owned businesses; a description of the project's financing package; an affirmative marketing plan; information concerning expected displacement/relocation of lower

income persons; an agreement to comply with all federal and state program requirements; and other information as requested by VHDA in the application packet.

3. Requests for increases in allocations. After receiving an allocation of funds under the Virginia Rental Rehabilitation Program, a grantee may request an increase in such allocation by applying therefor on such form or forms as VHDA shall provide.

C. Grant agreement.

Upon the approval of an application for funding, VHDA will enter into a grant agreement with the local government stating the terms and conditions under which funds will be provided.

§ 5. Program requirements.

A. Lower income benefit.

Each grantee must use at least 70% of its rental rehabilitation grant to benefit lower income families in accordance with 24 CFR 511.10(a)(4). This benefit standard must be maintained by each grantee in its program at all times unless waived by VHDA. A waiver will only be approved when true hardship exists and when such a waiver will not prevent VHDA from achieving an overall 70% benefit standard in the Virginia Rental Rehabilitation Program.

B. Family benefit.

Each grantee must use at least 70% of its rental rehabilitation grant to rehabilitate units containing two or more bedrooms in accordance with 24 CFR 511.10(k). This standard must be maintained by each grantee in its program at all times unless waived by VHDA. A waiver will only be approved when true hardship exists and when such a waiver will not prevent VHDA from achieving an overall 70% standard in the Virginia Rental Rehabilitation Program, except in cases where VHDA has applied for and received from HUD a special waiver from the 70% standard.

C. Funding priorities.

Each grantee must include the following priorities in its method for selecting projects to receive rental rehabilitation funds.

1. Units occupied by very low income families. Each grantee must give funding priority to projects which contain substandard units which, prior to rehabilitation, are occupied by very low income families. This priority may include unoccupied units if:

a. The units could be expected to be occupied by very low income families but for the units' substandard condition; and

b. The grantee agrees to assign Section 8 certificates and/or vouchers for at least 70% of the rehabilitated units in order to enable it to be occupied by very low income families.

2. Efficient use of grant funds. Each grantee must give funding priority to projects which require a minimum percentage of rental rehabilitation grant subsidy.

Proposed projects meeting these priorities, which are financially feasible and which meet all other program requirements, must be selected for funding prior to projects which do not meet the priorities. In cases where these priorities conflict, the first priority must be given precedence by grantees.

D. Adequate maintenance and operation of rehabilitated units.

Each grantee must adopt one or more of the following measures to ensure adequate maintenance and operation of projects receiving rental rehabilitation funds:

1. Establishment of minimum equity requirements for investors;

2. Assignment of priority to projects in which private investors and lenders are taking a long-term financial risk in project success;

3. Restriction of funding to investors with a satisfactory record of maintaining and operating rental housing (the applicant must have standards and procedures for assessing an investor's record); or

4. Establishment of other reasonable standards and/or procedures for ensuring adequate maintenance and operation of rehabilitated units.

E. Project funding limits.

Each grantee must comply with the maximum project funding limits set by 24 CFR 511.10(e).

VHDA will seek a waiver from HUD of the \$5,000 average per unit funding limit for a specific project at the request of a grantee if the grantee can document a need for such a waiver in accordance with 24 CFR 511.10(e)(2).

F. Minimum level of rehabilitation.

A grantee may establish a minimum level of rehabilitation to be required for participation in its rental rehabilitation program in excess of that established in 24 CFR 511.10(f).

G. Eligible rehabilitation costs.

A grantee may use a rental rehabilitation grant only to cover costs permitted under 24 CFR 511.10(g). No more

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than 20% of the rental rehabilitation funds assigned to a project may be used to make relocation payments to tenants who are displaced by rehabilitation activity.

H. Displacement and tenant assistance.

A grantee must provide any lower income family displaced from a project assisted by a rental rehabilitation grant with financial and advisory assistance as required by the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970, 42 USC 4601. A family will be determined to be displaced in accordance with the definitions contained in 24 CFR 511.10(h)(1). No tenant will be considered displaced if the tenant has been offered a decent, safe and sanitary dwelling unit in the project at an affordable rent.

I. Affirmative marketing.

Each grantee must ensure the affirmative marketing of units in rehabilitated projects for a period of seven years beginning on the date on which all the units in a projects are completed, in accordance with 24 CFR 511.10(1)(2). "Affirmative Marketing" is defined as adherence to federal, state and local fair housing laws, and positive efforts to ensure that persons of similar income levels in the same housing market area are made aware of a housing project and its benefits regardless of race, creed, religion, national origin, sex or handicap. All fair housing laws must be scrupulously observed by those who participate in the Virginia Rental Rehabilitation Program. Failure to comply with affirmative marketing requirements will subject the grantee and/or property owner to sanctions.

In order to meet its affirmative marketing responsibilities, each grantee must comply with, or ensure property owner compliance with, the following requirements and procedures:

1. General requirement. In conjunction with the marketing of all rehabilitated units, except for units occupied by families receiving Section 8 certificates or vouchers, the following five specific requirements must be met:

a. All advertising, brochures, leaflets and other printed material must include the Equal Housing Opportunity logo and the slogan or statement, and all advertising depicting persons must depict persons of majority and minority groups, including both sexes;

b. The Equal Housing Opportunity slogan, "Equal Housing Opportunity", utilized in the newspaper classified advertisements should be at least eight (8) point boldface type, and display advertising must include the Equal Housing logo and slogan;

c. If other logotypes are used in the advertisement, then the Equal Opportunity logotype should be of a

size equal to the largest of other logotypes;

d. All signs, off-site and on-site, must prominently display the logo and slogan, or the statement in a size that would not be smaller than the largest letters used on the sign; and

e. The logo and slogan, or the statement and the HUD Equal Housing Opportunity Poster (HUD Form 928.1 dated 7-75), must be prominently displayed in the on-site office or wherever applications are being taken.

2. Affirmative marketing plan. Any local government making application to VHDA for a rental rehabilitation grant must submit as part of its application, on a form supplied by VHDA, a local affirmative marketing plan covering the leasing of all rehabilitated units, except for those occupied by families receiving Section 8 certificates or vouchers. Such plan must include the following information for each neighborhood in which the local government proposes to operate a rental rehabilitation program:

a. An identification of the predominant racial/ethnic composition of the neighborhood;

b. An identification of the group(s) in the housing market area that are least likely to apply for housing in the neighborhood because of its location and other factors without special outreach efforts;

c. An identification of the types of advertising and outreach procedures (e.g., use of community contacts) which participating property owners may use to meet their affirmative marketing responsibilities;

d. A description of the information to be provided to participating property owners, their staff or managing agents to enable them to carry out their affirmative marketing and fair housing responsibilities; and

e. The anticipated results of the local affirmative marketing plan (i.e., the percent of vacancies expected to be filled by the identified target group(s)).

3. Affirmative marketing agreements. Any property owner applying for rental rehabilitation funds from a grantee must submit to such grantee a description of its proposed affirmative marketing procedures which must conform with the grantee's affirmative marketing plan. This description must be in a form prescribed by the grantee, and must include the form(s) of advertising and community contacts to be used by the owner or the owner's managing agent in publicizing all vacancies, except for units rented to families receiving Section 8 certificates or vouchers, in order to attract the group(s) identified by the grantee as being least

likely to apply.

Upon approval of proposed efforts, owners must enter into a compliance agreement with the grantee which must include:

- a. An agreement to comply with federal, state and local fair housing law;
- b. An agreement to carry out specified affirmative marketing procedures;
- c. An agreement to maintain records on the racial/ethnic and gender characteristics of tenants occupying units before and after rehabilitation, records on tenants moving from and (initially after rehabilitation) into rehabilitated units, records on applications for tenancy within 90 days following completion of rehabilitation, data on the race and ethnicity of displaced households and, if available, the address of the housing units to which each displaced household relocated, and information documenting affirmative marketing efforts in a form specified by the grantee;
- d. An agreement to report such information to the grantee on an annual basis; and

e. Sanctions to be imposed by the grantee in the event of noncompliance by the property owner.

Such agreement must be effective for a period of seven years beginning on the date on which the rehabilitation of the units in the projects is completed.

4. Grantee requirements. Each grantee shall be responsible for:

- a. Informing property owners' staff and owners' managing agents of their responsibility to comply with federal, state and local fair housing laws;
- b. Informing property owners of the affirmative marketing requirements of the Virginia Rental Rehabilitation Program, as well as the provisions of the grantee's affirmative marketing plan;
- c. Reviewing and approving affirmative marketing procedures proposed by property owners;
- d. Entering into legally binding affirmative marketing agreements with property owners;
- e. Monitoring compliance by property owners with affirmative marketing agreements and imposing prescribed sanctions as necessary; and
- f. Collecting, and reporting to VHDA on an annual basis, information regarding the racial/ethnic and gender characteristics of tenants occupying units

before and after rehabilitation, information on tenants moving from and (initially after rehabilitation) into rehabilitated units, records on applications for tenancy within 90 days following completion of rehabilitation, data on the race and ethnicity of displaced households and, if available, the address of the housing units to which each displaced household relocated, and information documenting property owner compliance with affirmative marketing requirements (e.g., records of all advertisements, notices and marketing information).

J. Use of minority and women's business enterprises. Each grantee must encourage the use of minority and women's business enterprises in connection with activities funded with rental rehabilitation grant monies in accordance with 24 CFR 511.10(m)(1)(v). Such efforts must include the following activities.

1. Targets. Upon entering into a grant agreement with VHDA, each grantee must establish local dollar or other measurable targets based on factors that the grantee regards as appropriate and related to the purpose of its rental rehabilitation program. A copy of such targets must be forwarded to VHDA prior to the drawing down of any grant funds.

2. List of businesses. Upon entering into a grant agreement with VHDA, each grantee must prepare a list of minority and women's business enterprises which are potential suppliers or rehabilitation services and materials to property owners receiving grant assistance. A grantee should make use of the services of the Virginia Office of Minority Business Enterprise and appropriate federal agencies, as needed, in preparing such a list. Each grantee must forward a copy of the list to VHDA prior to drawing down any grant funds.

3. Bid solicitation. Each grantee must make reasonable efforts to include qualified minority and women's business enterprises on bid solicitation lists and to ensure that such businesses are solicited whenever they are potential sources of services and materials.

4. Negotiated contracts. Whenever competitive bidding is not required of a property owner, the grantee must provide the property owner with a list of minority and women's business enterprises which are potential sources of services or materials.

5. Subcontracts. Each grantee must ensure that property owners require that all subcontractors be provided with a list of minority and women's business which are potential suppliers of materials or services.

6. Records. Each grantee must keep records of the number and dollar amount of participation by minority and women's business enterprises, including subcontractors and owners of rental properties, in

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connection with activities funded with rental rehabilitation grant monies.

K. Use of local area and minority contractors, suppliers and employees.

Each grantee must encourage the use of local area and minority contractors, suppliers and employees in connection with activities funded with rental rehabilitation grant monies in accordance with 24 CFR 511.10(m)(1)(v). Such activities must include the development of a plan that includes the following elements:

1. Area definition. The plan must include a definition of the local area in which residents and businesses are the intended beneficiaries of rental rehabilitation activities (usually the applicant locality or, in the case of a town or small city, the locality plus the adjacent county).

2. Procedures. The plan must include procedures to be followed to encourage the use of local area and minority contractors, suppliers and employees in connection with activities funded with rental rehabilitation grant monies.

A copy of this plan (such federally required plans are often referred to as "Section 3 Plans") must be forwarded to VHDA prior to the drawing down of any grant funds.

L. Architectural barriers to the handicapped.

Each grantee must ensure that, in the case of projects involving the rehabilitation of 25 or more units where the cost of rehabilitation is greater than or equal to 75% of the value of the project after rehabilitation, the owner improves any unit occupied by a handicapped person prior to rehabilitation in a manner which removes architectural barriers in accordance with the requirements of 24 CFR 511.10(m)(1)(ii).

M. Age discrimination in employment.

Each grantee must ensure that property owners do not discriminate against employees based on age, nor that property owners use contractors who so discriminate, in accordance with 24 CFR 511.10(m)(1)(ii).

N. Labor standards.

Each grantee must ensure that all laborers and mechanics, except laborers and mechanics employed by a local government acting as the principal contractor on the project, employed in the rehabilitation of a project receiving rental rehabilitation grant assistance that contains 12 or more units, are paid at the prevailing wage rates set under the Davis Bacon Act, 40 USC 276a, and that contracts involving their employment are subject to the provisions of the Contract Work Hours and Safety Standards Act, 40 USC 327, in accordance with the

requirements of 24 CFR 511.11(a).

O. Environmental and historic reviews.

Each grantee must comply with the environmental and historic review requirements contained in 24 CFR Part 58. Grantees must submit requests for release of funds to VHDA for review. VHDA will forward its recommendation, together with the request, the environmental certification and the objections, to HUD. All approvals for release of funds will be made by HUD.

P. Conflicts of interest.

Each grantee must comply with the conflict of interest requirements contained in 24 CFR 511.11(e).

Q. Lead-based paint.

Each grantee must ensure that any property owner receiving rental rehabilitation grant assistance takes steps to remove the hazards of lead-based paint in accordance with the requirements of 24 CFR Part 35.

R. Use of debarred, suspended or ineligible contractors.

Each grantee must comply with the requirements of 24 CFR Part 24 in the employment, engagement of services, awarding of contracts, or funding of any contractors or subcontractors with rental rehabilitation grant funds.

S. Legal agreement with property owner.

Each grantee must execute an agreement with the owner of a property receiving rental rehabilitation assistance, including a cooperative or mutual housing association, under which the owner:

1. Agrees, for a period of at least 10 years beginning on the date on which the rehabilitation of the units in the project is completed, not to:

a. Discriminate against prospective tenants on the basis of their receipt of, or eligibility for, housing assistance under any federal, state or local housing assistance program;

b. Discriminate against prospective tenants on the basis that the tenants have a minor child or children who will be residing with them, except for housing projects for elderly persons; and

c. Convert the units to condominium ownership or any form of ineligible cooperative ownership.

2. Agree, for a period of seven years beginning on the date on which the rehabilitation of the units in the project is completed, to:

a. Comply with federal, state or local fair housing laws;

b. Carry out specified affirmative marketing procedures; and

c. Maintain records on the racial/ethnic and gender characteristics of tenants occupying units before and after rehabilitation, records on tenants moving from and (initially after rehabilitation) into rehabilitated units, records on applications for tenancy within 90 days following completion of rehabilitation, data on the race and ethnicity of displaced households and, if available, the address of the housing units to which each displaced household relocated, and information documenting affirmative marketing efforts in a form specified by the grantee, and to report such information to the grantee on an annual basis (see § 5 I 3).

Such agreement must contain sanctions to be imposed by the grantee in the event of noncompliance by the property owner. Guidelines are contained in 24 CFR 511.10(i) and (j).

§ 6. Grant administration.

A. Responsibility for grant administration.

Grantees are responsible for ensuring that rental rehabilitation grants are administered in accordance with the requirements of these procedures, instructions and guidelines, all applicable sections of 24 CFR Part 511 and other applicable state and federal laws.

B. Records to be maintained.

Each grantee must maintain records specified by VHDA that clearly document its performance under each requirement of these procedures, instructions and guidelines. Required records must be retained for a period of three years from the date of final close-out of the rental rehabilitation grant. Public disclosure of records and documents must comply with the requirements of 24 CFR 511.72.

C. Grant management and audit.

Each grantee must comply with the policies, guidelines and requirements of 24 CFR 511.11(c) in the acceptance and use of rental rehabilitation grant funds. Access to grantee records and files must be provided in accordance with the requirements of 24 CFR 511.73. The financial management systems used by grantees must conform to the requirements of 24 CFR 511.74.

D. Disbursement of funds/cash management systems.

Grant monies will be disbursed to grantees for payment of eligible program costs in accordance with the following procedures:

1. Project accounts. Grantees must identify to VHDA each project for which they wish to provide rental

rehabilitation funds and the amount of grant monies to be committed to each project. Upon receipt of all necessary project information, VHDA will establish a project account with HUD.

2. Disbursement of funds. Grant monies will be disbursed on a project-by-project basis by electronic funds transfer to a designated depository institution in accordance with HUD procedures and guidelines. VHDA will designate a depository institution and make all request to HUD for funds transfer, unless such authority is formally delegated to a grantee by VHDA. Grantees will notify VHDA of the need for grant funds to pay eligible rehabilitation costs. VHDA will in turn request HUD to transfer funds to VHDA. Upon receipt of such monies, VHDA will disburse grant funds to the grantee *or, at VHDA's option, VHDA may, prior to receiving the grant funds requested from HUD, disburse to the grantee its own funds in an amount equal to such requested grant funds and reimburse itself with the HUD funds upon receipt thereof.*

3. Conditions for requesting draw-downs of funds. Grantees must not request draw-downs of funds until such funds are actually needed for payment of eligible cost. A request for funds for payments of a contractor may only be made after the work has been inspected and found to be satisfactory. Grant funds must be drawn down at no greater proportion than the amount of rental rehabilitation funds in the project. For example, if on a \$10,000 rehabilitation project, \$5,000 of rental rehabilitation grant funds were provided and the construction was 50% complete, no more than \$2,500 in rental rehabilitation grant funds could be drawn down for the project. Disbursement of any grant funds is conditioned on the submission of satisfactory information by the grantee about the project and compliance with other procedures established by VHDA and HUD.

§ 7. Allocation and administration of § 8 certificates and vouchers.

A. Allocation of rental assistance.

Subject to the availability (as determined by HUD) of contract and budget authority for certificates or vouchers under Section 8, VHDA will assign contract authority for up to one voucher or certificate for use in the Virginia Rental Rehabilitation Program for each \$5,000 of rental rehabilitation grant monies allocated to a grantee. Such rental assistance must be used in accordance with 24 CFR 511.41(a) and other governing HUD rules, regulations, procedures and requirements.

B. Administration of rental assistance.

VHDA will enter into Annual Contributions Contracts with HUD to administer contract authority for Section 8 certificates or vouchers allocated to Virginia for use in the Virginia Rental Rehabilitation Program. VHDA will

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administer such contract authority in accordance with the applicable VHDA Procedures, Instructions and Guidelines.

§ 8. Annual performance review.

A. Performance elements.

VHDA will review the performance of all grantees in carrying out their responsibilities under these procedures, instructions and guidelines and under all the applicable requirements of 24 CFR Part 511 at least annually. These reviews will analyze whether the grantee has:

1. Carried out its activities in a timely manner, including the commitment of rental rehabilitation grant funds to specific projects;
2. Has carried out its activities in accordance with all state and federal requirements; and
3. Has a continuing capacity to carry out its activities in a timely manner.

B. Grantee reports to VHDA.

Each grantee must submit the following reports to VHDA at such times and such formats as VHDA may prescribe:

1. Management reports. Each grantee must submit reports to VHDA on the management of its rental rehabilitation grant as requested by VHDA.
2. Annual performance report. Each grantee must submit an annual performance report to VHDA at such times as VHDA may prescribe. This report must contain such information and be in such form as prescribe by VHDA, and will include at least the elements prescribe in 24 CFR 511.81(2).

C. Remedial actions and sanctions.

In the event of failure by a grantee to carry out its responsibilities in administering its rental rehabilitation grant, VHDA will seek remedial actions on the part of the grantee and, if necessary, impose sanctions including the recapture of uncommitted rental rehabilitation grant funds and barring the local government from future participation in the Virginia Rental Rehabilitation Program.

These amendments shall take effect June 21, 1988.

STATE WATER CONTROL BOARD

Title of Regulation: VR 680-14-04. Sewerage Regulations.

Statutory Authority: § 62.1-44.15 of the Code of Virginia.

Public Hearing Dates:

July 27, 1988 - 2 p.m.

July 28, 1988 - 7 p.m.

(See Calendar of Events section for additional information)

REGISTRAR'S NOTICE: Due to its length, the Sewerage Regulations filed by the State Water Control Board are not being published. However, in accordance with § 9-6.14:22 of the Code of Virginia, the summary is being published in lieu of the full text. The full text of the regulations is available for public inspection at the office of the Registrar of Regulations and at the State Water Control Board.

Summary:

The revisions to the Sewerage Regulations were initiated as a result of the Governor's regulatory reform activities. These revisions provide for the significant technological advances, changes in the federal regulations and changes in other state regulations that have affected the original regulations jointly adopted by the State Water Control Board and the Board of Health in 1977. The revisions are formatted in a manner similar to the 1977 Sewerage Regulations which currently regulate the design and operation of sewage treatment systems that discharge to surface waters or utilize land treatment.

The regulations are divided into three parts including: (i) the procedural regulations; (ii) the operational regulations; and (iii) the Manual of Practice. The revised procedures allow for greater specificity in requirements for permit issuance to construct and operate treatment works, sewage collection systems and sewage sludge management systems. Public participation related to permit issuance is also specified.

The revised operational regulations include minor changes in the requirements for sampling, recording and reporting of wastewater testing. In addition, requirements for monitoring of sewage sludge and sewage solids management are specified.

The Manual of Practice contains design requirements and design recommendations for construction of sewage collection systems, sewage treatment works and sewage sludge management systems including utilization and disposal.

The most significant changes to the 1977 Sewerage Regulations Manual of Practice involve revised standards for: sludge management, alternative technology for biological treatment of wastewater and disinfection, and land treatment of wastewater effluent.

Section 62.1-44.19(8) of Chapter 3.1 of Title 62.1 of the Code of Virginia directs the State Water Control Board and the Virginia Department of Health to promulgate regulations specifying procedures for

processing applications and plans and specifying minimum treatment and design requirements for sewerage systems and treatment works. Such revised regulations shall be adopted only after a hearing is held and the department and the board take into consideration the economic and social costs and benefits which can reasonably be expected to be obtained as a result of the regulations as adopted, modified or cancelled.

The revisions to the Sewerage Regulations consist of narrative statements that describe procedural and operational requirements in specific terms and consist of numerical limits that establish design requirements for sewerage systems and treatment works. These statements and limits describe the requirements necessary for reasonable design of sewerage systems and treatment works and appropriate management of sewage sludge products.

FINAL REGULATIONS

For information concerning Final Regulations, see information page.

Symbol Key

Roman type indicates existing text of regulations. *Italic type* indicates new text. Language which has been stricken indicates text to be deleted. [Bracketed language] indicates a substantial change from the proposed text of the regulations.

DEPARTMENT OF HEALTH (STATE BOARD OF)

Title of Regulation: VR 355-20-1. Virginia Radiation Protection Regulations. (Previously known as Ionizing Radiation Rules and Regulations.)

Statutory Authority: § 32.1-229.4 of the Code of Virginia.

Effective Date: July 6, 1988

REGISTRAR'S NOTICE: Due to its length, the proposed regulation entitled Virginia Radiation Protection Regulations (VR 355-20-1), (previously known as Ionizing Radiation Rules and Regulations), filed by the Department of Health, Bureau of Radiological Health, is not being published. However, in accordance with § 9-6.14:22 of the Code of Virginia, a summary, in lieu of full text, explaining the amendments is being published. The full text of the regulation is available for public inspection at the Office of the Registrar of Regulations and the Department of Health.

Summary:

The following amendments incorporate provisions required by House Bill 91. The major changes adopted are:

Exempt from the registration requirements x-ray machines not used in the healing arts that are operated by remote control and which are not accessible to human beings during operation.

Exempt from the registration requirements radiation producing machines used primarily for domestic purposes.

Require registration of x-ray machines within 30 days after installation.

Require an inspection of x-ray machine be scheduled within 30 days after installation.

Require both the certification of each x-ray machine used in the healing arts and the display of the certificate by the registrant.

Prescribe forms to be used in reporting results of radiation surveys.

Deny the use of an x-ray machine in the practice of healing arts whenever certification is denied.

Regulate x-ray therapy machines generating 1 Mev or

greater.

Provide that a list of private inspectors be maintained and set the criteria for an individual to be placed on the list.

The following amendments incorporate changes suggested by the model regulations.

The major changes include:

Include International Standard Units: Becquerels, Grays and Seiverts.

Clarify provisions for veterinarians as holders of radioactive material licenses.

Exempt Americium-241 in quantities less than .05 microcures, commonly found in smoke detectors.

Clarify use of radioactive materials for certain *in vitro* clinical or laboratory testing by general licensees.

Redefine composition of radiation safety committee for certain specific licenses for radioactive materials to include nursing staff and institution's management.

Define periodic internal inspection and retention of records for sealed sources used in Industrial Radiography.

Define exempt quantity of Ra-226 used in gas and aerosol detectors.

Require a licensee to notify commissioner when activity authorized by specific license is permanently discounted.

Add radiopharmaceuticals to the list of the various groups of medical uses of radioactive materials.

Eliminate prior approval of the commissioner for open field irradiators when access control devices are impractical.

Specify disposal of specific wastes.

Require testing the alarm system of industrial radiography installations at the beginning of each period of use.

Require the licensee or registrant of industrial radiography installations to conduct an internal audit program of its activities authorized by its license.

Require a physical radiation survey after each exposure in industrial radiography to confirm that the machine is "off."

Require that all certified x-ray machine components operate according to manufacturers specifications.

Require that the fluoroscopy maximum entrance exposure rate be tested at Kvp and milliamperage that will yield maximum entrance exposure rate possible for unit instead of typical clinical Kvp.

Require a private inspector to be physically present at the facility during the x-ray inspection.

Provide that x-ray controls on podiatric and dental equipment which have a stretch cord be capable of allowing the operator to stand in a protected position and require dosimetry for the operator. This also includes open bay patient areas in dental facilities.

Require the PBL to operate properly on x-ray machines so equipped.

Redefine timer and exposure reproducibility.

Set exposure limits for specific medical and dental projections.

Define the parameters to be tested in spot check measurements for teletherapy machines.

Define the parameters to be tested for inspections of CT scanners.

The following regulations governing radioactive waste and transportation will be transferred to another agency:

Intrastate Transportation of Radioactive Materials.

Annex T "Virginia Hazardous Radioactive Materials Transportation Act."

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Title of Regulation: VR 355-39-01. Regulations Governing Eligibility Standards and Charges for Medical Care Services (Schedule of Charges Only).

Statutory Authority: § 32.1-12 of the Code of Virginia.

Effective Date: July 6, 1988

REGISTRAR'S NOTICE: This regulation is excluded from Article 2 of the Administrative Process Act in accordance with § 9-6.14:4.1 C 1 of the Code of Virginia, which excludes from Article 2 agency orders or regulations fixing rates or prices. The Department of Health will receive, consider and respond to petitions by any interested person at any time with respect to reconsideration or revision.

Summary:

The purpose of revision #9 to the regulations is to allow the Board of Health to set a Northern Virginia Schedule of Charges to reflect the higher costs of providing medical care, based on the personnel salary differential of 13.5% paid to employees.

When the Eligibility Regulations were promulgated and implemented in 1980, only one schedule of charges for services was implemented statewide. Therefore, Northern Virginia patients are paying for medical care at the same rate as patients in the rest of the state. No consideration was given for developing a Northern Virginia schedule of charges for services to reflect the higher personnel costs incurred in providing medical services.

Final Regulations

PROPOSED NORTHERN VIRGINIA SCHEDULE OF SERVICE CHARGES

MEDICAL CARE SERVICES	MAXIMUM	MAXIMUM	INCOME	INCOME	INCOME	INCOME	INCOME	INCOME
	CHARGES	CHARGES	LEVEL	LEVEL	LEVEL	LEVEL	LEVEL	LEVEL
PER VISIT (STATE)	PER VISIT (NORTHERN)	A (0%)	B (10%)	C (25%)	D (50%)	E (75%)	F (100%)	
MATERNITY/GYNECOLOGY	\$20.00	\$22.75	\$.00	\$2.25	\$5.75	\$11.25	\$17.00	\$22.75
PEDIATRIC/WELL BABY	\$37.00	\$42.00	\$.00	\$4.20	\$10.50	\$21.00	\$31.50	\$42.00
FOLLOW-UP/PROBLEM VISIT	\$16.00	\$18.25	\$.00	\$1.75	\$4.50	\$9.25	\$13.75	\$18.25
FAMILY PLANNING								
INITIAL/ANNUAL VISIT	\$43.00	\$48.75	\$.00	\$4.75	\$12.25	\$24.50	\$36.50	\$48.75
FOLLOW UP/PROBLEM VISIT	\$20.00	\$22.75	\$.00	\$2.25	\$5.75	\$11.25	\$17.00	\$22.75
GENERAL MEDICAL								
INITIAL VISIT	\$37.00	\$42.00	\$.00	\$4.25	\$10.50	\$21.00	\$31.50	\$42.00
FOLLOW UP/PROBLEM VISIT	\$20.00	\$22.75	\$.00	\$2.25	\$5.75	\$11.25	\$17.00	\$22.75
BRIEF SERVICE	\$8.50	\$9.75	\$.00	\$1.00	\$2.50	\$4.75	\$7.25	\$9.75
DENTAL	*							
SPECIAL SERVICES								
WITHOUT ELIGIBILITY								
VENIPUNCTURE	\$7.00	\$8.00	\$.00	\$.75	\$2.00	\$4.00	\$6.00	\$8.00
PREGNANCY TESTING	FREE							
ADMIN OF PRESC MED/NON-ROUTINE IMM (PLUS COST OF VACCINE)	\$3.50	\$4.00	\$.00	\$.50	\$1.00	\$2.00	\$3.00	\$4.00
BLOOD PRESSURE CHECK	FREE							
PPD/TUBERCULIN TESTING	\$3.15	\$3.50	\$.00	\$.25	\$1.00	\$1.75	\$2.75	\$3.50
RADIOLOGICAL EXAM (CHEST)	\$18.00	\$20.50	\$.00	\$2.00	\$5.00	\$10.25	\$15.25	\$20.50
ACTIVITIES OF DAILY LIVING (PER HR)	\$8.00	\$10.00	\$.00	\$1.00	\$2.50	\$5.00	\$7.50	\$10.00
ELIGIBILITY REQUIRED								
PHARMACY PROFESSIONAL CHARGES (PLUS COST OF DRUGS OR VACCINE)	\$3.50	\$4.00	\$.00	\$.50	\$1.00	\$2.00	\$3.00	\$4.00
OTHER X-RAY SERVICES	*							
OTHER LAB SERVICES	*							
COLPOSCOPY SERVICES								
COLPO WITH BIOPSY	\$86.00	\$97.50	\$.00	\$9.75	\$24.50	\$48.75	\$73.25	\$97.50
COLPO WITH BIOPSY AND CRYOSURGERY	\$105.00	\$119.25	\$.00	\$12.00	\$29.75	\$59.50	\$89.50	\$119.25
OTHER SERVICES								
CHILD SPECIALITY SERVICES (ANNUAL)	\$60.00	\$68.00	\$.00	\$6.75	\$17.00	\$34.00	\$51.00	\$68.00
CHILD DEVELOPMENT CLINICS								
INITIAL EVALUATION	\$249.00	\$282.50	\$.00	\$28.25	\$70.75	\$141.25	\$212.00	\$282.50
FOLLOW UP VISIT								
PEDIATRIC	\$9.00	\$10.25	\$.00	\$1.00	\$2.50	\$5.00	\$7.75	\$10.25
PSYCHOLOGIST	\$6.00	\$6.75	\$.00	\$.75	\$1.75	\$3.50	\$5.00	\$6.75
SOCIAL WORK	\$6.00	\$6.75	\$.00	\$.75	\$1.75	\$3.50	\$5.00	\$6.75
NURSING	\$6.00	\$6.75	\$.00	\$.75	\$1.75	\$3.50	\$5.00	\$6.75

* REIMBURSED AT THE MEDICAID RATE

Summary:

The purpose of revision #10 to the regulations is to allow the Board of Health to establish a uniform flat rate of \$5.00 for Cholesterol screening and counseling.

Health Departments are now providing cholesterol screenings and counseling services as a part of their cardiovascular risk reduction and chronic disease activities.

Whole blood dry chemistry analyzers are used to perform these tests. The supplies used with the analyzers and personnel costs are estimated at about \$5.00 per patient. This is the amount most health departments are charging for this service.

Charges and Payments Requirements by Income Levels

CHS OPTS MANUAL Section IV	MEDICAL CARE SERVICES	MAXIMUM CHARGES PER VISIT	A 0%	B 10%	C 25%	D 50%	E 75%	F 100%
	G. Special Services (7)							
	1. Without Eligibility Determination							
	a. Venipuncture (for tests except Communicable Disease Investigations)	\$ 7.00	0		FLAT RATE STATEWIDE (8)			
	b. Pregnancy Testing	FREE	0		STATEWIDE			
	c. Administration of Prescribed Medication and/or Non-Routine Immunizations PLUS: Cost of Vaccine when furnished by Health Department	\$ 3.50	0		FLAT RATE STATEWIDE			
	d. Blood Pressure Check	FREE	0		STATEWIDE			
	e. PPD/Tuberculin Testing	\$ 3.15	0		FLAT RATE STATEWIDE			
	f. Radiological Examination of Chest	\$18.00	0		FLAT RATE STATEWIDE			
	g. Activities of Daily Living (ADL) Services	\$ 8.00 Per Hour(9)	0		FLAT RATE STATEWIDE			
	h. Cholesterol Screening * and Counseling	\$ 5.00	0		FLAT RATE STATEWIDE			

* New Service

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Final Regulations

Summary:

The purpose of revision #11 to the regulations is to allow the Board of Health to bill the Medical Assistance Services Program for Hemophilus Influenzae Type B (HIB) vaccine at the current cost of the vaccine.

The Health Department's current schedule of charges for Hemophilus Influenza Type B vaccine lists a reimbursement rate of \$9.95. However, a new HIB vaccine has become available and this will cost more than the previous vaccine listed at \$9.95. The Medical Assistance Services Program has informed the Health Department that reimbursement for the HIB vaccine is based on the current pricing information which Medicaid receives monthly from the pricing source used by Medicaid for drugs and vaccines.

DESCRIPTION OF SERVICES	(CPT) PROCEDURES	MAX CHARGE	REMARKS
Dental			
Refer to the Medicaid Dental Procedures Listing.			Separate
provider numbers and billing instructions are			issued to
health departments operating dental clinics.			
Administration of Prescribed Medication	90030	\$ 3.15	Plus cost of vaccine when furnished by health department
Non-Routine Immunizations	90749	\$ 3.15	
PPD/Tuberculin	86580	\$ 3.15	
Rabies Vaccine	90726	Reimbursed actual cost of vaccine given.	
Hepatitis B Vaccine	90731	Reimbursed actual cost of vaccine given.	
Hemophilus Influenza Type B	90737	[\$ 9.95]	Reimbursed actual cost of vaccine given.
Radiological Exam of Chest			
Chest, single view	71010	\$ 10.50	
Two views-PA and Lateral	71020	\$ 15.75	
Apical Lordotic	71021	\$ 12.60	
Oblique	71022	\$ 12.60	
Children's Specialty Services			
Physical Therapy Initial/Comprehensive	97200	\$ 15.25	
	90020	\$ 37.00	
		(\$36.75)**	
Follow Up	90060	\$ 10.50	
Other X-ray and Laboratory Services			
Use Medicaid allowed reimbursement rates and procedure codes found in current CPT book.			

** Maximum allowed reimbursement.

MARINE RESOURCES COMMISSION

NOTE: The Marine Resources Commission is exempted from the Administrative Process Act (§ 9-6.14:4 of the Code of Virginia); however, it is required by § 9-6.14:22 B to publish all final regulations.

Title of Regulation: VR 450-01-0048. Pertaining to Grey Trout (Weakfish).

Statutory Authority: § 28.1-23 of the Code of Virginia.

Effective Date: May 16, 1988

Preamble:

This regulation establishes a minimum size limit on grey trout taken by hook-and-line. It also establishes a maximum quantity of which bait or scrap fish may consist of grey trout.

VR 450-01-0048. Pertaining to Grey Trout (Weakfish).

§ 1. Authority, prior regulations, effective date.

A. This regulation is promulgated pursuant to the authority contained in § 28.1-23 of the Code of Virginia.

B. No prior regulations pertain to grey trout.

C. The effective date of this regulation is May 16, 1988.

§ 2. Purpose.

The purpose of this regulation is to conserve grey trout in Virginia waters by reducing the harvest of small grey trout.

§ 3. Minimum size limit.

A. It shall be unlawful for any person to take by hook-and-line and possess any grey trout less than 10 inches in total length.

B. Length is measured in a straight line from the tip of nose to tip of tail.

§ 4. Possession of bait and scrap fish.

A. It shall be unlawful for any person to possess any quantity of bait fish or scrap fish consisting of more than 10% grey trout by weight.

B. Bait fish is an aggregate of fish not to be used for human consumption, consisting of one or more species, to be used to lure fishes or crustaceans to catching devices such as crab pots, eel or fish pots, trout lines, or hook-and-line.

C. Scrap fish is an aggregate of fish not be used for human consumption, consisting of one or more species, to

be used for manufacture into fish meal, oil, fertilizer, poultry feed, or pet food or other similar uses.

D. Whenever any person has possession of more than 100 pounds of bait fish or scrap fish, the possession of which might be unlawful due to the percentage of grey trout contained therein, a lot of at least 100 pounds may be separated from the whole quantity thereof for purposes of determining whether more than 10%, by weight, are grey trout. If more than 10%, by weight, are grey trout, then the person shall be presumed guilty of having violated this regulation.

§ 5. Penalty.

As set forth in § 28.1-23 of the Code of Virginia, any person, firm, or corporation violating any provision of this regulation shall be guilty of a Class 1 misdemeanor.

/s/ William A. Pruitt
Commissioner

Date: May 3, 1988

* * * * *

Title of Regulation: VR 450-01-0049. Pertaining to the Culling of Crabs.

Statutory Authority: § 28.1-23 of the Code of Virginia.

Effective Date: May 16, 1988

Preamble:

Section 28.1-167 of the Code of Virginia specifies the size and possession limits for blue crabs in Virginia (minimum size of five inches for all male and immature female hard crabs; and a possession limit of no more than 10 undersize crabs per bushel or 35 undersize crabs per barrel). This regulation supplements these restrictions by describing the procedures that must be followed to cull harvested crabs to the legal limits.

VR 450-01-0049. Pertaining to the Culling of Crabs.

§ 1. Authority, prior regulations, effective date.

A. This regulation is promulgated pursuant to the authority contained in § 28.1-23 of the Code of Virginia.

B. Other restrictions on crabbing can be found in Title 28.1, Chapter 6 of the Code of Virginia and in VR 450-01-0007, VR 450-01-0012, VR 450-01-0036, and VR 450-01-0041.

C. The effective date of this regulation is May 16, 1988.

§ 2. Culling requirements.

A. All crabs taken from the tidal waters of Virginia

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shall be culled to the legal size and possession limits by the catcher during the harvesting process.

B. The catcher shall use at least one, but not more than three culling containers (other than bushel baskets and barrels normally used for crabs) for the purpose of culling crabs during the harvesting process. No crabs shall be placed loose in any boat. The provisions of this paragraph shall not apply to the harvesting of crabs from a licensed crab trap (crab pound).

C. During culling, all undersize crabs shall be immediately returned to the water as required by § 28.1-167 of the Code of Virginia. Crabs of legal size shall be placed in crab barrels or bushel baskets, and shall be subject to inspection by a VMRC Marine Patrol Officer. Upon arrival at the dock or landing point all crabs shall be culled as specified and shall be contained in regular crab bushel baskets or barrels that are ready for market.

§ 3. Penalty.

As set forth in § 28.1-23 of the Code of Virginia, any person, firm, or corporation violating any provision of this regulation shall be guilty of a Class 1 misdemeanor.

/s/ William A. Pruitt
Commissioner
Date: May 3, 1988

Title of Regulation: VR 450-01-8806. Closure of All Public Oyster Grounds in the James River.

Statutory Authority: §§ 28.1-82 and 28.1-85 of the Code of Virginia.

Effective Date: June 1, 1988 to October 1, 1988

Preamble:

The following order of the Marine Resources Commission closes all public oyster grounds in the James River to the taking of oysters.

VR 450-01-8806. Closure of All Public Oyster Grounds in the James River.

§ 1. Authority and effective date.

A. This order is promulgated pursuant to the authority contained in §§ 28.1-82 and 28.1-85 of the Code of Virginia.

B. The effective date of this order is June 1, 1988.

§ 2. Purpose.

The purpose of this order is to close all public oyster grounds in the James River to the taking of oysters in order to protect and promote the oyster resource in the

area.

§ 3. Closed area.

All public oyster grounds in the James River are hereby closed to the taking of oysters.

§ 4. Expiration date.

This order shall terminate October 1, 1988.

/s/ William A. Pruitt
Commissioner
Date: May 9, 1988

Title of Regulation: VR 450-01-8807. Expansion of the Jail Island Clean Cull Area.

Statutory Authority: § 28.1-85 of the Code of Virginia.

Effective Date: October 1, 1988

Preamble:

The following order of the Marine Resources Commission amends Order 82-8, thereby, expanding the Jail Island Clean Cull area upriver an additional 611.79 acres, increasing the area to a total of 1,010.61 acres.

VR 450-01-8807. Expansion of the Jail Island Clean Cull Area.

§ 1. Authority, prior regulations, and effective date.

A. This order is promulgated pursuant to the authority contained in § 28.1-85 of the Code of Virginia.

B. Order 82-8 which was promulgated August 24, 1982, and made effective on October 1, 1982, establishes a 398.82 acre area described as Jail Island Clean Cull Area. The harvesting of oysters less than three inches from this area is unlawful.

Order VR 450-01-8801, which was promulgated on February 2, 1988, and made effective on February 8, 1988, amends Order 82-8, thereby reducing the minimum size limit for oysters taken from the Jail Island Clean Cull Area to 2-1/2 inches.

C. The effective date of this order is October 1, 1988.

§ 2. Purpose.

The purpose of this order is to amend Order 82-8 thereby expanding the size of the Jail Island Clean Cull Area in the James River.

§ 3. Expanded area description.

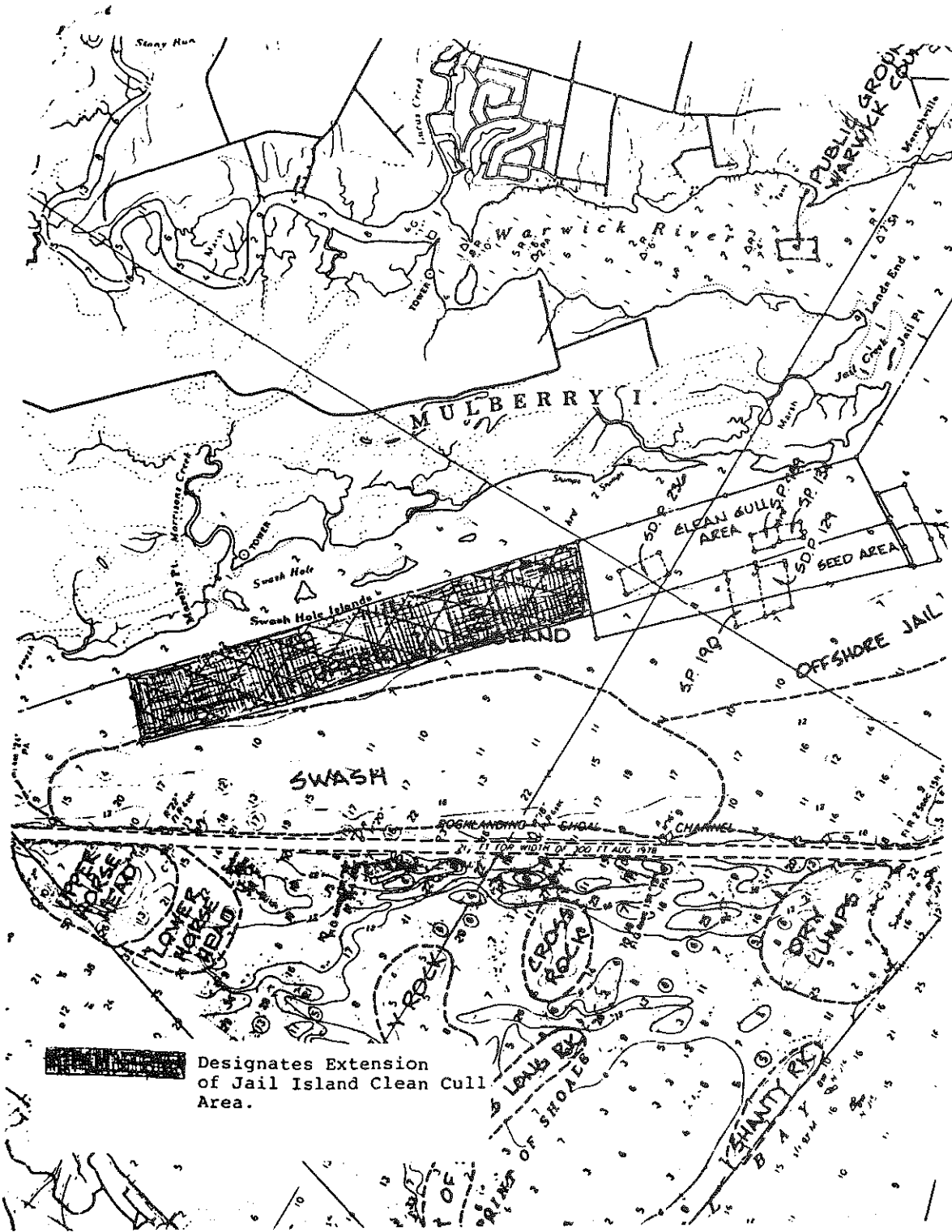
The upriver extension of the Jail Island Clean Cull Area (611.79 acres) is described as follows:

Beginning at a point approximately 2,000 feet Southwest of the shore of Mulberry Island, being the same point as the North East Corner of Clean Cull area set aside by Commission Order Number 82-8, October 1, 1982, said point being Corner A as located by Virginia State Plane Coordinates, South Zone, NAD 1927, North 281,468.20, East 2,558,879.7; thence North Azimuth 225°25'14", 2,004.82 feet to Corner 22, North 280,061.03, East, 2,557,451.72; said corner being the same as the North West corner of Clean Cull area set aside by Commission Order Number 82-8, October 1, 1982; then North Azimuth 311°26'22", 13,325.00 feet to Corner 3, North 288,879.88, East 2,547,462.55; thence North Azimuth 45°25'14", 2,004.82 feet to Corner 4, North 290,287.06, East 2,548,890.54; thence North Azimuth 131°26'22", 13,325.00 feet to Corner A, being the point of beginning. (See map)

§ 4. The Jail Island Clean Cull Area is hereby expanded to include that area described in § 3.

/s/ William A. Pruitt
Commissioner
Date: May 9, 1988

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* * * * *

Title of Regulation: VR 450-01-8808. Establishment of State Repletion Seed Areas in the James River.

Statutory Authority: § 28.1-85 of the Code of Virginia.

Effective Date: June 1, 1988

Preamble:

The following order establishes two State Oyster Repletion Program Seed Areas in the James River.

VR 450-01-8808. Establishment of State Repletion Seed Areas in the James River.

§ 1. Authority and effective date.

A. This order is promulgated pursuant to the authority contained in § 28.1-85 of the Code of Virginia.

B. The effective date of this order is June 1, 1988.

§ 2. Purpose.

The purpose of this order is to establish two oyster seed beds in the James River for use by the State Oyster Repletion Program. Oyster seed from these areas will be transplanted to grow out areas as part of the state oyster repletion program.

§ 3. Seed area descriptions. (See maps)

A. Lower End of Jail Island. (15.6 acres)

Beginning at a point, Southwest of Jail Point, and approximately 1,080 feet Southeast of Public Ground No. 1 seed area Corner 8, said point being Corner 3 as located by Virginia State Plane Coordinates, South Zone, NAD 1927, North 272,114.98, East 2,564,203.17; thence North Azimuth 32°34'11" Grid, 635.45 feet to Corner 6, North 272,650.50, East 2,564,545.25; thence North Azimuth 32°22'25", 430.48 feet to Corner 15, North 273,014.08, East 2,564,775.75; thence North Azimuth 137°43'37", 660.93 feet to Corner 16, North 272,525.02, East 2,565,220.33; thence North Azimuth 211°30', 366.53 feet to Corner 5, North 272,212.50, East 2,565,028.82; thence North Azimuth 211°30', 675.65 feet to Corner 4, North 271,636.42, East 2,564,675.79; thence North Azimuth 315°21'28", 672.60 feet to Corner 3, being the point of beginning.

B. Deep Water Shoal Area. (574.66 acres)

Beginning at a point approximately 530 feet West of Deep Water Shoal Light, said point being Corner 1 as located by Virginia State Plane Coordinates, South Zone, NAD 1927, North 302,280.00, East 2,542,360.00; thence North Azimuth 30°49'59", 4,506.99 feet to Corner 2, North 306,150.00, East 2,544,670.00; thence

North Azimuth 135°08'57", 5,430.60 feet to Corner 3, North 302,300.00, East 2,548,500.00; thence North Azimuth 212°13'54", 3,487.42 feet to Corner 4, North 299,350.00, East 2,546,640.00; thence North Azimuth 269°10'16", 2,765.29 feet to Corner 5, North 299,310.00, East 2,543,875.00; thence North Azimuth 332°58'26", 3,334.09 feet to Corner 1, being the point of beginning.

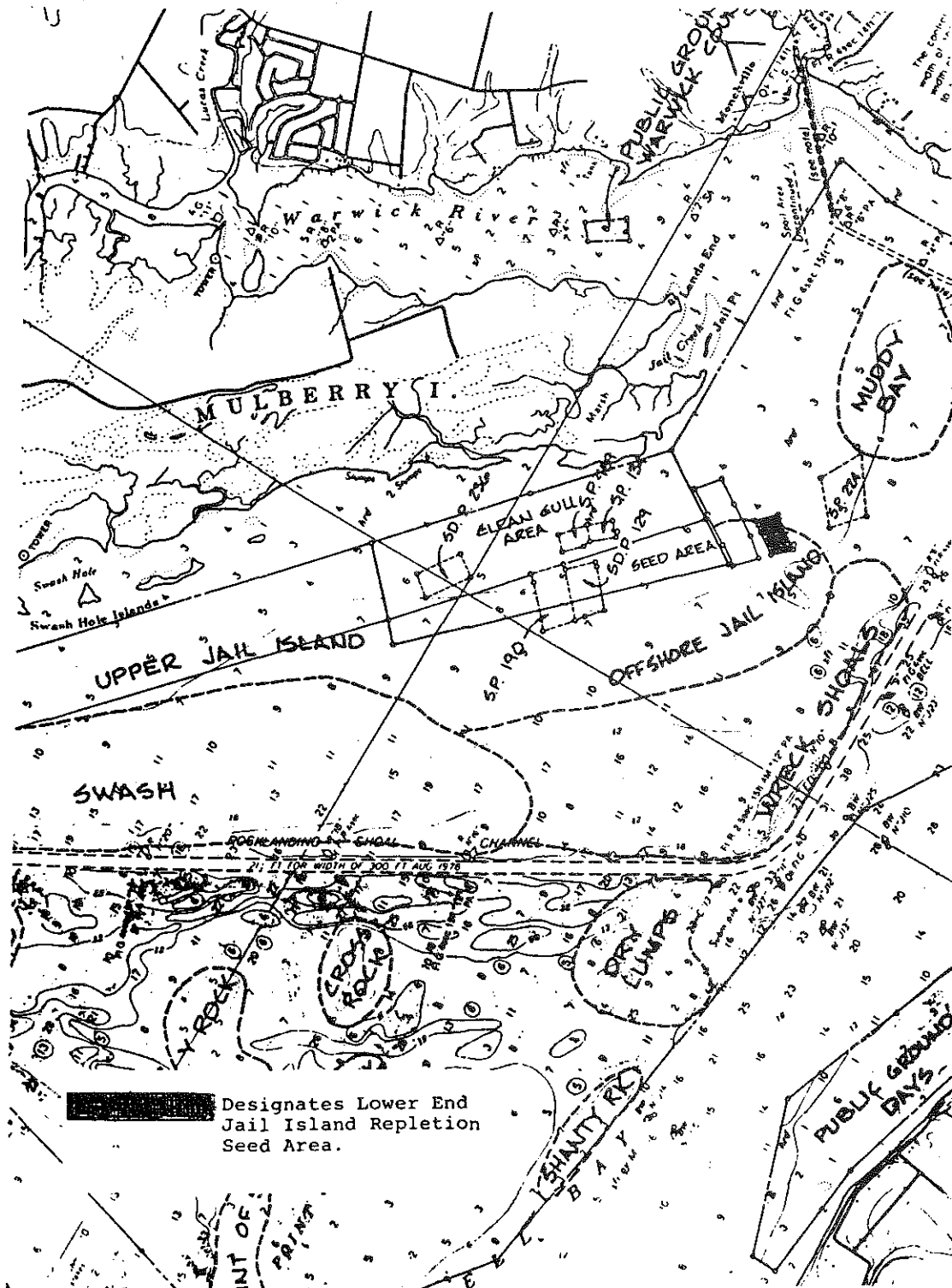
§ 4. Seed beds established; harvesting prohibited.

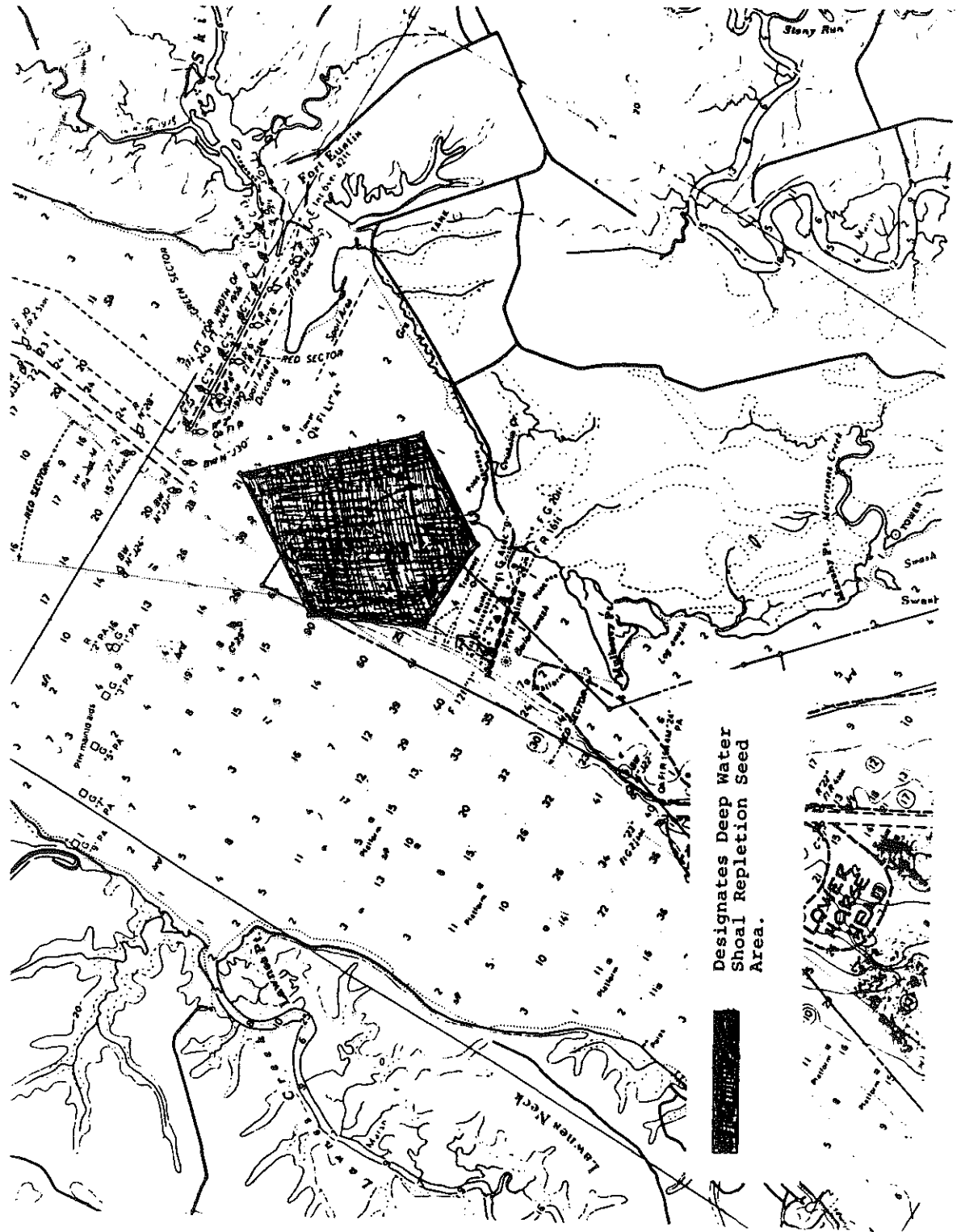
A. State oyster seed beds, as described in subsections A and B of § 3, are hereby established.

B. Harvesting of oysters of any size from these areas is prohibited, except as authorized under the state oyster repletion program.

/s/ William A. Pruitt
Commissioner
Date: May 9, 1988

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DEPARTMENT OF MEDICAL ASSISTANCE SERVICES (BOARD OF)

Citation: 1903 (1)(1) of the Act, P.L. 99-272 (§ 9507).

Title of Regulation: Standards for Coverage of Organ Transplant Services: State Plan for Medical Assistance.

VR 460-03-3.1110.

Inpatient Hospital Services (1.)

Statutory Authority: § 32.1-325 of the Code of Virginia.

Effective Date: July 6, 1988

Summary:

The Board of Medical Assistance Services adopted the final regulations for organ transplantation on May 10, 1988. The final regulations provide for the coverage of corneas and kidneys for patients who meet the patient selection criteria and coverage of transplants of livers for patients with extra hepatic biliary atresia who are less than 18 years of age and who meet the other patient selection criteria.

Standards for Coverage of Organ Transplant Services: State Plan for Medical Assistance.

VR 460-01-0027.0000.

§ 3.1. (f) (1) Optometric services.

A. Optometric services (other than those provided under §§ 435.531 are not now but were previously provided under the plan. Services of the type an optometrist is legally authorized to perform are specifically included in the term "physicians' services" under this plan and are reimbursed whether furnished by a physician or an optometrist.

Yes.

No. The conditions described in the first sentence apply but the term "physicians' services" does not specifically include services of the type an optometrist is legally authorized to perform.

Not applicable. The conditions in the first sentence do not apply.

Citation: 42 CFR 441.30; AT-78-90.

§ 3.1. (f)(2) Organ transplant procedures.

A. Organ transplant procedures are provided.

No.

Yes. *Similarly situated individuals are treated alike and restriction on the facilities that may, or practitioners who may, provide those procedures is consistent with the accessibility of high quality care to individuals eligible for the procedures under this plan. Standards for the coverage of organ transplant procedures are described at ATTACHMENT 3.1 E.*

6. Coverage of inpatient hospitalization will be limited to a total of 21 days for all admissions within a fixed period, which would begin with the first day inpatient hospital services are furnished to an eligible recipient and end 60 days from the day of the first admission. There may be multiple admissions during this 60-day period; however, when total days exceed 21, all subsequent claims will be reviewed. Claims which exceed 21 days within 60 days with a different diagnosis and medical justification will be paid. Any claim which has the same or similar diagnosis will be denied.

EXCEPTION: SPECIAL PROVISIONS FOR ELIGIBLE INDIVIDUALS UNDER 21 YEARS OF AGE: Consistent with 42 CFR 441.57, payment of medical assistance services shall be made on behalf of individuals under 21 years of age, who are Medicaid eligible, for medically necessary stays in acute care facilities in excess of 21 days per admission when such services are rendered for the purpose of diagnosis and treatment of health conditions identified through a physical examination.

7. Reimbursement will not be provided for inpatient hospitalization for any selected elective surgical procedures that require a second surgical opinion unless a properly executed second surgical opinion form has been obtained from the physician and submitted with the hospital invoice for payment, or is a justified emergency or exemption. The requirements for second surgical opinion do not apply to recipients in the retroactive eligibility period.

8. Reimbursement will not be provided for inpatient hospitalization for those surgical and diagnostic procedures listed on the mandatory outpatient surgery list unless the inpatient stay is medically justified or meets one of the exceptions. The requirements for mandatory outpatient surgery do not apply to recipients in the retroactive eligibility period.

9. *For the purposes of organ transplantation, all similarly situated individuals will be treated alike. Coverage of transplant services for all eligible persons is limited to transplants for kidneys and cornea and liver transplants for those recipients under age 18, for extra hepatic biliary atresia. These services, excluding corneas, require preauthorization and the patient must be considered acceptable for coverage. The treating facility and transplant staff must be recognized as being capable of providing high quality care in the performance of the requested transplant. Reimbursement for covered transplant services is negotiable with the providers on an individual case*

basis. Standards for preauthorization and coverage of organ transplant services are in Attachment 3.1 E.

VR 460-03-3.1111.

8. Psychological testing and psychotherapy by clinical psychologists licensed by the State Board of Medicine are covered.

9. Reimbursement will not be provided for physician services for those selected elective surgical procedures requiring a second surgical opinion unless a properly executed second surgical opinion form has been submitted with the invoice for payment, or is a justified emergency or exemption. The requirements of second surgical opinion do not apply to recipients in the retroactive eligibility period.

10. Reimbursement will not be provided for physician services performed in the inpatient setting for those surgical or diagnostic procedures listed on the mandatory outpatient surgery list unless medically justified or meets one of the exceptions. The requirements of mandatory outpatient surgery do not apply to recipients in the retroactive eligibility period.

11. For the purposes of organ transplantation, all similarly situated individuals will be treated alike. Coverage of transplant services for all eligible persons is limited to transplants for kidneys and cornea and liver transplants for those recipients under age 18, for extra hepatic biliary atresia. These services, excluding corneas, require preauthorization and the patient must be considered acceptable for coverage. The treating facility and transplant staff must be recognized as being capable of providing high quality care in the performance of the requested transplant. Reimbursement for covered transplant services is negotiable with the providers on an individual case basis. Standards for preauthorization and coverage of organ transplant services are in Attachment 3.1 E.

Podiatrists' Services (6.a)

Covered services are defined as reasonable and necessary diagnostic, medical, surgical treatment of disease, injury, or defects of the human foot. These services must be within the scope of the license of the podiatrists' profession and defined by state law.

The following services are not covered: preventive health care, including routine foot care; treatment of structural misalignment not requiring surgery; cutting or removal of corns, warts, or calluses; experimental procedures; acupuncture.

The state agency may place appropriate limits on a service based on medical necessity or for utilization control.

Nurse midwife services (17)

Covered services for the nurse midwife are defined as those services allowed under the licensure requirements of the state statute and as specified in the Code of Federal Regulations, i.e., maternity cycle.

VR 460-03-3.1501.

STANDARDS FOR THE COVERAGE OF ORGAN TRANSPLANT SERVICES.

The following criteria will be used to evaluate specific organ transplant requests.

§ 1.1. Patient selection criteria for liver transplantation (LT).

A. Transplantation of the liver is a surgical treatment whereby a diseased liver is replaced by a healthy organ. Preauthorization is required. The following patient selection criteria shall apply for the consideration of all approvals for coverage and reimbursement for liver transplantation:

1. The patient is under 18 years of age, and has a diagnosis of extrahepatic biliary atresia;
2. Current medical therapy has failed and will not prevent progressive disability and death;
3. The patient does not have other systemic disease, including but not limited to, severe cardio/peripheral/cerebrovascular disease, active systemic infection, renal dysfunction, severe pulmonary hypertension;
4. Adequate supervision will be provided to assure there will be strict adherence by the patient to the long-term medical regimen which is required;
5. The LT is likely to prolong life for at least two years, and to restore a range of physical and social function suited to activities of daily living;
6. The patient is not in both an irreversible terminal state and on a life support system;
7. A facility with appropriate expertise has evaluated the patient, and has indicated willingness to undertake the procedure.
8. The patient does not have multiple uncorrectable severe major system congenital anomalies;
9. Failure to meet (1) through (8) above shall result in denial of preauthorization and coverage for the requested liver transplant procedures.

§ 1.2. Facility selection criteria for liver transplantation (LT).

- A. For a medical facility to qualify as an approved

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Virginia Medicaid provider for performing liver transplants, the following conditions must be met:

1. The facility has available expertise in gastroenterology, immunology, infectious disease, pediatrics, pathology, pharmacology, and anesthesiology;
2. The LT program staff has extensive experience and expertise in the medical and surgical treatment of hepatic disease;
3. Transplant surgeons on the staff have been trained in the LT technique at an institution with a well established LT program;
4. The transplantation program has adequate services to provide specialized psychosocial and social support for patients and families;
5. Adequate blood bank support services are present and available;
6. Satisfactory arrangements exist for donor procurement services;
7. The institution is committed to a program of at least 12 LTs a year;
8. The center has a consistent, equitable, and practical protocol for selection of patients. (At a minimum, the DMAS patient selection criteria must be met.) A copy of the protocol must be provided to DMAS prior to preauthorization;
9. The center has the capacity and commitment to conduct a systematic evaluation of outcome and cost;
10. In addition to hospital administration and medical staff endorsement, hospital staff support also exists for such a program;
11. The hospital has an active, ongoing renal dialysis service;
12. The hospital has access to staff with extensive skills in tissue typing, immunological and immunosuppressive techniques;
13. Initial approval as a LT center requires performance of at least 12 LTs within the most recent 12 months, with a one-year survival rate of at least 50%. Centers that fail to meet this requirement during the first year will be given a one year conditional approval. Failure to meet the volume requirement following the conditional approval year will result in loss of approval.

§ 2.1. Patient selection criteria for provision of kidney transplantation (KT).

A. Transplantation of the kidney is a surgical treatment whereby a diseased kidney is replaced by a healthy organ. Preauthorization is required. The following patient selection criteria shall apply for the consideration of all approvals for coverage and reimbursement for kidney transplantation.

1. Current medical therapy has failed and patient has failed to respond to appropriate conservative management;
2. The patient does not have other systemic disease including but not limited to the following:
 - a. Reversible renal conditions;
 - b. Major extra-renal complications (malignancy, systemic disease, cerebral cardio-arterial disease);
 - c. Active infection;
 - d. Severe malnutrition, or;
 - e. Pancytopenia.
3. The patient is not in both an irreversible terminal state and on a life support system;
4. Adequate supervision will be provided to assure there will be strict adherence to the medical regimen which is required;
5. The KT is likely to prolong life and restore a range of physical and social function suited to activities of daily living;
6. A facility with appropriate expertise has evaluated the patient, and has indicated willingness to undertake the procedure.
7. The patient does not have multiple uncorrectable severe major system congenital anomalies;
8. Failure to meet (1) through (7) above shall result in denial of preauthorization and coverage for the requested kidney transplant procedures.

§ 2.2. Facility selection criteria for kidney transplantation (KT).

A. For a medical facility to qualify as an approved Virginia Medicaid provider for performing kidney transplants, the following conditions must be met:

1. The facility has available expertise in immunology, infectious disease, pathology, pharmacology, and anesthesiology;
2. The KT program staff has extensive experience and expertise in the medical and surgical treatment of renal disease;

3. Transplant surgeons on the staff have been trained in the KT technique at an institution with a well established KT program;

4. The transplantation program has adequate services to provide specialized psychosocial and social support for patients and families;

5. Adequate blood bank support services are present and available;

6. Satisfactory arrangements exist for donor procurement services;

7. The institution is committed to a program of at least 25 KTs a year;

8. The center has a consistent, equitable, and practical protocol for selection of patients (at a minimum, the DMAS patient selection criteria must be met and adhered to);

9. The center has the capacity and commitment to conduct a systematic evaluation of outcome and cost;

10. In addition to hospital administration and medical staff endorsement, hospital staff support also exists for such a program;

11. The hospital has an active, ongoing renal dialysis service;

12. The hospital has access to staff with extensive skills in tissue typing, immunological and immunosuppressive techniques;

13. Initial approval as a KT center requires performance of 25 KTs within the most recent 12 months, with a one year survival rate of at least 90%. Centers that fail to meet this requirement during the first year will be given a one-year conditional approval. Failure to meet the volume requirement following the conditional approval will result in loss of approval.

§ 3.1. Patient selection criteria for provision of corneal transplantation (CT).

A. Transplantation of the cornea is a surgical treatment whereby a diseased cornea is replaced by a healthy organ. While preauthorization is not required, the following patient selection criteria shall apply for the consideration of all approvals for reimbursement for cornea transplantation.

1. Current medical therapy has failed and will not prevent progressive disability;

2. The patient is suffering from one of the following conditions:

a. Post-cataract surgical decompensation,

b. Corneal dystrophy,

c. Post-traumatic scarring,

d. Keratoconus, or,

e. Aphakia Bullous Keratopathy;

3. Adequate supervision will be provided to assure there will be strict adherence by the patient to the long term medical regimen which is required;

4. The CT is likely to restore a range of physical and social function suited to activities of daily living;

5. The patient is not in both an irreversible terminal state and on a life support system;

6. The patient does not have untreatable cancer, bacterial, fungal, or viral infection;

7. The patient does not have the following eye conditions:

a. Trichiasis,

b. Abnormal lid brush and/or function,

c. Tear film deficiency,

d. Raised transocular pressure,

e. Intensive inflammation, and

f. Extensive neo-vascularization.

§ 3.2. Facility selection criteria for cornea transplantation (CT).

A. For a medical facility to qualify as an approved Medicaid provider for performing corneal transplants, the following conditions must be met:

1. The facility has available expertise in immunology, infectious disease, pathology, pharmacology, and anesthesiology;

2. The CT program staff has extensive experience and expertise in the medical and surgical treatment of eye diseases;

3. Transplant physicians on the staff have been trained in the CT technique at an institution with a well established CT program;

4. The transplantation program has adequate services to provide social support for patients and families;

5. Satisfactory arrangements exist for donor

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procurement services;

6. The institution is committed to a program of eye surgery;

7. The center has a consistent, equitable, and practical protocol for selection of patients (at a minimum the DMAS patient selection criteria must be met and adhered to);

8. The center has the capacity and commitment to conduct a systematic evaluation of outcome and cost;

9. In addition to hospital administration and medical staff endorsement, hospital staff support also exists for such a program;

10. Initial approval as a CT center requires performance of corneal transplant surgery, with a one year graft survival rate of at least 75%. Centers that fail to meet this requirement during the first year will be given a one year conditional approval. Failure to meet this requirement following the conditional approval year will result in loss of approval.

* * * * *

Title of Regulation: State Plan for Medical Assistance: VR 460-02-2.2101. ADC Grant Diversion.

Statutory Authority: § 32.1-325 of the Code of Virginia.

Effective Date: July 6, 1988

REGISTRAR'S NOTICE: This regulation is excluded from Article 2 of the Administrative Process Act in accordance with § 9-6.14:4.1 C 4(c) of the Code of Virginia, which excludes from Article 2 regulations which are necessary to meet the requirements of federal law or regulations, provided such regulations do not differ materially from those required by federal law or regulation. The Department of Medical Assistance Services will receive, consider and respond to petitions by any interested person at any time with respect to reconsideration or revision.

Summary:

The Social Security Act § 414(g) enabled states to implement, initially through demonstration projects, subsidized employment programs known as Grant Diversion. This section of the Act also allowed states to maintain Medicaid eligibility for Grant Diversion participants.

In Virginia, the State Department of Social Services is charged with administering the Title IV program, which provides Aid to Families with Dependent Children (AFDC). This federal provision requires Medicaid eligibility for recipients who are deemed to be receiving AFDC (42 CFR 435.115(a)). The Board of Social Services will adopt that participants in its Grant

Diversion program will be deemed as ADC eligible and therefore retain their Medicaid eligibility.

The Department of Social Services is implementing a Grant Diversion program as means to encourage employment and decrease the ADC roll. Continued Medicaid coverage for participants in Grant Diversion is considered an incentive for these participants and is expected to increase the effectiveness of the Grant Diversion program.

The overall intention of Grant Diversion programs is to reduce the numbers of individuals on public assistance rolls. States are federally permitted to use savings from reduced Aid to Families With Dependent Children (ADC) grant levels to make jobs available for ADC recipients on a voluntary basis. Recipients are given an opportunity to take a job which could mean higher salaries than the ADC Grant amount. Employers who participate in Grant Diversion can be in the public sector, in private nonprofit settings, or in proprietary day care centers. As an incentive for these employers to participate in Grant Diversion, the grant amount that is normally paid to the ADC recipient is paid to the employer. This helps to offset the employers' costs while assisting an ADC recipient to become competitively employed.

Participants can be deemed to be ADC recipients while in Grant Diversion although they may not actually be receiving any residual ADC grant. Currently, employed ADC-related Medicaid recipients lose Medicaid coverage for their families after they have been employed four months if their earnings preclude an ADC payment. Without continued Medicaid coverage, few individuals are willing to participate in Grant Diversion because employer funded health insurance is not always immediately available.

VR 460-02-2.2101. ADC Grant Diversion.

GROUPS COVERED AND AGENCIES RESPONSIBLE FOR ELIGIBILITY DETERMINATION

The following groups are covered under this plan.

A. Mandatory Coverage - Categorically Needy

Agency Citation

IV A 435.110

Groups Covered

1. Recipients of AFDC

The approved State AFDC plan includes:

Families with unemployed parents.

- Pregnant women with no other eligible children.
- AFDC children age 18 who are full time students in a secondary school or in the equivalent level of vocational or technical training, and are expected to complete the program prior to age 19. The standards for AFDC payments are listed in Supplement 1 of ATTACHMENT 2.6-A.

* * * * *

Title of Regulation: State Plan for Medical Assistance. VR 460-02-2.2108. OBRA 1987 Protected Widows and Widowers.

Statutory Authority: § 32.1-325 of the Code of Virginia.

Effective Date: July 6, 1988

Agency Citation

IV A 435.115

Groups Covered

2. Deemed Recipients of AFDC

- a. Individuals denied a title IV-A cash payment solely because the amount would be less than \$10.
- b. Participants in a work supplementation program under title IV-A and any child or relative of such individual (or other individual living in the same household as such individuals) who would be eligible for AFDC if there were no work supplementation program.

REGISTRAR'S NOTICE: This regulation is excluded from Article 2 of the Administrative Process Act in accordance with § 9-6.14:4.1 C 4(c) of the Code of Virginia, which excludes from Article 2 regulations which are necessary to meet the requirements of federal law or regulations, provided such regulations do not differ materially from those required by federal law or regulation. The Department of Medical Assistance Services will receive, consider and respond to petitions by any interested person at any time with respect to reconsideration or revision.

Summary:

Public Law 100-203, known as the Omnibus Budget Reconciliation Act of 1987 (OBRA 1987), § 9116, provides for the preservation of categorical Medicaid eligibility for certain widows and widowers. These individuals, who would otherwise qualify for Supplemental Security Income (SSI) on the basis of disability or blindness, beginning at age 60 qualify for early social security aged widow's or widower's benefits and, therefore, lose SSI and Medicaid eligibility. This provision continues Medicaid eligibility until the individual becomes eligible for Medicare.

This action is necessary to amend the State Plan for Medical Assistance to conform with the provision of the Social Security Act as amended by Public Law 100-203.

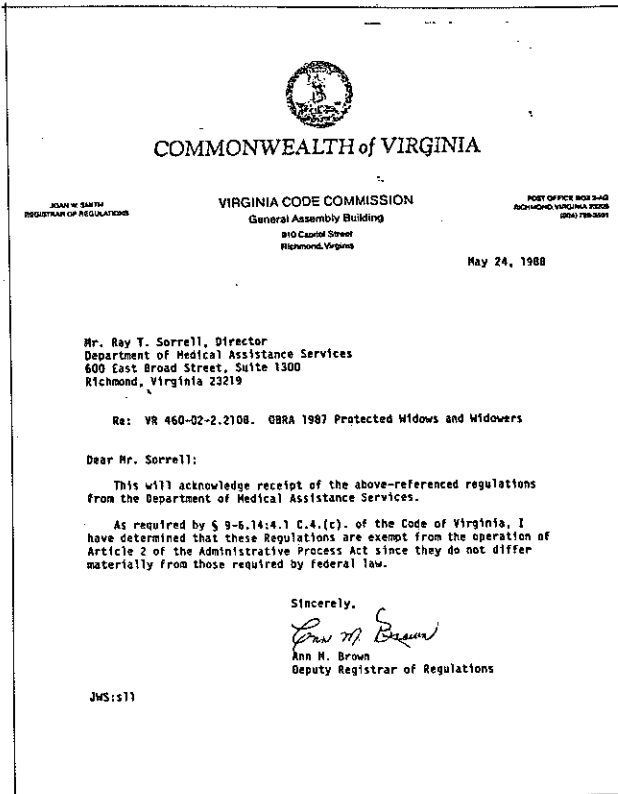
VR 460-02-2.2108. OBRA 1987 Protected Widows and Widowers.

Citations

P.L. 100-203 Section 9116

Groups Covered

- 18. If any person applies for and obtains benefits under subsection (e) or (f) of section 202 of the Social Security Act (or under any other subsection of section 202 if such person is also eligible for benefits under such subsection (e) or (f) as required by section 1611(e)(2)) being then at least 60 years of age but not entitled to hospital insurance benefits under part A of title XVIII, and is determined to be ineligible (by reason of the receipt of such benefits under section 202) for supplemental security income benefits under this title or for State supplementary payments of the type described in section 1616(a) of



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the Act, such person shall nevertheless be deemed to be a recipient of supplemental security income benefits under this title for purposes of title XIX, so long as that person would be eligible for such supplemental security income benefits, or such State supplementary payments, in the absence of such benefits under section 202, and is not entitled to hospital insurance benefits under part A of title XVIII.

* * * * *

Title of Regulation: VR 460-02-2.2114. State Plan for Medical Assistance Relating to Medicaid Eligibility for Subsidized Adoptions.

Statutory Authority: § 32.1-325 of the Code of Virginia.

Effective Date: July 6, 1988

REGISTRAR'S NOTICE: This regulation is excluded from Article 2 of the Administrative Process Act in accordance with § 9-6.14:4.1 C 4(a) of the Code of Virginia, which excludes from Article 2 regulations which are necessary to conform to changes in this Code where no agency discretion is involved. The Department of Medical Assistance Services will receive, consider and respond to petitions by any interested person at any time with respect to reconsideration or revision.

Summary:

House Bill 865, passed by the 1988 Session of the General Assembly, amended § 32.1-325 of the Code of Virginia to provide for payment of medical assistance on behalf of children younger than 21 who are in state/local subsidized adoptions.

VR 460-02-2.2114. State Plan for Medical Assistance Relating to Medicaid Eligibility for Subsidized Adoptions.

Agency Citations

IV-A 1902(a)(10)(A)(ii)(VII) of the Act P.L. 99-272 (Section 9529)

Groups Covered


8. A child for whom there is in effect a State adoption assistance agreement (other than under title IV-E of the Act), who, as determined by the State adoption agency, cannot be placed for adoption without medical assistance because the child has special needs for medical or rehabilitative care, and who before execution of the agreement...

(i) Was eligible for Medicaid under the State's approved Medicaid plan; or

(ii) Would have been eligible for Medicaid if the standards and methodologies of the title IV-E foster care program were applied rather than the AFDC standards and methodologies.

The State covers individuals under the age of...

- 21
- 20
- 19
- 18


COMMONWEALTH of VIRGINIA

VIRGINIA CODE COMMISSION
General Assembly Building
910 Canal Street
Richmond, Virginia

MAY 24, 1988

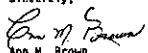
Mr. Ray T. Sorrell, Director
Department of Medical Assistance Services
600 East Broad Street, Suite 1300
Richmond, Virginia 23219

Re: VR 460-02-2.2101. ACD Grant Diversion

Dear Mr. Sorrell:

This will acknowledge receipt of the above-referenced regulations from the Department of Medical Assistance Services.

As required by § 9-6.14:4.1 C.4.(c). of the Code of Virginia, I have determined that these Regulations are exempt from the operation of Article 2 of the Administrative Process Act since they do not differ materially from those required by federal law.

Sincerely,

Ann M. Brown
Deputy Registrar of Regulations

JMS:sll

Agency Citation
IV-A 435.223
1902(a)(10)(A)(ii) and
1905(a) of the Act

Groups Covered

9. Individuals who would be eligible for AFDC if coverage under the State's AFDC plan were as broad as allowed under title IV-A:

- Families with unemployed parents.
- Others as described below:
- The state covers all individuals as described above.
- The state covers only the following group or groups of individuals:
 - Aged
 - Blind
 - Disabled

* * * * *

Title of Regulation: State Plan for Medical Assistance: VR 460-02-2.2117. Eligibility for Pregnant Women and Children Under Age One at 100% of Poverty.

Statutory Authority: § 32.1-325 of the Code of Virginia.

Effective Date: July 6, 1988

REGISTRAR'S NOTICE: This regulation is excluded from Article 2 of the Administrative Process Act in accordance with § 9-6.14:4.1 C 4(a) of the Code of Virginia, which excludes from Article 2 regulations which are necessary to conform to changes in this Code where no agency discretion is involved. The Department of Medical Assistance Services will receive, consider and respond to petitions by any interested person at any time with respect to reconsideration or revision.

Summary:

This amendment to the Plan for Medical Assistance adopts the option provided in the Omnibus Budget Reconciliation Act of 1986 to extend Medicaid coverage to pregnant women and children under the age of one whose income levels do not exceed 100% of the federal income poverty guidelines.

VR 460-02-2.2117. Eligibility for Pregnant Women and Children Under Age One at 100% of Poverty.

1902(a)(10)(A)(ii)(IX) and 1902(1) of the Act, P.L. 99-509 (Sections 9401(a) and (b))

13. The following individuals who are not described in section 1902(a)(10)(A)(i) of the Act whose income level (established at an amount up to 100% of the Federal nonfarm poverty line) specified in Supplement 1 to ATTACHMENT 2.6-A for a family of the same size, including the woman and infant or child and who meet the resource standards specified in Supplement 2 to ATTACHMENT 2.6-A:

- (a) Women during pregnancy (and during the 60-day period beginning on the last day of pregnancy) and infants under one year of age (effective April 1, 1987);
- (b) Children who have attained one year of age but not attained two years of age (effective October 1, 1987);
- (c) Children who have attained two years of age but not attained three years of age (effective October 1, 1988);
- (d) Children who have attained three years of age but not attained four years of age (effective October 1, 1989);
- (e) Children who have attained four years of age but not attained five years of age (effective October 1, 1990).

Infants and children covered under Items 13 (a) through (e) above who are receiving inpatient services on the date they reach the maximum age for coverage under the approved plan will continue to be eligible for inpatient services until the end of the stay for which the inpatient services are furnished.

* * * * *

Title of Regulations: State Plan for Medical Assistance Relating to Expanded Prenatal Care for Pregnant Women.

VR 460-02-3.1100 Provide Coverage and Reimbursement of Additional Prenatal Care Services.
VR 460-02-4.1924. Methods and Standards for Establishing Payment Rates—Other Types of Care.

Statutory Authority: § 32.1-325 of the Code of Virginia.

Effective Date: July 6, 1988

Summary:

House Bill 30 of 1988 required the Board of Medical Assistance Services to amend the Plan for Medical Assistance concerning the expansion of prenatal services for pregnant women to provide coverage of patient education, nutritional assessment/counseling, home health and homemaker services for those women who need the services.

Final Regulations

VR 460-02-3.1100. Provide Coverage and Reimbursement of Additional Prenatal Care Services.

A. Comparability of services: *Services are not comparable in amount, duration and scope. Authority of § 9501(b) of COBRA 1985 allows an exception to provide service to pregnant women without regard to the requirements of § 1902(a)(10)(B).*

B. Definition of services: *Expanded prenatal care services will offer a more comprehensive prenatal care services package to improve pregnancy outcome. The expanded prenatal care services provider may perform the following services:*

1. *Patient education. Includes six classes of education for pregnant women in a planned, organized teaching environment including but not limited to topics such as body changes, danger signals, substance abuse, labor and delivery information, and courses such as planned parenthood, Lamaze, smoking cessation, and child rearing. Instruction shall be rendered by Medicaid certified providers who have appropriate education, license or certification.*

2. *Homemaker. Includes those services necessary to maintain household routine for pregnant women, primarily in third trimester, who need bed rest. Services include, but are not limited to, light housekeeping, child care, laundry, shopping, and meal preparation.*

Shall be rendered by Medicaid certified providers.

3. *Nutrition. Includes nutritional assessment of dietary habits, and nutritional counseling and counseling follow-up. All pregnant women are expected to receive basic nutrition information from their medical care providers or the WIC Program.*

Shall be provided by a Registered Dietitian (R.D.) with experience in public health, maternal and child nutrition or clinical dietetics.

C. **Qualified Providers:** *Local Departments of Social Services, Physicians, Community Health Centers, Rural Health Clinics, Home Health Agencies, and Outpatient Hospitals who have signed an agreement may provide expanded prenatal care services. The qualified providers will provide prenatal care services regardless of their capacity to provide any other services under the Plan.*

VR 460-02-4.1924. Methods and Standards for Establishing Payment Rates—Other Types of Care.

Air Ambulance - Rate set by the single state agency

Mass Transit - Rate charged to the public

Transportation Agreements - Rate set by the single state agency

Special Emergency Transportation - Rate set by the single state agency

j. Payments for Medicare coinsurance and deductibles for noninstitutional services shall not exceed the allowed charges determined by Medicare in accordance with 42 CFR 447.304(b) less the portion paid by Medicare, other third-party payors, and recipient copayment requirements of this Plan.

k. Payment for eyeglasses shall be the actual cost of the frames and lenses not to exceed limits set by the single state agency, plus a dispensing fee not to exceed limits set by the single state agency.

l. *Expanded prenatal services to include patient education, homemaker and nutritional services shall be reimbursed at the lowest of: state agency fee schedule, actual charge, or Medicare (Title XVIII) allowances.*

m. *Targeted case management for high-risk pregnant women and infants up to age one shall be reimbursed at the lowest of: state agency fee schedule, actual charge, or Medicare (Title XVIII) allowances.*

* * * * *

Title of Regulations: State Plan for Medical Assistance Relating to Targeted Case Coordination Services.

VR 460-02-3.1108. Amount, Duration, and Scope of Medical and Remedial Care and Services Provided to the Categorically Needy.

VR 460-02-3.1207. Amount, Duration, and Scope of Services Provided Medically Needy Group(s): All.

VR 460-03-3.1116. Amount, Duration and Scope of Services.

VR 460-02-4.1924. Methods and Standards for Establishing Payment Rates—Other Types of Care.

Statutory Authority: § 32.1-325 of the Code of Virginia.

Effective Date: July 6, 1988

REGISTRAR'S NOTICE: This regulation is excluded from Article 2 of the Administrative Process Act in accordance with § 9-6.14:4.1 C 4(a) of the Code of Virginia, which excludes from Article 2 regulations which are necessary to conform to changes in this Code where no agency discretion is involved. The Department of Medical Assistance Services will receive, consider and respond to petitions by any interested person at any time with respect to reconsideration or revision.

Summary:

House Bill 30 of 1988 directed the Board of Medical Assistance Services to amend the State Plan for Medical Assistance to provide targeted case coordination services to eligible pregnant women and

children up to the age of one year. This amendment to the Plan for Medical Assistance as mandated by the General Assembly implements the option to add case management which was included in § 9508 of the Consolidated Omnibus Budget Reconciliation Act of 1985.

VR 460-02-3.1108. Amount, Duration, and Scope of Medical and Remedial Care and Services Provided to the Categorically Needy.

19. Case management services as defined in, and to the group specified in, Supplement 2 to ATTACHMENT 3.1-A (in accordance with § 1905(a)(19) or § 1915(g) of the Act).

Provided: With limitations

Not provided

20. Extended services to pregnant women.

a. Pregnancy-related and postpartum services for 60 days after the pregnancy ends.

Provided+ No limitations With limitations*

b. Services for any other medical conditions that may complicate pregnancy.

Provided+ No limitations With limitations*

Not provided

21. Ambulatory prenatal care for pregnant women furnished during a presumptive eligibility period by a qualified provider (in accordance with § 1920 of the Act).

Provided+ No limitations With limitations*

Not provided

22. Respiratory care services (in accordance with § 1902(e)(9)(A) through (C) and the Act).

Provided+ No limitations With limitations*

Not provided

+ List of major categories of services (e.g., inpatient hospital, physician, etc.) that are available as pregnancy-related services, and description of additional coverage of these services, if applicable, provided on attachment.

VR 460-02-3.1207. Amount, Duration, and Scope of Services Provided Medically Needy Group(s): All.

19. Case management services as defined in, and to the group specified in, Supplement 2 to ATTACHMENT 3.1-A (in accordance with § 1905(a)(19) or § 1915(g) of the Act).

Provided: With limitations

Not provided

20. Extended services for pregnant women.

a. Pregnancy-related and postpartum services for 60 days after the pregnancy ends.

Provided+ No limitations With limitations*

b. Services for any other medical conditions that may complicate pregnancy.

Provided+ No limitations With limitations*

Not provided

21. Ambulatory prenatal care for pregnant women furnished during a presumptive eligibility period by a qualified provider (in accordance with § 1920 of the Act).

Provided+ No limitations With limitations*

Not provided

+ List of major categories of services (e.g., inpatient hospital, physician, etc.) that are available as pregnancy-related services, and description of additional coverage of these services, if applicable, provided on attachment.

VR 460-03-3.1116. Amount, Duration and Scope of Services.

14c. Intermediate care facility.

A. Provided, no limitations.

15. Intermediate care services and intermediate care services for institutions for mental disease and mental retardation.

15a. Intermediate care facility services (other than such services in an institution for mental diseases) for persons determined, in accordance with § 1902(a)(31)(A) of the Act, to be in need of such care.

A. Provided, no limitations.

15b. Including such services in a public institution (or distinct part thereof) for the mentally retarded

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or persons with related conditions.

A. Provided, no limitations.

16. *Inpatient psychiatric facility services for individuals under 22 years of age.*

17. *Nurse-midwife services.*

A. Covered services for the nurse midwife are defined as those services allowed under the licensure requirements of the state statute and as specified in the Code of Federal Regulations, i.e., maternity cycle.

18. *Hospice care (in accordance with § 1905(o) of the Act).*

A. Not provided.

19. *Case management services for high-risk pregnant women and children up to age 1, as defined in Supplement 2 to Attachment 3.1-A, in accordance with § 1915(g)(1) of the Act.*

A. *Provided, with limitations. See Supplement 2 for detail.*

CASE MANAGEMENT SERVICES

A. *Target Group: To reimburse case management services for high-risk Medicaid-eligible pregnant women and children up to age 1.*

B. *Areas of State in which services will be provided:*

Entire State

Only in the following geographic areas (authority of § 1915(g)(1) of the Act is invoked to provide services less than Statewide:

C. *Comparability of Services.*

Services are provided in accordance with § 1902(a)(10)(B) of the Act.

Services are not comparable in amount, duration, and scope. Authority of § 1915(g)(1) of the Act is invoked to provide services without regard to the requirements of § 1902(a)(10)(B) of the Act.

D. *Definition of Services: The case management services will provide maternal and child health coordination to minimize fragmentation of care, reduce barriers, and link clients with appropriate services to ensure comprehensive, continuous health care. The Maternity Care Coordinator will provide:*

1. *Assessment. Determining clients' service needs, which include psychosocial, nutrition, medical, and*

educational factors.

2. *Service Planning. Developing an individualized description of what services and resources are needed to meet the service needs of the client and help access those resources.*

3. *Coordination and Referral. Assisting the client in arranging for appropriate services and ensuring continuity of care.*

4. *Follow-up and Monitoring. Assessing ongoing progress and ensuring services are delivered.*

5. *Education and Counseling. Guiding the client and developing a supportive relationship that promotes the service plan.*

E. *Qualifications of Providers: Local departments of social services, community health centers, rural health clinics, home health agencies, physicians and outpatient hospitals who have signed an agreement with Department of Medical Assistance Services to deliver Maternity Care Coordination services. Qualified service providers will provide case management regardless of their capacity to provide any other services under the Plan. A Maternity Care Coordinator is the Registered Nurse or Social Worker employed by a qualified service provider who provides care coordination services to eligible clients. The RN must be licensed in Virginia and should have a minimum of one year of experience in community health nursing and experience in working with pregnant women. The Social Worker (MSW, BSW) must have a minimum of one year of experience in health and human services, and have experience in working with pregnant women and their families. The Maternity Care Coordinator assists clients in accessing the health care and social service system in order that outcomes which contribute to physical and emotional health and wellness can be obtained.*

VR 460-02-4.1924. Methods and Standards for Establishing Payment Rates—Other Types of Care.

Air Ambulance Rate set by the Single State Agency

Mass Transit Rate charged to the Public

Transportation Agreements Rate set by the Single State Agency

Special Emergency Transportation Rate set by the Single State Agency

j. *Payments for Medicare co-insurance and deductibles for noninstitutional services shall not exceed the allowed charges determined by Medicare in accordance with 42 CFR 447.304(b) less the portion paid by Medicare, other third-party payors, and recipient co-payment requirements of this Plan.*

k. Payment for eyeglasses shall be the actual cost of the frames and lenses not to exceed limits set by the Single State Agency, plus a dispensing fee not to exceed limits set by the Single State Agency.

l. Expanded prenatal services to include patient education, homemaker and nutritional services shall be reimbursed at the lowest of: State Agency fee schedule, Actual Charge, or Medicare (Title XVIII) allowances.

m. Targeted case management for high-risk pregnant women and infants up to age 1 shall be reimbursed at the lowest of: State Agency fee schedule, Actual Charge, or Medicare (Title XVIII) allowances.

* * * * *

Title of Regulation: VR 460-02-3.1300. State Plan for Medical Assistance Relating to Certification and Recertification of the Need for Institutional Care and Establishment of Plans of Care.

Statutory Authority: § 32.1-325 of the Code of Virginia.

Effective Date: July 6, 1988

REGISTRAR'S NOTICE: This regulation is excluded from Article 2 of the Administrative Process Act in accordance with § 9-6.14:4.1 C 4(c) of the Code of Virginia, which excludes from Article 2 regulations which are necessary to meet the requirements of federal law or regulations, provided such regulations do not differ materially from those required by federal law or regulation. The Department of Medical Assistance Services will receive, consider and respond to petitions by any interested person at any time with respect to reconsideration or revision.

Summary:

Presently, the Social Security Act at § 1902(a)(4)(A) requires that a physician certify the need for care in skilled and intermediate nursing homes, hospitals, mental hospitals and intermediate care facilities for the mentally retarded. It further requires the physician to establish and review his plan of care.

Section 4218 of OBRA 1987 amends § 1902(a)(4)(A) of the Social Security Act to allow a nurse practitioner or clinical nurse specialist, who is not employed by the facility but is working in collaboration with a physician, to certify and recertify the need for skilled or intermediate care (including intermediate care for the mentally retarded). It further allows the same professionals, as qualified above, to establish and periodically review the plan of care. The effective date in the law is July 1, 1988, with an ending date of October 1, 1990.

This federal legislative action afforded the opportunity

to reorganize Attachment 3.1-C of the Plan. This technical reorganization has been included in this Plan amending action.

VR 460-02-3.1300. Standards Established and Methods Used to Assure High Quality Care.

The following is a description of the standards and the methods that will be used to assure that the medical and remedial care and services are of high quality:

§ 1. Institutional care will be provided by facilities qualified to participate in Title XVIII and/or Title XIX.

§ 2. Utilization control.

A. Hospitals.

1. The Commonwealth of Virginia is required by state law to take affirmative action on all hospital stays that approach 15 days. It is a requirement that the hospitals submit to the Virginia Medical Assistance Program Department of Medical Assistance Services complete information on all hospital stays where there is a need to exceed 15 days. The various documents which are submitted are reviewed by professional program staff, including a physician who determines if additional hospitalization is indicated. This review not only serves as a mechanism for approving additional days, but allows physicians on the Virginia Medical Assistance Program Department of Medical Assistance Services' staff to evaluate patient documents and give the Program an insight into the quality of care by individual patient. In addition, hospital representatives of the Medical Assistance Program visit hospitals, review the minutes of the Utilization Review Committee, discuss patient care, and discharge planning.

2. In each case for which payment for inpatient hospital services, skilled nursing facility services, intermediate care facility services, or inpatient mental hospital services is made under the State Plan:

a. A physician must certify at the time of admission, or if later, the time the individual applies for medical assistance under the State Plan that the individual requires the specific level of care inpatient hospital or mental hospital care .

b. The physician, or a physician assistant or a nurse practitioner under the supervision of a physician, must recertify , at least every 60 days, that patients continue to require the specific level of care inpatient hospital or mental hospital care .

c. Such services were furnished under a plan established and periodically reviewed and evaluated by a physician for inpatient hospital or mental hospital services .

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B. Nursing homes.

(Skilled and Intermediate Care Facility)

1. As required by federal law, the ~~Virginia Medical Assistance Program~~ Department of Medical Assistance Services visits every Medicaid patient that is residing in a nursing home in Virginia. The purpose of the visit is to do a complete medical and social evaluation of the patient. The visit also includes patient interviews, discussions with the professional staff, and the attending physician. Thus, it is assured that quality care is rendered to these recipients and that the patient is receiving the proper level of care.

2. Long term care of patients in medical institutions will be provided in accordance with procedures and practices that are based on the patient's medical and social needs and requirements.

3. In each case for which payment for ~~inpatient hospital services, skilled nursing facility services, or intermediate care facility services; or inpatient mental hospital services~~ is made under the State Plan:

a. ~~A physician must certify at the time of admission, or if later, the time the individual applies for medical assistance under the State Plan that the individual requires the specific level of care. A physician, or a nurse practitioner or clinical nurse specialist, who is not an employee of the facility but is working in collaboration with a physician, must certify at the time of admission, or if later, the time the individual applies for medical assistance under the State Plan that the individual requires the skilled or intermediate level of care.~~ The Nursing Home Preadmission Screening shall serve as the ~~physician's~~ admission or initial certification for intermediate or skilled nursing home care if the date of the screening occurred within 30 days prior to the admission;

b. ~~The physician, or a physician assistant or a nurse practitioner under the supervision of a physician, must recertify that patients continue to require the specific level of care. The physician, or nurse practitioner or clinical nurse specialist, who is not an employee of the facility but is working in collaboration with a physician, must recertify the need for skilled or intermediate level of care. Recertifications must be written according to the following schedule:~~

~~(1) Inpatient Hospital Services - at least every 60 days;~~

~~(1) Skilled Nursing Facility Services - at least:~~

~~30 days after the date of the initial certification,~~

~~60 days after the date of the initial certification,~~

90 days after the date of the initial certification, and

every 60 days thereafter;

~~(2) Intermediate Nursing Home Care - at least:~~

~~60 days after the date of the initial certification,~~

~~180 days after the date of the initial certification,~~

~~12 months after the date of the initial certification,~~

~~18 months after the date of the initial certification,~~

~~24 months after the date of the initial certification, and~~

~~every 12 months thereafter;~~

~~(3) Intermediate Care Facilities for the Mentally Retarded - at least every 365 days;~~

~~c. For the purpose of determining compliance with the schedule established by paragraph b, a recertification shall be considered to have been done on a timely basis if it was performed not later than 10 days after the date the recertification was otherwise required, if the physician, or other person making such recertification, provides a written statement showing good cause why such recertification did not meet such schedule;~~

~~d. Such services were furnished under a plan established and periodically reviewed and evaluated by a physician or a nurse practitioner or clinical nurse specialist who is not an employee of the facility but who is working in collaboration with a physician for skilled or intermediate care services;~~

~~e. The schedule of recertifications set forth in paragraph b shall become effective for all admissions and recertifications due on or after October 1, 1984, except that this amendment made by this section shall not require recertifications sooner or more frequently than every 60 days for skilled care patients admitted before October 1, 1984;~~

~~f. The addition of the nurse practitioner or clinical nurse specialist, as qualified in paragraphs a, b, and d, shall apply to certifications, recertifications, and plans of care for skilled or intermediate care written on or after July 1, 1988, and before October 1, 1990;~~

~~g. The Virginia Medical Assistance Program Department of Medical Assistance Services will recover payments made for periods of care in which the ~~physician~~ certifications, recertifications, and plans of care documentation does not meet the~~

time schedule of this section to the extent required by federal law.

h. Attachment 3-1-C-a.2 was amended on September 24, 1984, pursuant to P.L. 98-369, without public comment under the exception to the Virginia Administrative Process Act, Section 9-6.14:6(iv) because the existing regulations are merely conformed with the federal law. The agency will receive, consider and respond to petitions by any interested person at any time for the reconsideration or revision thereof.

h. In addition, a fiscal penalty of 1-1/2% per month of the disallowed payment will be assessed against the nursing home from the time the noncertified service was rendered until payment is received by the Virginia Medical Assistance Program (§ 32.1-313 of the Code of Virginia (1950) as amended). No efforts by the nursing home shall be exerted to recoup this penalty from the patient or responsible party.

* * * * *

Title of Regulation: State Plan for Medical Assistance Relating to 1988 Hospital Reimbursement Methodology Charges.

VR 460-02-4.191. Methods and Standards for Establishing Payment Rates—Inpatient Hospital Care.

Statutory Authority: § 32.1-325 of the Code of Virginia.

Effective Date: July 6, 1988

REGISTRAR'S NOTICE: This regulation is excluded from Article 2 of the Administrative Process Act in accordance with § 9-6.14:4.1 C 4(a) of the Code of Virginia, which excludes from Article 2 regulations which are necessary to conform to changes in this Code where no agency discretion is involved. The Department of Medical Assistance Services will receive, consider and respond to petitions by any interested person at any time with respect to reconsideration or revision.

Summary:

The 1988 General Assembly required that the Board of Medical Assistance Services amend the State Plan for Medical Assistance to incorporate the Data Resources, Inc., moving average HCFA-Type Hospital Market Basket inflator and to establish a separate group ceiling for state-owned university teaching hospitals.

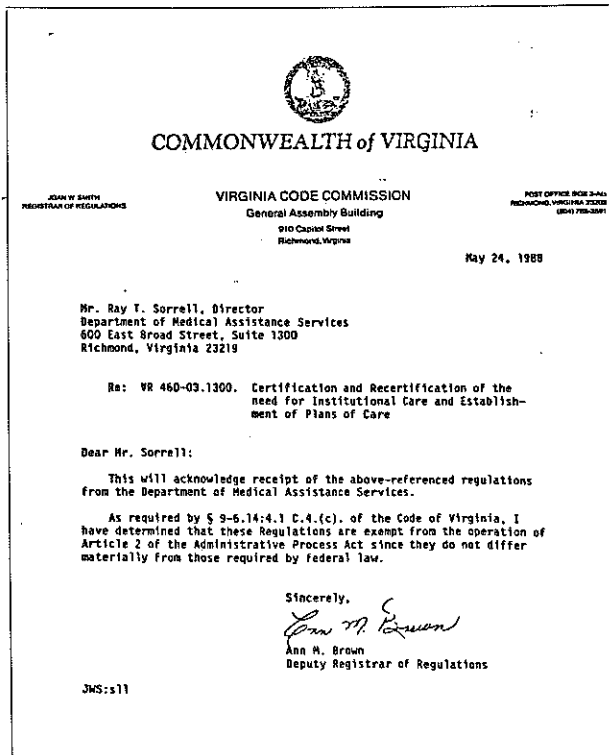
VR 460-02-4.191. Methods and Standards for Establishing Payment Rates—Inpatient Hospital Care.

V. The reimbursement system for hospitals includes the following components:

(1) Hospitals should be grouped by classes according to number of beds and urban versus rural. (Three groupings for rural—less than 100 beds, 101 to 170 beds, and over 171 beds; four groupings for urban—less than 100, 100 to 400, 401 to 600, and over 601 beds.) Groupings are similar to those used by the Health Care Financing Administration (HCFA) in determining routine cost limitations.

(2) Prospective reimbursement ceilings on allowable operating costs ~~should be~~ were established as of July 1, 1982, for each grouping. Hospitals with a fiscal year end after June 30, 1982 shall be subject to the new reimbursement ceilings.

The calculation of the initial group ceilings as of July 1, 1982, ~~should be~~ was based on available, allowable cost data for all hospitals in calendar year 1981. Individual hospital operating costs ~~should be~~ were advanced by a reimbursement escalator from the hospital's year end to July 1, 1982. After this advancement, the operating costs ~~should be~~ were standardized using SMSA wage indices, and a median ~~should be~~ was determined for each group. These



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medians should be were readjusted by the wage index to set an actual cost ceiling for each SMSA. Therefore, each hospital grouping should have has a series of ceilings representing one of each SMSA area. The wage index should be is based on those used by HCFA in computing its Market Basket Index for routine cost limitations.

Effective July 1, 1986, providers subject to the prospective payment system of reimbursement will have had their prospective operating cost rate and prospective operating cost ceiling computed using a new methodology. This method will use uses an allowance for inflation based on the percent of change in the quarterly average of the Medical Care Index of the Chase Econometrics - Standard Forecast determined in the quarter in which the provider's new fiscal year begins began .

The prospective operating cost rate will be is based on the provider's allowable cost from the most recent filed cost report, plus the inflation percentage add-on.

The prospective operating cost ceiling will be is determined by using the base that was in effect for the provider's fiscal year that began between July 1, 1985, and June 1, 1986. The medical care index allowance for inflation percent of change for the quarter in which the provider's new fiscal year began will be is added to this base to determine the new operating cost ceiling. This new ceiling is to be was effective for all providers on July 1, 1986. For subsequent cost reporting periods beginning on or after July 1, 1986, the last prospective operating rate ceiling determined under this new methodology will become the base for computing the next prospective year ceiling.

Effective on and after July 1, 1988, for providers subject to the prospective payment system, the allowance for inflation will be based on the percent of change in the moving average of the Data Resources, Incorporated Health Care Cost HCFA-Type Hospital Market Basket determined in the quarter in which the provider's new fiscal year begins. Such providers will have their prospective operating cost rate and prospective operating cost ceiling established in accordance with the methodology which became effective July 1, 1986. Rates and ceilings in effect July 1, 1988, for all such hospitals will be adjusted to reflect this change.

The new method will still require comparison of the prospective operating cost rate to the prospective operating ceiling. The provider is allowed the lower of the two amounts subject to the lower of cost or charges principles.

(3) Subsequent to June 30, 1982, the group ceilings should not be recalculated on allowable costs, but should be updated by the escalator.

(4) Prospective rates for each hospital should be based upon the hospital's allowable costs plus the escalator, or the appropriate ceilings, or charges; whichever is lower. Except to eliminate costs that are found to be unallowable, no retrospective adjustment should be made to prospective rates.

Depreciation, capital interest, and education costs approved pursuant to HIM-15 (Sec. 400), should be considered as pass throughs and not part of the calculation.

(5) Hospitals which have a disproportionately higher level of Medicaid patients and which exceed the ceiling should be allowed a higher ceiling based on the individual hospital's Medicaid utilization. This should be measured by the percent of Medicaid patient days to total hospital patient days. Each hospital with a Medicaid utilization of over 8.0% should receive an adjustment to its ceiling. The adjustment should be set at a percent added to the ceiling for each percent of utilization up to 30%.

(6) There will be special consideration for exception to the median operating cost limits in those instances where extensive neonatal care is provided.

(7) An incentive plan should be established whereby a hospital will be paid on a sliding scale, percentage for percentage, up to 25% of the difference between allowable operating costs and the appropriate per diem group ceiling when the operating costs are below the ceilings. The incentive should be calculated based on the annual cost report.

The table below presents three examples under the new plan:

Group Ceiling	Hospital's Allowable Cost Per Day \$	Difference % of Ceiling	Difference \$	Sliding Scale Incentive % of Difference
\$230	\$230	-0-	-0-	-0-
\$230	207	23.00	10%	2.30
\$230	172	57.50	25%	14.38
\$230	143	76.00	33%	19.00

IX. Effective October 1, 1986, hospitals that have obtained Medicare certification as inpatient rehabilitation hospitals or rehabilitation units in acute care hospitals, which are exempted from the Medicare Prospective Payment System (DRG), shall be reimbursed in accordance with the current Medicaid Prospective Payment System as described in the preceding sections I, II, III, IV, V, VI, VII, VIII and excluding V(6). Additionally, rehabilitation hospitals and rehabilitation units of acute care hospitals which are exempt from the Medicare Prospective Payment System will be required to maintain separate cost accounting records, and to file separate cost reports annually utilizing the applicable Medicare cost reporting forms (HCFA 2552 series) and the Medicaid forms (MAP-783 series).

A new facility shall have an interim rate determined using a pro forma cost report or detailed budget prepared by the provider and accepted by the DMAS, which represents its anticipated allowable cost for the first cost reporting period of participation. For the first cost reporting period, the provider will be held to the lesser of its actual operating cost or its peer group ceiling. Subsequent rates will be determined in accordance with the current Medicaid Prospective Payment System as noted in the preceding paragraph of IX.

X. Item 398 D of the 1987 Appropriation Act (as amended), effective April 8, 1987, eliminated reimbursement of return on equity capital to proprietary providers.

XI. Pursuant to Item 389 E4 of the 1988 Appropriation Act (as amended), effective July 1, 1988, a separate group ceiling for allowable operating costs shall be established for state-owned university teaching hospitals.

* * * * *

Title of Regulation: State Plan for Medical Assistance. VR 460-02-2.193. Medicaid Payment for Reserving a Nursing Home Bed for Hospitalized Recipients.

Statutory Authority: § 32.1-325 of the Code of Virginia.

Effective Date: July 6, 1988

REGISTRAR'S NOTICE: This regulation is excluded from Article 2 of the Administrative Process Act in accordance with § 9-6.14:4.1 C 4(a) of the Code of Virginia, which excludes from Article 2 regulations which are necessary to conform to changes in this Code where no agency discretion is involved. The Department of Medical Assistance Services will receive, consider and respond to petitions by any interested person at any time with respect to reconsideration or revision.

Summary:

The 1988 General Assembly approved an amendment to the FY89-90 Medicaid budget to provide for payment of up to 12 reserve bed days when a nursing home recipient requires hospitalization and the nursing home is in a planning district in which the average occupancy for all licensed and certified nursing homes is more than 96% based on a 12-month average of occupancy reported in Medicaid cost reports as of June 30 of each year.

VR 460-02-4.193. Medicaid Payment for Reserving a Nursing Home Bed for Hospitalized Recipients.

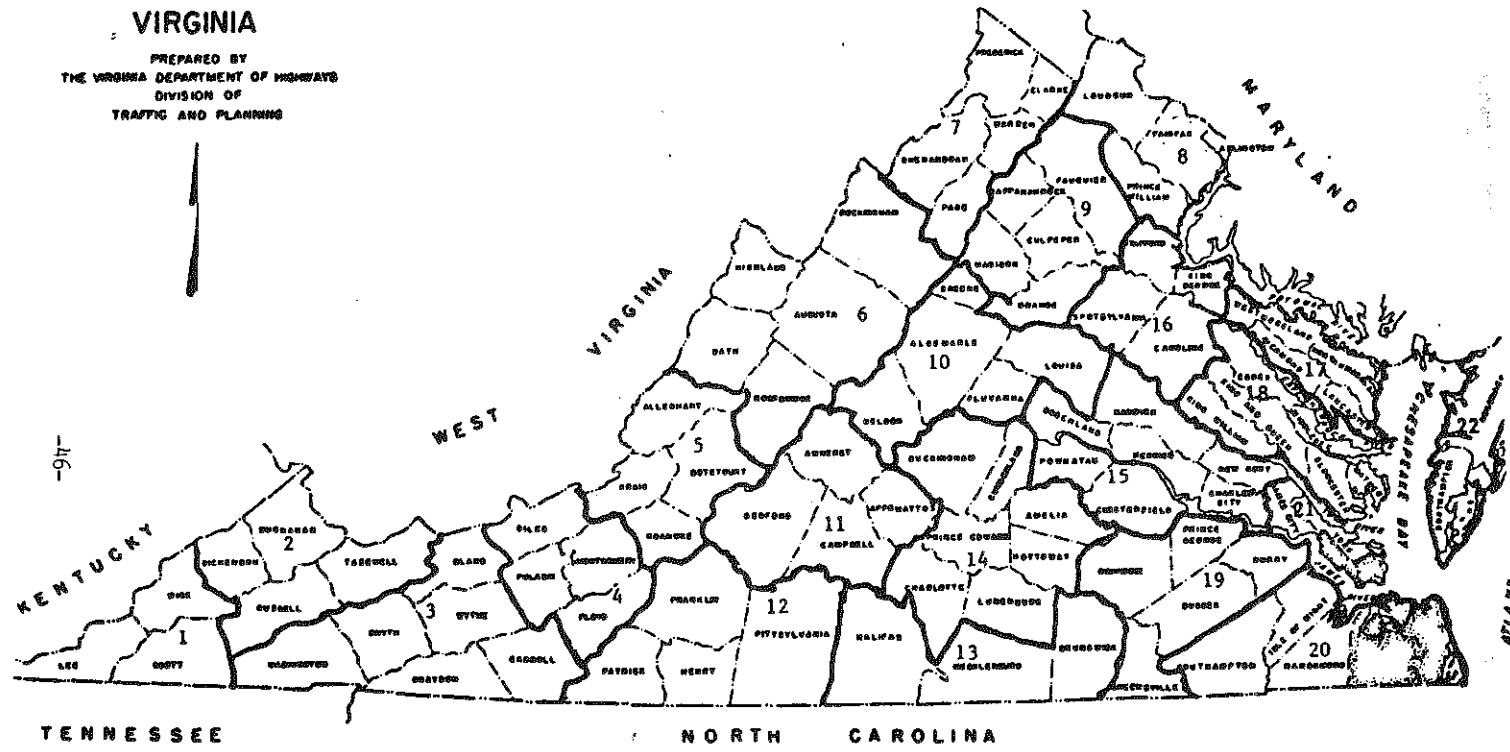
§ 1. Basis for payment for reserving beds during a recipient's absence from an inpatient facility.

Payment is made for reserving beds in long-term care facilities for recipients during their temporary absence for

the following purpose:

A. For leaves of absence up to 18 days per year for any reason other than inpatient hospital admissions.

B. For up to 12 reserve bed days per admission when a nursing home patient requires hospitalization and the nursing home is in the planning district in which the average occupancy for all licensed and certified nursing homes is more than 96% based on a 12-month average of the occupancy reported in Medicaid nursing home cost reports filed with the Department of Medical Assistance Services as of June 30 of each year. Such reserve bed days will be applicable to hospital stays beginning on or after July 1, 1988. Payment will be made prospectively to eligible nursing homes which are licensed, certified and have a valid provider agreement as of July 1 of each year. The Department of Medical Assistance Services will notify eligible nursing homes that they may bill for up to the 12 reserve bed days for the year beginning each July 1 through June 30. Families may not be billed for reserve bed days for which the Department of Medical Assistance Services will allow payment.



REGION	PLANNING DISTRICTS
I. NORTHWEST	6,7,9,10,16
II. NORTHERN	8
III. SOUTHWEST	1,2,3,4,5,11,12
IV. CENTRAL	13,14,15,19
V. EASTERN	17,18,20,21,22

* * * * *

Title of Regulation: State Plan for Medical Assistance: VR 460-03-2.6109. Expansion of Transfer of Assets Rule.

Statutory Authority: § 32.1-325 of the Code of Virginia.

Effective Date: July 6, 1988

REGISTRAR'S NOTICE: This regulation is excluded from Article 2 of the Administrative Process Act in accordance with § 9-6.14:4.1 C 4(a) of the Code of Virginia, which excludes from Article 2 regulations which are necessary to conform to changes in this Code where no agency discretion is involved. The Department of Medical Assistance Services will receive, consider and respond to petitions by any interested person at any time with respect to reconsideration or revision.

Summary:

House Bill 30 of 1988 required the Board of Medical Assistance Services to amend the Plan for Medical Assistance concerning the transfer of assets rule when applied to patients of skilled or intermediate care facilities who apply for Medicaid and have transferred their homes within two years application for Medicaid.

VR 460-03-2.6109. Expansion of Transfer of Assets Rule.

2. Transfer of the home of an individual who is an inpatient in a medical institution.

A period of ineligibility applies to inpatients in an SNF, ICF or other medical institution as permitted under section 1917(c)(2)(B)(i).

a. Subject to the exceptions on page 2 of this supplement, an individual is ineligible for 24 months after the date on which he disposed of the home. However, if the uncompensated value of the home is less than the average amount payable under this plan for 24 months of care in an SNF, the period of ineligibility is a shorter time, bearing a reasonable relationship (based on the average amount payable under this plan as medical assistance for care in an SNF) to the uncompensated value of the home as follows:

The average amount payable is determined by the state on a yearly basis and is used in comparison to the uncompensated value of the home.

b. Subject to the exceptions on page 2 of this supplement, if the uncompensated value of the home is more than the average amount payable as medical assistance for 24 months of care in an SNF, such individual shall be ineligible for all medical assistance for a period in excess of 24 months after the date on which he disposed of such home which

bears a reasonable relationship to the uncompensated value of the home. Reasonable relationship is based upon the average amount payable under the state plan as medical assistance for care in a skilled nursing facility.

An individual would not be ineligible for medical assistance by reason of the following exceptions:

1. A satisfactory showing is made that the individual can reasonably be expected to be discharged from the medical institution and to return to that home.
2. Title to such home was transferred to the individual's spouse or child who is under age 21, or is blind or permanently and totally disabled.
3. A satisfactory showing is made that the individual intended to dispose of the home either at fair market value or for other valuable consideration.
4. When the property owner has been the victim of another person's actions (except those of a legal guardian, committee, or power-of-attorney) who obtained or disposed of the property without the applicant or recipient's full understanding of the action.

* * * * *

Title of Regulations: State Plan for Medical Assistance Relating to 1988 Nursing Home Reimbursement Changes. VR 460-03-4.194. Nursing Home Payment System. VR 460-02-3.1. Amount, Duration and Scope of Services.

Statutory Authority: § 32.1-325 of the Code of Virginia.

Effective Date: July 6, 1988

REGISTRAR'S NOTICE: This regulation is excluded from Article 2 of the Administrative Process Act in accordance with § 9-6.14:4.1 C 4(a) of the Code of Virginia, which excludes from Article 2 regulations which are necessary to conform to changes in this Code where no agency discretion is involved. The Department of Medical Assistance Services will receive, consider and respond to petitions by any interested person at any time with respect to reconsideration or revision.

Summary:

The 1988 General Assembly mandated that the Board of Medical Assistance Services amend the Plan for Medical Assistance to provide for the following: incorporate the Data Resources, Inc., moving average HCFA-Type Skilled Nursing Facility Market Basket inflator; eliminate retrospective reimbursement for all new and expanded long term care facilities; discontinue direct reimbursement to physical therapy providers for PT services provided to Medicaid patients residing in long term facilities that are

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subject to prospective reimbursement.

VR 460-03-4.194. Nursing Home Payment System.

§ 2.7. (continued).

B. The calculation of the initial regional medians as of July 1, 1982, ~~has been~~ was based on available allowable cost data for all nursing homes in the calendar year 1981. Nursing home operating costs were advanced by a reimbursement escalator from the nursing home's year end to July 1, 1982. The median ~~has been~~ was determined using this data.

These ceilings ~~will be~~ were adjusted once each quarter by the escalator. Thus, the quarterly ceilings ~~will be~~ have been used for nursing homes which have a fiscal year beginning within the quarter for the period from July 1, 1982, through June 30, 1986.

C. Reimbursement escalator.

1. The regional medians ~~will be~~ were not be recalculated on actual costs, but ~~will be~~ were updated by the escalator.

2. Effective after July 1, 1986, providers subject to the prospective payment system of reimbursement ~~will have~~ had their prospective operating cost rate and prospective operating cost ceiling computed using a new methodology. This new method ~~will use~~ used an allowance for inflation based on the percent of change in the quarterly average of the Medical Care Index of the Chase Econometrics - Standard Forecast determined in the quarter in which the providers new fiscal year begins.

3. The prospective operating cost rate ~~will be~~ is based on the providers allowable cost from the most recent filed cost report, plus the inflation percentage add-on.

4. The prospective operating cost ceiling ~~will be~~ is determined by using the base that was in effect for the provider's fiscal year that began between July 1, 1985 and June 1, 1986. The ~~medical care index allowance for inflation~~ percent of change for the quarter in which the provider's new fiscal year began ~~will be~~ is added to this base to determine the new operating cost ceiling.

This new ceiling is ~~to be~~ was effective for all providers on July 1, 1986. For subsequent cost reporting periods beginning on or after July 1, 1986, the last prospective operating rate ceiling determined under this new methodology will become the base for computing the next prospective year ceiling.

Effective on and after July 1, 1988, for providers subject to the prospective payment system, the allowance for inflation will be based on the percent of change in the moving average of the Data Resources,

Incorporated Health Care Cost - Skilled Nursing Facility Market Basket of Routine Service Costs determined in the quarter in which the provider's new fiscal year begins. Such providers will have their prospective operating cost rate and prospective operating cost ceiling established in accordance with the methodology which became effective July 1, 1986. Rates and ceilings in effect July 1, 1988, for all such long term care facilities will be adjusted to reflect this change.

5. The new method will still require comparison of the prospective operating cost rate to the prospective operating ceiling. The provider is allowed the lower of the two amounts subject to the lower of cost or charges principles.

6. Allowable plant costs will continue to be reimbursed in accordance with the existing formula. Such costs are defined in A-1. Plant costs shall not include the component of cost related to making or producing a supply or service.

7. Prospective rates for each nursing home will be based on the home's allowable operating costs per diem plus the escalator or the appropriate ceilings, or charges, whichever is lower. The disallowance of unallowable costs will be reflected in the subsequent year's prospective rate determination.

5. Errors or inconsistencies in the cost report, and/or

6. Incomplete/nonacceptable cost report.

§ 2.15. Legal fees/accounting.

Costs claimed for legal/accounting fees will be limited to reasonable and customary fees for specific services rendered and must be related to patient care as defined by Medicare and Medicaid principles of reimbursement. Documentation for retainer fees will be considered as allowable cost up to the limits established in Appendix III (effective with cost report ending after the approved date of this revision).

§ 2.16. Documentation.

Adequate documentation in order to support cost claims must be provided at the time of interim or final settlement.

§ 2.17. Fraud and abuse.

Inclusion of previously disallowed items not currently under appeal or not properly disclosed with the appropriate effect on cost in subsequent cost reports will be referred to the Medicaid Fraud Control Unit.

Article 4.
New Facilities.

§ 2.18. Interim Prospective rate.

A new facility shall have an interim *a prospective* rate determined using *based upon the lower of the appropriate ceiling, or a pro forma cost report or detailed budget prepared by the provider and accepted by the DMAS, which represents its the new facility's anticipated allowable per diem cost for the first cost reporting period of participation.*

Upon *Effective through June 30, 1988, upon* a showing of good cause, and upon the approval of DMAS, an existing facility that expands its bed capacity by 50% or more shall have the option of retaining its prospective rate, or being treated as a new facility. A new facility shall determine the length of its first two cost reporting periods; however, the two periods together shall not exceed 15 months.

§ 2.19. Retroactive adjustment.

A: A new facility's costs shall be subject to retroactive adjustment to actual allowable cost for the first and second cost reporting periods of operation only.

B: A new facility will be given a maximum of 15 months reimbursement under a retroactive system. The intent of this start up period is to allow 15 months for the new facility to achieve 95% occupancy. If the provider uses the entire fifteen months he must divide this into two cost reporting periods.

The provider shall have the option of choosing the length of each of these two periods so long as each is not less than two months or longer than thirteen months, but in no case may the aggregate time exceed the fifteen month period. The new facility is expected to achieve 95% occupancy on at least one day during the second cost reporting period.

C: DMAS will calculate a new facility's prospective operating cost rate, (beginning of the third cost reporting period) based upon the occupancy and cost of the second cost reporting period in one of two manners:

1. If the new facility achieved a 95% occupancy at any point in time during the second period, then he will be credited with meeting the 95% occupancy factor. In this case, the new facility's prospective rate will be established in the first month following the second cost reporting period, and will be based on actual cost not to exceed the ceiling.

The cost used in calculating the prospective rate will be from the new facility's cost report for the second cost reporting period, and will include total operating and plant cost.

2. If 95% occupancy is not achieved during the second cost reporting period, the new facility's prospective rate will be established beginning with the

first month of operation following the second period and will be based on an occupancy factor of 95%. The cost used in calculating the prospective rate will be from the new facility's cost report for the second cost reporting period, and will include total operating and plant cost.

D: Nothing herein shall prohibit the new facility from choosing the prospective payment plan earlier than the fifteen months so long as he has operated for at least two months and has achieved a 95% occupancy rate.

E: Ceiling Limitations.

The operating cost rate for a new facility shall not exceed 140% of the applicable new reimbursement ceilings during the first two cost reporting periods.

F: Section 2.18 shall apply to all new facilities licensed after the effective date of this revised manual.

A. Pursuant to Item 389 E3 of the 1988 Appropriation Act, effective on and after July 1, 1988, retrospective reimbursement shall be eliminated for new and expanded long term care facilities that are subject to prospective reimbursement. Any such facility being reimbursed retrospectively shall be converted to prospective reimbursement, effective July 1, 1988.

B. A facility is deemed to be certified as of the date the Program determines that the facility is eligible to participate in the Program.

C. For all new or expanded facilities certified on or after July 1, 1988, the following shall apply:

1. The 95% occupancy requirement shall be waived for establishing the first cost reporting period's prospective reimbursement rate. This first cost reporting period may not exceed 12 months from the date of the facility's certification.

2. The 95% occupancy requirement shall be applied to the first and subsequent cost reporting periods' actual costs for establishing such facility's second and future cost reporting periods' prospective reimbursement rates. The 95% occupancy requirement shall be considered as having been satisfied if the new facility achieved a 95% occupancy at any point in time during the first cost reporting period.

D. Facilities certified prior to July 1, 1988, whose current cost reporting period ends after July 1, 1988, will continue to receive a waiver of the 95% occupancy requirement until a maximum of 12 months has elapsed from the facilities' certification date. Cost reports shall be filed with the Program at the end of this 12-month waiver period.

E. If on July 1, 1988, 12 months or more have elapsed from such facility's certification date, the waiver of the

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95% requirement shall no longer be applicable. Cost reports must be filed with the Program to include the period from the date of certification through June 30, 1988.

Article 5. Cost Report Due Date.

§ 2.20. Cost report submission.

A. Cost reports are due not later than 90 days after the provider's fiscal year end.

§ 2.24. Fiscal year changes.

All fiscal year end changes must be approved 90 days prior to the beginning of a new fiscal year.

Article 6. Prospective Rates.

§ 2.25. For those facilities deemed not to be in need of a field audit, the prospective rate will be determined by DMAS within 90 days of the receipt of a provider's complete cost report, and rate adjustments will be made (in accordance with the reimbursement formula) to the first day of the provider's new cost reporting year. Where a field audit is deemed necessary, an additional 90 days will be available to DMAS to determine appropriate adjustments to the prospective rate.

Audits may be performed subsequent to this 90-day period as mandated by the federal government. The Program will seek repayment or make retroactive settlements when adjustments are made to allowable costs as a result of audits.

Article 7. Retrospective Rates.

§ 2.26. The retrospective method of reimbursement shall be used for the following:

- (1) Mental Health/Mental Retardation facilities ; and
- (2) First ~~(two)~~ cost reporting periods of a new facility

§ 2.27. Beds changed from one level of care to another level of care are not subject to retrospective rate new facility status.

APPENDIX III.

(Continued)

b. The expense to be allowed by DMAS must be supported by an invoice and check when required by the Division of Provider Reimbursement.

10. Retrospective Per Diem.

a. The per diem operating cost rate for a new facility shall not exceed 140 percent of the applicable new reimbursement ceiling during its first two cost reporting periods. Beginning with the third reporting period, the provider will be on the prospective payment system.

[Reserved for future use.]

11. Payments to providers.

Payments to providers are limited to the lower of allowable cost, charges, or the applicable ceiling or actual costs for the providers' first two cost reporting periods .

12. Patient days.

The greater of the actual days or 95% of the licensed bed complement shall be used to determine prospective per diem rates, except for distinct parts with 30 beds or less, when 85% occupancy will apply, and except as provided for under § 2.19B of the Nursing Home Payment System (Supplement to Attachment 4.19D). There are no occupancy limitations during a retrospective rate period.

13. Construction cost limitations.

a. Reimbursable cost for building and fixed equipment will be limited to and based on the high average per square foot costs in the Dodge Construction System Costs. The provider will have the option of selecting the Dodge Construction Cost Index which is effective on the date the COPN is issued or the date the facility is licensed. This provision will be effective for beds licensed after December 31, 1985.

Total costs will be calculated by multiplying the high average per square foot cost times 385 square feet (the average per bed square footage).

VR 460-02-3.1. Amount, Duration and Scope of Services.

D. The State Agency may place appropriate limits on a service based on dental necessity and/or for utilization control. Examples of service limitations are: examinations, prophylaxis, fluoride treatment (once/six months); space maintenance appliances; bitewing x-ray - two films (once/12 months); routine amalgam and composite restorations (once/three years); and extractions, permanent crowns, endodontics, patient education (once).

E. Limited oral surgery procedures, as defined and covered under Title XVIII (Medicare), are covered for all recipients, and also require preauthorization by the state agency.

11. Physical therapy and related services.

11a. Physical therapy.

A. Services for individuals requiring physical therapy are provided only as an element of hospital inpatient or outpatient service, skilled nursing home service, home health service, or when otherwise included as an authorized service by a cost provider who provides rehabilitation services.

B. Effective July 1, 1988, the Program will not provide direct reimbursement to freestanding rehabilitation clinics for physical therapy services rendered to patients residing in long term care facilities. Reimbursement for these services is and continues to be included as a component of the nursing homes' operating cost.

11b. Occupational therapy.

A. Services for individuals requiring occupational therapy are provided only as an element of hospital inpatient or outpatient service, skilled nursing home service, home health service, or when otherwise included as an authorized service by a cost provider who provides rehabilitation services.

11c. Services for individuals with speech, hearing, and language disorders (Provided by or under the supervision of a speech pathologist or audiologist; see Page 1, General and Page 12, Physical Therapy and Related Services.)

During its review of existing regulations, the Board of Professional Counselors examined its educational, experiential, examination, and practice requirements.

In April 1987, the Board of Professional Counselors submitted to the Governor's office a set of regulations designed to replace the board's existing regulations. The board chose to withdraw the proposed regulations in October 1987 following its decision to make a change in the educational requirements for licensure it had originally proposed. The change returned an educational requirement found in the existing regulations.

The board also had approved emergency regulations which allowed the proposed fee increases shown within the regulations to be adopted.

The proposed regulations were published in the Virginia Register of Regulations on February 1, 1988. Following the close of the public comment period on March 30, 1988, the board prepared a summary of comments it had received with the board's responses. As a result of some of the comments received, minor revisions for clarity were made in some sections of the regulations. The board adopted the regulations at its meeting on April 15, 1988.

VR 560-01-02. Regulations Governing the Practice of Professional Counseling.

PART I. GENERAL PROVISIONS.

§ 1.1. Definitions.

The following words and terms, when used in these regulations, shall have the following meanings, unless the context clearly indicates otherwise:

"Applicant" means any individual who has submitted an official application and paid the application fee for licensure as a professional counselor.

"Appraisal activities" has the same meaning as defined in § 54-932.d.2 of the Code of Virginia, "selecting, administering, scoring and interpreting instruments designed to assess an individual's aptitudes, attitudes, abilities, achievements and interests, and shall not include the use of projective techniques in the assessment of personality."

"Board" means the Virginia Board of Professional Counselors.

"Candidate for licensure" means a person who has satisfactorily completed all educational and experience requirements for licensure and has been deemed eligible by the board to sit for its examinations.

"Competency area" means an area in which a person

VIRGINIA BOARD OF PROFESSIONAL COUNSELORS

Title of Regulation: VR 560-01-02. Regulations Governing the Practice of Professional Counseling.

Statutory Authority: § 54-929(a) of the Code of Virginia.

Effective Date: July 6, 1988

Summary:

These regulations establish the requirements governing the practice of professional counseling in the Commonwealth of Virginia. These regulations include the educational and experiential requirements necessary for licensure; provide criteria for the written and oral examinations; set the standards of practice; and establish procedures for disciplining licensed professional counselors.

The regulations are the result of an extensive regulatory review conducted by the Board of Professional Counselors pursuant to Executive Order 52(84) of Governor Charles S. Robb. The regulations are necessary to clarify existing requirements set by the Virginia Board of Behavioral Science (abolished by the General Assembly in 1983) and the current regulations of the Board of Professional Counselors.

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possesses knowledge and skill and the ability to apply them in the clinical setting.

“Counseling” means assisting an individual, through the counseling relationship, to develop an understanding of personal problems, to define goals, and to plan action reflecting his interests, abilities, aptitudes and needs as they relate to educational progress, occupation and careers, and personal or social concerns.

“Group supervision” means the process of clinical supervision of no more than six persons in a group setting provided by a qualified supervisor.

“Internship” means supervised, planned, practical, advanced experience obtained in the clinical setting observing and applying the principles, methods and techniques learned in training or educational settings. The internship involves a longer period of time than the practicum.

“Practicum” means supervised, planned, practical experience occurring in a clinical setting, for an early introduction to subject matter. It is generally time-bound and for a shorter period of time than an internship, but it allows for demonstration and testing of information, knowledge, and skills acquired.

“Professional counselor” means a person trained in counseling and guidance services with an emphasis on individual and group guidance and counseling designed to assist individuals in achieving more effective personal, social, educational and career development and adjustment.

“Regional accrediting agency” means one of the regional accreditation agencies recognized by the United States Secretary of Education responsible for accrediting senior postsecondary institutions.

“Supervision” means the ongoing process performed by a supervisor who monitors the performance of the person supervised and provides regular, documented face-to-face consultation, guidance and instruction with respect to the clinical skills and competencies of the person supervised.

§ 1.2. Fees required by the board.

A. The board has established the following fees applicable to licensure as a professional counselor:

Registration of supervision	\$ 75.
Application processing	100.
Examination	150.
Reexamination	
Written	75.

Oral	75.
Provisional license	30.
Renewal of provisional license	30.
License renewal	75.
Duplicate license	15.
Endorsement to another jurisdiction	10.
Late renewal	10.
Replacement of or additional wall certificate	15.
Name change	10.
Returned check	15.

B. Fees shall be paid by check or money order made payable to the Treasurer of Virginia and forwarded to the board.

§ 1.3. Substance abuse counseling.

VR 560-02-01 Regulations Governing the Certification of Substance Abuse Counselors are incorporated by reference in these regulations.

PART II. REQUIREMENTS FOR LICENSURE.

§ 2.1. Requirements, general.

No person shall practice as a professional counselor in the Commonwealth of Virginia except as provided in these regulations and when licensed by this board.

A. Licensure by the board shall be by examination.

B. Every applicant for licensure examination by the board shall:

1. Meet the education and experience requirements prescribed in § 2.2 of these regulations;
2. Have the institution(s) where the applicant completed the required graduate work send directly to the executive director of the board, at least 60 days prior to the date of the written examination, official transcripts documenting the applicant's completion of the education requirements prescribed in § 2.2 A; and
3. Submit to the executive director of the board, not less than 60 days prior to the date of the written examination:

a. A completed application, on forms provided by

the board;

b. Documented evidence of having fulfilled the experience requirements of § 2.2 B;

c. Endorsement letters from three responsible persons attesting to the applicant's character and professional integrity; and

d. The licensure application fee prescribed in § 1.4 of these regulations.

§ 2.2. Education and experience requirements for licensure examinations.

Every applicant for examination for licensure shall meet the requirements of subsections A and B of this section.

A. Education.

The applicant shall have completed 60 semester hours or 90 quarter hours of graduate study that are primarily counseling in nature, including a graduate degree in counseling or a related discipline, from a college or university accredited by a regional accrediting agency.

1. The graduate course work shall have included study in the nine core areas of:

- a. Professional identity, function and ethics;
- b. Theories of counseling and psychotherapy;
- c. Counseling and psychotherapy techniques;
- d. Group dynamics, theories, and techniques;
- e. Theories of human behavior, learning, and personality;
- f. Career development;
- g. Evaluation and appraisal procedures;
- h. Abnormal behavior; and
- i. Supervised practicum or internship.

2. One course may satisfy study in more than one of the nine study areas required in paragraph 1 of this subsection.

B. Supervised experience.

1. The applicant.

The applicant for licensure shall have completed 4,000 hours of post-graduate degree experience in counseling practice under supervision satisfactory to the board.

a. The experience shall include 200 hours of individual supervision during the 4,000 hours, with a minimum of one hour per week of face-to-face consultation between supervisor and applicant.

b. Group supervision will be acceptable for not more than 100 hours of the required 200 hours of individual supervision on the basis of two hours of group supervision being equivalent to one hour of individual supervision.

c. A post-graduate degree practicum or internship may count for up to 2,000 hours of the required 4,000 hours of experience.

[d. For applicants enrolled in an integrated course of study in an accredited institution leading to a graduate degree beyond the Master's level, supervised experience may begin after the completion of 30 graduate semester hours or 45 graduate quarter hours, including a practicum.]

2. The supervisor.

A person who provides supervision for a prospective applicant for licensure as a professional counselor shall be licensed as a professional counselor, psychologist, school psychologist, clinical psychologist, clinical social worker, or psychiatrist.

a. Supervision by relatives of a prospective applicant will not be approved.

b. The supervisor of a prospective applicant shall assume full responsibility for the clinical activities of that prospective applicant specified within the supervisory contract for the duration of the supervised experience.

3. Registration of supervision.

a. Applicants who render counseling services in a nonexempt agency shall:

(1) With their supervisor, register with the board their supervisory contract on the appropriate forms for board approval before starting to practice under supervision;

(2) Have submitted directly to the board an official transcript of their relevant coursework in counseling; and

(3) Pay the registration fee prescribed by the board in § 1.2 of these regulations.

b. Applicants who render counseling services in an exempt agency, as defined in § 54-944 of the Code of Virginia, may register their supervision with the board, as outlined above. Board approval and successful completion of a planned supervision

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arrangement in an exempt setting will assure its acceptability at the time of application.

4. Documentation of supervision.

Applicants shall document successful completion of their supervised experience on appropriate forms at the time of application.

§ 2.3. Requirements for provisional license.

Every applicant for a provisional license shall:

1. Hold a doctorate in counseling or in a counseling-related field from a college or university accredited by a regional accrediting agency;

2. Have the institution that awarded the doctorate send directly to the executive director of the board official documentation of the award of the degree required in § 2.3.1; and

3. Have completed either:

a. The graduate course work in nine specified core areas prescribed in § 2.2 A; or

b. The supervised experience prescribed in § 2.2 B; and

4. Provide documentation of the fulfillment of § 2.3.3.a or § 2.3.3.b immediately preceding, whichever is applicable, as follows:

a. If alternative § 2.3.3.a (core area studies) is applicable, have the institution(s) where the applicant completed the graduate work in the required core areas send directly to the executive director of the board the official transcripts documenting the applicant's completion of the required core area studies; or

b. If alternative § 2.3.3.b (supervised experience) is applicable, include documentation of the completion of the required supervised experience as part of the applicant's own application package as prescribed in § 2.3.5; and

5. Submit to the executive director of the board:

a. A completed application, on forms provided by the board;

b. Documentation of having fulfilled the supervised experience requirements of § 2.2 B, if applicable;

c. Endorsement letters from three responsible persons attesting to the applicant's character and professional integrity; and

d. The provisional license fee prescribed in § 1.2 of

these regulations; and

6. Submit for board approval the board's form for registering a supervisory contract with a licensed professional counselor, psychologist, school psychologist, clinical psychologist, clinical social worker, or psychiatrist, under whose supervision the provisional licensee will practice for the duration of the provisional license.

PART III. EXAMINATIONS.

§ 3.1. General examination requirements.

A. Every applicant for initial licensure by the board as a professional counselor shall take a written examination and an oral examination as prescribed by the board.

B. The board may waive examination requirements if the applicant for licensure has been certified or licensed in another jurisdiction by standards and procedures equivalent to the board's.

C. Examination schedules.

A written and an oral examination will be given at least twice each year. The board may schedule such additional examinations as it deems necessary.

1. The executive director of the board shall notify all candidates in writing of the time and place of the examinations for which they have been approved to sit.

2. The candidate shall submit the applicable fees and a case study as prescribed in § 3.3 C.

3. If the candidate fails to appear for the examination without providing written notice at least one week before the examinations, the examination fee shall be forfeited.

4. The executive director will notify all candidates in writing of their success or failure on any examinations.

D. Deferrals by candidate; time limit.

A candidate approved by the board to sit for an examination shall take that examination within two years from the date of such initial board approval. If the candidate has not taken the examination by the end of the two year period here prescribed:

1. The initial board approval to sit for such examination shall then become invalid; and

2. In order to be considered for such examination later, the applicant shall file a complete new application with the board.

§ 3.2. Written examination.

A. The written examination will be a competency-based validated examination and will cover the core areas of counseling.

B. The board will establish passing scores on the written examination.

§ 3.3. Oral examination.

A. Successful completion of the written examination requirement shall be a prerequisite to taking the oral examination.

B. Candidates who pass the written examination will be notified by the board of the time and place of the oral examination and will be instructed to submit a case study.

C. The case study shall be a report of a case performed in the candidate's counseling practice during the last six months and shall be prepared as follows:

1. The report shall be not less than six or more than eight double-spaced typewritten pages in length. The names of persons in the study shall be disguised to protect clients' identities. The name and address of the candidate shall appear on a cover page.

2. The report shall be a brief summary of biographical data, personal social history, and any relevant medical history of a client, presenting the problem, diagnosis, treatment plan and prognosis. The report should focus on the candidate's role in facilitating [~~movement~~ the change process], including theoretical position, dialogue and tools and techniques used in the treatment plan.

D. The oral examination shall consist of an interview between the board or its designees and the candidate for the purpose of:

1. Reviewing the candidate's education, training and experience;

2. Evaluating the candidate's professional, emotional, and social maturity; the extent and nature of professional identity; and application of Standards of Practice as defined in § 6.1 of these regulations;

3. Assessing the candidate's case study; and

4. Evaluating the candidate's knowledge of and competency to engage in the practice of counseling.

E. Following the oral examination, the examination committee will make a recommendation to the board. A majority decision of the board will determine whether the candidate has passed the oral examination.

§ 3.4. Reexamination.

A. Reexamination will be required only on the examination failed.

B. After paying the reexamination fee, a candidate may be reexamined within an 18-month period without filing a new application and without presenting evidence of additional education and experience.

C. To be reexamined, a candidate shall notify the board and pay the appropriate fee no less than 60 days before a scheduled examination.

D. A candidate who fails any examination two times shall reapply and submit documentation of additional education and experience as required by the board.

PART IV. LICENSURE RENEWAL; REINSTATEMENT; NAME CHANGE.

§ 4.1. Annual renewal of licensure.

All licensees shall renew licenses on or before June 30 of each year.

A. Every license holder who intends to continue to practice shall submit to the executive director on or before June 30 of each year:

1. A completed application for renewal of the license; and

2. The renewal fee prescribed in § 1.2.

B. Failure to receive a renewal notice from the board shall not relieve the license holder from the renewal requirement.

§ 4.2. Late renewal; reinstatement.

A. A person whose license has expired may renew it within four years after its expiration date by paying the penalty fee prescribed in § 1.2 as well as the license fee prescribed for each year the license was not renewed.

B. A person who fails to renew a license for four years or more and wishes to resume practice shall:

1. Pay the oral examination fee prescribed in § 1.2;

2. Take an oral examination; and

3. Upon approval for reinstatement, pay the penalty fee prescribed in § 1.2 and the license fee prescribed for each year the license was not renewed.

§ 4.3. Duration of provisional license and renewal.

A. A provisional license shall expire six months from

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the date it is issued.

B. A provisional licensee may request in writing a maximum of two renewals of a provisional license. The renewal fee prescribed in § 1.2 shall be paid if the request for renewal is granted.

§ 4.4. Legal name change.

A. An individual practicing under a license issued by the board shall ensure that the current license bears the current legal name of that individual.

B. A licensee whose name is changed by marriage or court order shall promptly:

1. Notify the board of such change and provide a copy of the legal paper documenting the change.
2. Pay the "name change" fee prescribed in § 1.2.
3. Request and obtain from the board a new license bearing the individual's new legal name.

PART V. ADVISORY COMMITTEES.

§ 5.1. Advisory committees.

A. The board may establish examining and advisory committees to assist it in evaluating candidates for licensure.

B. The board may establish an advisory committee to evaluate the mental and emotional competence of any licensee or candidate for licensure when such competence is in issue before the board.

PART VI. STANDARDS OF PRACTICE. UNPROFESSIONAL CONDUCT; DISCIPLINARY ACTIONS; REINSTATEMENT.

§ 6.1. Standards of practice.

A. The protection of the public health, safety, and welfare and the best interest of the public shall be the primary guide in determining the appropriate professional conduct of all persons whose activities are regulated by the board.

B. Persons licensed by the board shall:

1. Practice in a manner that is in the best interest of the public and does not endanger the public health, safety, or welfare.
2. Be able to justify all service rendered to clients as necessary for diagnostic or therapeutic purposes.
3. Practice only within the competency areas for

which they are qualified by training or experience.

4. Report to the board known or suspected violations of the laws and regulations governing the practice of professional counselors.

5. Use only those educational credentials in association with their licensure and practice as a professional counselor that have been earned at a college or university accredited by a regional accrediting agency and that are counseling in nature. Those credentials include the title "Doctor" as well as academic designations following one's name such as M. Ed. and Ph.D.

6. Use only indicators of current counseling-related credentials awarded by independent credentialing agencies (such as American Association of Marriage and Family Therapists, Certified Rehabilitation Counselors, Certified Clinical Mental Health Counselors) in association with their licensure and practice as professional counselors.

7. Neither accept nor give commissions, rebates, or other forms of remuneration for referral of clients for professional services.

8. Ensure that clients are aware of fees and billing arrangements before rendering services.

9. Keep confidential their counseling relationships with clients, with the following exceptions: (i) when the client is in danger to self or others; and (ii) when the professional counselor is under court order to disclose information.

10. Disclose counseling records to others only with the expressed consent of the client.

11. Ensure that the welfare of clients is in no way compromised in any experimentation or research involving those clients.

12. Not engage in dual relationships with clients that might compromise the client's well-being or impair the counselor's objectivity and professional judgment (to include such activities as counseling close friends or relatives, engaging in sexual intimacies with a client).

13. When advertising their services to the public, ensure that such advertising is neither fraudulent nor misleading.

§ 6.2. Grounds for revocation, suspension, or denial of renewal of license.

A. In accordance with § 54-929(g) of the Code of Virginia, the board may, after a hearing, revoke, suspend or decline to renew a board license for just cause.

B. Action by the board to revoke, suspend or decline to

renew a license shall be taken in accord with the following:

- 1. Conviction of a felony or misdemeanor involving moral turpitude.*
- 2. Procuring of license by fraud or misrepresentation.*
- 3. Conducting one's practice in such a manner as to make it a danger to the health and welfare of one's clients or to the public, or if one is unable to practice counseling with reasonable skill and safety to clients by reason of illness, drunkenness, excessive use of drugs, narcotics, chemicals, or condition.*
- 4. Negligence in professional conduct or nonconformance with the Standards of Practice (§ 6.1 B of these regulations).*
- 5. Performance of functions outside the demonstrable areas of competency.*
- 7. Violation of or aid to another in violating any provision of Chapter 28 of Title 54 of the Code of Virginia, any other statute applicable to the practice of professional counseling, or any provision of these regulations.*

C. Petition for rehearing.

A petition may be made to the board for reinstatement upon good cause shown or as a result of substantial new evidence having been obtained that would alter the determination reached in subsection B of this section.

§ 6.3. Reinstatement following disciplinary action.

A. Any person whose license has been revoked or denied renewal by the board under the provisions of § 6.2 may, two years subsequent to such board action, submit a new application to the board for licensure.

B. The board in its discretion may, after a hearing, grant the reinstatement sought in subsection A of this section.

C. The applicant for such reinstatement, if approved, shall be licensed upon payment of the appropriate fees applicable at the time of reinstatement.

STATE CORPORATION COMMISSION

STATE CORPORATION COMMISSION

Bureau of Financial Institutions

May 13, 1988

TO: All Mortgage Lenders and Mortgage Brokers Required to be Licensed Under the Mortgage Lender and Broker Act.

NOTICE OF PROPOSED REGULATION

Pursuant to Virginia Code § 6.1-421, the State Corporation Commission proposes to adopt a regulation to effect the purposes of The Mortgage Lender and Broker Act. A copy of the proposed regulation is attached.

Every mortgage lender and mortgage broker required to be licensed under the Act who desires to comment in favor of, or in opposition to, the proposed regulation, may submit comments in writing to the Commissioner of Financial Institutions, at the above address on or before June 17, 1988.

Every mortgage lender and mortgage broker required to be licensed under the Act who desires to be heard on the proposed regulation shall submit a written request for such hearing, together with a statement of reasons why their position cannot be expressed adequately in writing, to the Commissioner of Financial Institutions at the above address on or before June 17, 1988.

* * *

Title 6.1, Chapter 16 - Mortgage Lender and Broker Act

Authority: § 6.1-421, Chapter 16, Title 6.1, Code of Virginia.

I. Definitions:

As used in this regulation, unless the context requires otherwise.

1. The terms "mortgage lender," "mortgage broker" and "mortgage loan shall have the meaning ascribed to them in § 6.1-409 of the Code of Virginia.

2. The term "commitment" means a written offer to make a mortgage loan at a specified rate and points signed by a mortgage lender, or by another person authorized to sign such instruments on behalf of a mortgage lender.

3. The term "lock-in agreement" means the signed acceptance of an offer to make a mortgage loan at a specified rate of interest and points.

4. The term "lock-in fees" means points or other fees or discounts accepted by a mortgage lender or a mortgage broker for transmittal to a mortgage lender as consideration for making a lock-in agreement.

5. The term "points" means any fee or charge stated or calculated as a percentage or fraction of the principal amount of a loan, other than or in addition to interest, appraisal fees and fees for credit reports.

II. Operating Rules:

A licensee shall conduct its business in accordance with the following rules:

1. Every licensee shall be able to inform, and shall inform all applicants for loans of the qualification requirements for the mortgage loans available from or through that licensee. No licensee, its agents or employees shall make any promise or guarantee of any interest rate, points or other terms of the mortgage loan, if such interest rate, points, or other terms are conditioned or depend on some subsequent event.

2. No licensee shall misrepresent or conceal material loan terms or make false promises to induce an applicant to apply for or accept a mortgage loan. A material term shall mean any aspect of a loan upon which an applicant may rely and be influenced or persuaded to take some specific action.

3. All moneys received from an applicant by a licensee for payment to third parties, including, but not limited to, appraisal fees and credit report fees, shall be kept in accounts segregated from other accounts of the licensee. Such funds shall be disbursed to such third parties only upon adequately documented receipt of the services for which such fees were collected.

4. Upon the sale or transfer by a licensee of a mortgage loan or the servicing rights thereunder, the seller or transferor shall, not more than seven days after the sale or transfer, mail to the mortgagor, at the address shown in the licensee's records, a written notice setting forth the name, address, and phone number of the purchaser.

The mortgagor shall be entitled to continue to make payments to the seller or transferor until receipt of notice of the sale, and it shall be the duty of the seller or transferor to forward to the purchaser or transferee any payments received or mailed prior to the date set out in the notice of sale.

5. No advertisement or other solicitation by a person acting as a mortgage broker shall contain language which states or implies that such person makes mortgage loans.

III. Commitments:

1. A commitment shall be in writing, signed by the licensee, and shall include the following:

- (a) Identification of the property; product for which the commitment was issued.
- (b) Principal amount and term of the loan;
- (c) The initial (or fixed) interest rate and points;
- (d) The initial monthly payment of principal and interest;
- (e) Commitment fees and/or lock-in fees;
- (f) If the rate is adjustable, the index and margin, or the method, by which an interest rate change will be calculated, and any caps applicable thereto;
- (g) The existence of a balloon payment, if applicable;
- (h) Whether or not funds are to be escrowed and for what purpose;
- (i) Whether or not private mortgage insurance is required;
- (j) The length of the commitment (lock-in) period;
- (k) The consequence to the applicant of failing to close the loan within the lock-in period.
- (l) Whether or not the terms or conditions, including the rate of interest and points stated therein, will remain constant or are subject to change prior to or at closing.
- (m) If the terms are subject to change, the commitment (lock-in agreement) must clearly state the conditions under which the change will occur.
- (n) The points payable to mortgage broker(s) for mortgage brokerage services.

2. By the applicant's signed acceptance of the commitment, such commitment becomes a lock-in agreement, and, subject to the terms set forth therein, obligates the mortgage lender for a specified period to make a mortgage loan at a specified rate and a specified number of points.

3. The length of the lock-in period must be a time period within which the lender can reasonably expect to close the loan given the prevailing market conditions at the time of the lock-in.

A commitment fee and any points accepted by a mortgage lender or broker prior to closing must be refunded in full if an applicant who has provided complete and correct information as required by the application form is rejected as not creditworthy.

All commitment fees accepted must be refunded in full if the property appraisal is not favorable for the

GOVERNOR

CHILD DAY-CARE COUNCIL

Title of Regulation: **VR 175-01-01. Public Participation Guidelines.**

Governor's Comment:

I concur with the substance of these regulations.

/s/ Gerald L. Baliles
May 9, 1988

GENERAL NOTICES/ERRATA

Symbol Key †

† Indicates entries since last publication of the Virginia Register

STATE BOARD OF ACCOUNTANCY

† Notice of Intended Regulatory Action

Notice is hereby given in accordance with this agency's public participation guidelines that the State Board of Accountancy intends to consider promulgating, amending, and repealing regulations entitled: **State Board of Accountancy Rules and Regulations**. The purpose of the proposed action is to solicit public comment on all existing regulations as to the effectiveness, efficiency, necessity, clarity and cost of compliance with the Public Participation Guidelines.

Statutory Authority: § 54-1.28(5) of the Code of Virginia.

Written comments may be submitted until July 8, 1988.

Contact: Roberta L. Banning, Assistant Director, Department of Commerce, State Board of Accountancy, 3600 W. Broad St., Richmond, Va. 23230-4917, telephone (804) 367-8590 or toll-free 1-800-552-3016 (VA only)

DEPARTMENT FOR THE AGING

Notice of Intended Regulatory Action

Notice is hereby given in accordance with this agency's public participation guidelines that the Department for the Aging intends to consider promulgating regulations entitled: **Area Agencies on Aging**. The purpose of the proposed regulation is to set forth the methods for (i) designating a planning and service area and an area agency on aging and (ii) suspending or terminating the designation of an area agency on aging.

Statutory Authority: § 2.1-373 A.7 of the Code of Virginia.

Written comments may be submitted until July 20, 1988.

Contact: J. James Cotter, Director, Division of Program Development and Management, Virginia Department for the Aging, 101 N. 14th St., 18th Fl., Richmond, Va. 23219-2797, telephone (804) 225-2271 or SCATS 225-2271

Notice of Intended Regulatory Action

Notice is hereby given in accordance with this agency's public participation guidelines that the Department of Aging intends to consider promulgating regulations entitled: **Area Plans for Aging Services**. The purpose of the proposed regulation is to regulate the process by which an

Area Agency on Aging develops and implements its Area Plan for Aging Services.

Statutory Authority: § 2.1-373 A.7 of the Code of Virginia.

Written comments may be submitted until July 20, 1988.

Contact: J. James Cotter, Director, Division of Program Development and Management, Virginia Department for the Aging, 101 N. 14th St., 18th Fl., Richmond, Va. 23219-2797, telephone (804) 225-2271 or SCATS 225-2271

Notice of Intended Regulatory Action

Notice is hereby given in accordance with this agency's public participation guidelines that the Department for the Aging intends to consider promulgating regulations entitled: **Financial Management Policies Applicable to Area Agencies on Aging**. The purpose of the proposed regulation is to provide policies and standards for an Area Agency on Aging in the administration of federal and state grants to provide supportive and nutrition services to older persons.

Statutory Authority: § 2.1-373 A.7 of the Code of Virginia.

Written comments may be submitted until July 20, 1988.

Contact: J. James Cotter, Director, Division of Program Development and Management, Virginia Department for the Aging, 101 N. 14th St., 18th Fl., Richmond, Va. 23219-2797, telephone (804) 225-2271 or SCATS 225-2271

Notice of Intended Regulatory Action

Notice is hereby given in accordance with this agency's public participation guidelines that the Department for the Aging intends to consider promulgating regulations entitled: **Hearings**. The purpose of the proposed regulation is to describe the hearing procedures of the Department for the Aging.

Statutory Authority: § 2.1-373 A.7 of the Code of Virginia.

Written comments may be submitted until July 20, 1988.

Contact: J. James Cotter, Director, Division of Program Development and Management, Virginia Department for the Aging, 101 N. 14th St., 18th Fl., Richmond, Va. 23219-2797, telephone (804) 225-2271 or SCATS 225-2271

Notice of Intended Regulatory Action

Notice is hereby given in accordance with this agency's

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public participation guidelines that the Department of Aging intends to consider promulgating regulations entitled: **Long-Term Care Ombudsman Program**. The purpose of the proposed regulations is to describe the policies by which the Department for the Aging establishes and operates the Office of the State Long-Term Care Ombudsman and designates and supervises an area or local ombudsman entity.

Statutory Authority: § 2.1-373 A.7 of the Code of Virginia.

Written comments may be submitted until July 20, 1988.

Contact: J. James Cotter, Director, Division of Program Development and Management, Virginia Department for the Aging, 101 N. 14th St., 18th Fl., Richmond, Va. 23219-2797, telephone (804) 225-2271 or SCATS 225-2271

STATE AIR POLLUTION CONTROL BOARD

Notice of Intended Regulatory Action

Notice is hereby given in accordance with this agency's public participation guidelines that the State Air Pollution Control Board intends to consider promulgating regulations entitled: **VR 120-100. Regulations for the Inspection of Motor Vehicle Emissions**. The purpose of the proposed regulation is to ensure that the authorized emissions inspection stations perform the inspections in such a manner that motor vehicles subject to the emissions standards are in compliance. A public meeting will be held on June 15, 1988, at 7 p.m. at the George Mason University Metro Campus Professional Center, Room 318, 3401 North Fairfax Drive, Arlington, Virginia 22201, to receive input on the development of the proposed regulation.

Statutory Authority: § 46.1-326.6 of the Code of Virginia.

Written comments may be submitted until June 15, 1988, to Director of Program Development, State Air Pollution Control Board, P. O. Box 10089, Richmond, Virginia 23240.

Contact: M. E. Lester, Program and Policy Analyst, Division of Program Development, State Air Pollution Control Board, P. O. Box 10089, Richmond, Va. 23240, telephone (804) 786-7564 or SCATS 786-7564

DEPARTMENT OF EDUCATION (STATE BOARD OF)

Notice of Intended Regulatory Action

Notice is hereby given in accordance with this agency's public participation guidelines that the Department of Education intends to consider amending regulations entitled: **Classification of Expenditure**. The purpose of the proposed regulation is to revise and reduce the number of existing 13 classifications of expenditures to five. As a result of the revised classification of expenditures, it will

be necessary to modify the expenditures on the Annual School Report. This is in accordance with § 22.1-115 of the Code of Virginia which requires that the State Board of Education, in conjunction with the Auditor of Public Accounts, establish a modern system of accounting for all school divisions.

Statutory Authority: §§ 22.1-16 and 22.1-92 of the Code of Virginia.

Written comments may be submitted until July 22, 1988.

Contact: Robert L. Aylor, Director of Accounting and Finance, Department of Education, P. O. Box 6Q, Richmond, Va. 23216-2060, telephone (804) 225-2040 or SCATS 225-2040

VIRGINIA FIRE SERVICES BOARD

† Notice of Intended Regulatory Action

Notice is hereby given in accordance with this agency's public participation guidelines that the Virginia Fire Services Board intends to consider promulgating regulations entitled: **Regulations Governing the Certification of Instructors Providing Training at Local Fire Training Facilities**. The purpose of the proposed action is to regulate the qualifications of individuals providing fire related training at local fire training facilities constructed, improved or expanded using Fire Programs Fund.

Statutory Authority: § 38.2-401 of the Code of Virginia.

Written comments may be submitted until August 1, 1988.

Contact: Carl N. Cimino, Executive Director, James Monroe Bldg., 101 N. 14th St., 17th Floor, Richmond, Va. 23219, telephone (804) 225-2681 or SCATS 225-2681

DEPARTMENT OF HEALTH (STATE BOARD OF)

Notice of Intended Regulatory Action

Notice is hereby given in accordance with this agency's public participation guidelines that the Department of Health intends to consider promulgating regulations entitled: **Fee Schedule - X-Ray Protection Program**. The purpose of the proposed action is to establish fee schedules for registration of x-ray machines and inspections of x-ray machines by Department of Health personnel; however, no fee shall be charged for inspection initiated by the Health Department.

Statutory Authority: §§ 32.1-229, 32.1-229.1 and 32.1-229.2 of the Code of Virginia.

Written comments may be submitted until June 23, 1988.

Contact: Leslie P. Foldesi, Radiation Safety Specialist, Bureau of Radiological Health, Room 915, 109 Governor St., Richmond, Va. 23219, telephone (804) 786-5932 or toll-free 1-800-468-0138

Division of Licensure and Certifications

Notice of Intended Regulatory Action

Notice is hereby given in accordance with this agency's public participation guidelines that the Department of Health intends to consider promulgating regulations entitled: **Rules and Regulations for the Licensing of Home Health Agencies and Rules and Regulations for the Licensing of Hospice**. The purpose of the proposed action is to implement and enforce provisions of Article 7 and Article 7.1, Chapter 5, Title 32.1 of the Code requiring the inspection and licensing of home health agencies and hospice.

Home health agencies licensing will affect those agencies that are not certified providers in the Medicare or Medicaid programs.

Statutory Authority: §§ 32.1-162.12 and 32.1-162.5 of the Code of Virginia.

Written comments may be submitted until June 16, 1988, to the Virginia Department of Health, Division of Licensure and Certification, 109 Governor Street, Richmond, Virginia 23219.

Contact: Mary V. Francis, Director, Division of Licensure and Certification, Department of Health, 109 Governor St., Richmond, Va. 23219, telephone (804) 786-2081 or SCATS 786-2081

Notice of Intended Regulatory Action

Notice is hereby given in accordance with this agency's public participation guidelines that the Department of Health intends to consider amending regulations entitled: **Rules and Regulations for the Licensure of Nursing Homes in Virginia**. The purpose of the proposed action is to (i) consider revisions required to avoid conflicts with federal regulations; (ii) reorganize the regulations into logical subject topics; and (iii) clarify language.

Statutory Authority: §§ 32.1-12 and 32.1-127 of the Code of Virginia.

Written comments may be submitted until June 15, 1988, to Mary V. Francis, Director, Division of Licensure and Certification, Department of Health, James Madison Building, 109 Governor Street, Room 1013, Richmond, Virginia 23219, telephone (804) 786-2081.

Contact: R. W. Harding, Assistant Director, Long Term Care, Division of Licensure and Certification, Department of Health, 109 Governor St., James Madison Bldg., Room 1013, Richmond, Va. 23219, telephone (804) 225-3733 or

SCATS 225-3733

BOARD OF HOUSING AND COMMUNITY DEVELOPMENT

Notice of Intended Regulatory Action

Notice is hereby given in accordance with this agency's public participation guidelines that the Board of Housing and Community Development intends to consider amending regulations entitled: **VR 394-01-1. Public Participation Guidelines for Formation, Promulgation and Adoption of Regulations/1985 Edition**. The purpose of the proposed action is to allow for comments from the general public prior to the completion of a final draft of proposed regulations.

Statutory Authority: § 9-6.14:7 of the Code of Virginia.

Written comments may be submitted until June 20, 1988.

Contact: Jack A. Proctor, CPCA, Deputy Director, BRS, Department of Housing and Community Development, 205 N. Fourth St., Richmond, Va. 23219, telephone (804) 786-4752 or SCATS 786-4752

Notice of Intended Regulatory Action

Notice is hereby given in accordance with this agency's public participation guidelines that the Board of Housing and Community Development intends to consider amending regulations entitled: **VR 394-01-6. Virginia Statewide Fire Prevention Code/1987 Edition**. The purpose of the proposed action is to include regulations for the handling of explosives.

Statutory Authority: §§ 27-72 and 27-97 of the Code of Virginia.

Written comment may be submitted until June 20, 1988.

Contact: Jack A. Proctor, CPCA, Deputy Director, BRS, Department of Housing and Community Development, 205 N. Fourth St., Richmond, Va. 23219, telephone (804) 786-4752 or SCATS 786-4752

Notice of Intended Regulatory Action

Notice is hereby given in accordance with this agency's public participation guidelines that the Board of Housing and Community Development intends to consider amending regulations entitled: **VR 394-01-21. Virginia Uniform Statewide Building Code - Volume I New Construction Code/1987 Edition**. The purpose of the proposed action is to (i) update the barrier-free provisions for the physically handicapped and aged; (ii) require building security measures; (iii) provide adequate restroom facilities for women at places of public assembly; and (iv) restrict the type of construction of two-hour fire separation walls. Sections 512, 908, 910, Table P-1202.1 and the addition of a

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new section will be under consideration.

Statutory Authority: §§ 36-98 and 36-99 of the Code of Virginia.

Written comments may be submitted until June 20, 1988.

Contact: Jack A. Proctor, CPCA, Deputy Director, BRS, Department of Housing and Development, 205 N. Fourth St., Richmond, Va. 23219, telephone (804) 786-4752 or SCATS 786-4752

DEPARTMENT OF MEDICAL ASSISTANCE SERVICES (BOARD OF)

† Notice of Intended Regulatory Action

Notice is hereby given in accordance with this agency's public participation guidelines that the Department of Medical Assistance Services intends to consider amending regulations entitled: **Exemption of Anticonvulsants from HCFA Upper Limits**. The purpose of the proposed amendment is to exempt the application of HCFA upper limits of payment to anticonvulsant drugs.

Statutory Authority: § 32.1-325 of the Code of Virginia.

Written comments may be submitted until June 20, 1988, to Mary Ann Johnson, Registered Pharmacist, Department of Medical Assistance Services, 600 East Broad Street, Suite 1300, Richmond, Virginia 23219.

Contact: Victoria P. Simmons, Regulatory Coordinator, Department of Medical Assistance Services, 600 E. Broad St., Suite 1300, Richmond, Va. 23219, telephone (804) 786-7933

† Notice of Intended Regulatory Action

Notice is hereby given in accordance with this agency's public participation guidelines that the Department of Medical Assistance Services intends to consider amending regulations entitled: **Phosphate Binders for Renal Dialysis Patients**. The purpose of the proposed amendment is to allow for coverage of nonlegend drugs prescribed as phosphate binders to treat end stage renal disease patients.

Statutory Authority: § 32.1-325 of the Code of Virginia.

Written comments may be submitted until June 20, 1988, to Mary Ann Johnson, Registered Pharmacist, Department of Medical Assistance Services, 600 East Broad Street, Suite 1300, Richmond, Virginia 23219.

Contact: Victoria P. Simmons, Regulatory Coordinator, Department of Medical Assistance Services, Suite 1300, Richmond, Va. 23219, telephone (804) 786-7933

† Notice of Intended Regulatory Action

Notice is hereby given in accordance with this agency's public participation guidelines that the Department of Medical Assistance Services intends to consider amending regulations entitled: **Post Eligibility Treatment of Income**. The purpose of the proposed amendment is to establish the state's rules in response to new federal options concerning post eligibility treatment of income.

Statutory Authority: § 32.1-325 of the Code of Virginia.

Written comments may be submitted until June 20, 1988, to Marsha Vandervall, Manager, Eligibility and Appeals, Department of Medical Assistance Services, 600 East Broad Street, Suite 1300, Richmond, Virginia 23219.

Contact: Victoria P. Simmons, Regulatory Coordinator, Department of Medical Assistance Services, 600 E. Broad St., Suite 1300, Richmond, Va. 23219, telephone (804) 786-7933

VIRGINIA STATE BOARD OF MEDICINE

Notice of Intended Regulatory Action

Notice is hereby given in accordance with this agency's public participation guidelines that the Board of Medicine intends to consider promulgating regulations entitled: **VR 465-04-1. Regulations Governing the Practice of Respiratory Therapy Practitioners**. The purpose of the proposed action is to establish the standards for the voluntary certification of respiratory therapy practitioners to practice in the Commonwealth of Virginia.

Statutory Authority: Title 54, Chapter 12, § 54-291 as further defined in §§ 54-281.10 through 54-281.13 of the Code of Virginia.

Written comments may be submitted until June 23, 1988.

Contact: Eugenia K. Dorson, Board Administrator, 1601 Rolling Hills Dr., Surry Bldg., 2nd Floor, Richmond, Va. 23229-5005, telephone (804) 662-9925

DEPARTMENT OF MINES, MINERALS AND ENERGY

† Notice of Intended Regulatory Action

Notice is hereby given in accordance with this agency's public participation guidelines that the Department of Mines, Minerals and Energy intends to consider amending regulations entitled: **VR 480-05-1.2. Safety and Health Regulations for Mineral Mining**. The purpose of the proposed amendment is to provide for the safety and health of persons working in surface and underground mineral (noncoal) mines.

Statutory Authority: §§ 45.1-33 and 45.1-104 of the Code of

Virginia.

Written comments may be submitted until July 6, 1988.

Contact: William O. Roller, Director, Division of Mineral Mining, P. O. Box 4499, Lynchburg, Va. 24502, telephone (804) 239-0602 or SCATS 228-2169

BOARD OF COMMISSIONERS TO EXAMINE PILOTS

Notice of Intended Regulatory Action

Notice is hereby given in accordance with this agency's public participation guidelines that the Board of Commissioners to Examine Pilots intends to consider promulgating, amending and repealing regulations entitled: **Regulations Governing Pilots**. The purpose of the proposed action is to conduct an informational proceeding thereby soliciting public comment on all existing regulations as to their effectiveness, efficiency, necessity, clarity and cost of compliance in accordance with the board's Public Participation Guidelines and to develop revisions to conform to Senate Bill No. 238 which becomes law on January 1, 1989.

Statutory Authority: § 54-529 of the Code of Virginia.

Written comments may be submitted until June 9, 1988.

Contact: Robert T. Hasler, Jr., President, Board of Commissioners to Examine Pilots, P. O. Box 359, Norfolk, Va. 23501, telephone (804) 625-3641

**DEPARTMENT OF TRANSPORTATION
(COMMONWEALTH TRANSPORTATION BOARD)**

† Notice of Intended Regulatory Action

Notice is hereby given in accordance with this agency's public participation guidelines that the Department of Transportation intends to consider promulgating regulations entitled: **VR 385-01-3. Rules and Regulations Governing Relocation Assistance**. The purpose of the proposed action is to (i) conform to the passage of the Surface Transportation and Uniform Assistance Act of 1987; and (ii) conform to the rules and regulations as printed in the INTERIM federal regulations issued by the Office of the Secretary of the Department of Transportation (federal) (12/17/87). The amendments to this existing regulation are brought about by changes in the federal law.

Statutory Authority: § 33.1-12(5) of the Code of Virginia.

Written comments may be submitted until August 1, 1988.

Contact: L.S. Hester, Right of Way Manager, Department of Transportation, 1401 E. Broad St., 5th Floor, Richmond, Va. 23219, telephone (804) 786-4366 or SCATS 786-4366

Notice of Intended Regulatory Action

Notice is hereby given in accordance with this agency's public participation guidelines that the Department of Transportation intends to consider promulgating regulations entitled: **Subdivision Street Requirements**. The purpose of the proposed regulations is to provide a reference source of the Department of Transportation's requirements for the acceptance of subdivision streets into the Secondary System of State Highways.

Statutory Authority: §§ 33.1-12, 33.1-69 and 33.1-229 of the Code of Virginia.

Written comments may be submitted until August 31, 1988, to Gerald E. Fisher, State Secondary Roads Engineer, Department of Transportation, 1401 East Broad Street, Richmond, Virginia 23219.

Contact: D. L. Camper, Assistant Secondary Roads Engineer, Department of Transportation, 1401 E. Broad St., Richmond, Va. 23219, telephone (804) 786-2745 or SCATS 786-2745

STATE WATER CONTROL BOARD

† Notice of Intended Regulatory Action

Notice is hereby given in accordance with this agency's public participation guidelines that the State Water Control Board intends to consider amending regulations entitled: **VR 680-16-03. Upper James River Basin Water Quality Management Plan**. The purpose of the proposed regulations is to update that portion of the Upper James River Basin Water Quality Management Plan and the Fifth Planning District Commission 208 Areawide Waste Treatment Management Plan for the areas of the Fifth and Sixth Planning Districts that are in the Upper James - Jackson River Subarea.

Section 62.1-44.15(3) of the Code of Virginia authorizes the State Water Control Board to establish Water Quality Standards and Policies for any state waters consistent with the purpose and general policy of the State Water Control Law, and modify, amend, or cancel any such established standards or policies.

Section 62.1-44.15(13) of the Code of Virginia authorizes the establishment of policies and programs for area and basin wide water quality control and management.

The Upper James-Jackson River Subarea Water Quality Management Plan provides a management tool to assist the Commonwealth, units of local government, industrial firms and agricultural interests in achieving and maintaining water quality goals.

Issuance of NPDES Permits to dischargers requires that the issued permit be in compliance with the appropriate area of basin wide plan. The plan can thus impose

General Notices/Errata

requirements upon the discharger(s) in these instances.

There are approximately 65,000 persons residing in the Subarea and 43 issued NPDES permits. No financial impact to the regulated community is anticipated.

Statutory Authority: § 62.1-44.15 of the Code of Virginia.

Written comments may be submitted until June 17, 1988.

Contact: Wellford S. Estes, Regional Services Supervisor, West Central Regional Office, State Water Control Board, P. O. Box 7017, Roanoke, Va. 24019, telephone (703) 982-7432 or SCATS 676-7432

GENERAL NOTICES

NOTICES TO STATE AGENCIES

RE: Forms for filing material on dates for publication in the Virginia Register of Regulations.

All agencies are required to use the appropriate forms when furnishing material and dates for publication in the Virginia Register of Regulations. The forms are supplied by the office of the Registrar of Regulations. If you do not have any forms or you need additional forms, please contact: Jane Chaffin, Virginia Code Commission, P.O. Box 3-AG, Richmond, Va. 23208, telephone (804) 786-3591.

FORMS:

NOTICE OF INTENDED REGULATORY ACTION - RR01
NOTICE OF COMMENT PERIOD - RR02
PROPOSED (Transmittal Sheet) - RR03
FINAL (Transmittal Sheet) - RR04
EMERGENCY (Transmittal Sheet) - RR05
NOTICE OF MEETING - RR06
AGENCY RESPONSE TO LEGISLATIVE OR GUBERNATORIAL OBJECTIONS - RR08
DEPARTMENT OF PLANNING AND BUDGET (Transmittal Sheet) - DPBRR09

Copies of the 1987 Virginia Register Form, Style and Procedure Manual may also be obtained from Jane Chaffin at the above address.

CALENDAR OF EVENTS

Symbols Key

- † Indicates entries since last publication of the Virginia Register
- ☒ Location accessible to handicapped
- ☎ Telecommunications Device for Deaf (TDD)/Voice Designation

NOTICE

Only those meetings which are filed with the Registrar of Regulations by the filing deadline noted at the beginning of this publication are listed. Since some meetings are called on short notice, please be aware that this listing of meetings may be incomplete. Also, all meetings are subject to cancellation and the Virginia Register deadline may preclude a notice of such cancellation.

For additional information on open meetings and public hearings held by the Standing Committees of the Legislature during the interim, please call Legislative Information at (804) 786-6530.

VIRGINIA CODE COMMISSION

EXECUTIVE

BOARD OF AGRICULTURE AND CONSUMER SERVICES

Virginia Winegrowers Advisory Board

July 11, 1988 - 10 a.m. – Open Meeting
State Capitol, Capitol Square, House Room 1, Richmond, Virginia. ☒

Annual meeting and review of project proposals.

Contact: Annette C. Ringwood, Secretary to Virginia Winegrowers Advisory Board, Department of Agriculture and Consumer Services, Wine Marketing Specialist, 1100 Bank St., Product Promotion, Room 703, Richmond, Va. 23219, telephone (804) 786-0481

DEPARTMENT OF AGRICULTURE AND CONSUMER SERVICES (BOARD OF) AND THE DEPARTMENT OF FORESTRY (BOARD OF)

July 15, 1988 - 1:30 p.m. – Public Hearing
University of Virginia Law School, North Campus, Room 111, Arlington Boulevard, Charlottesville, Virginia.

Notice is hereby given in accordance with § 9-6.14:7.1 of the Code of Virginia that the Department of Agriculture and Consumer Services and the Department of Forestry intend to amend regulations entitled: **VR 115-01-02. Standards for Classification of Real Estate as Devoted to Agricultural Use and to Horticultural Use Under the Virginia Land Use Assessment Law Entitled: Special Assessments for**

Agricultural, Horticultural, Forest or Open Space; and VR 312-01-02. Standards for Classification of Real Estate as Devoted to Forest Use Under the Virginia Land Use Assessment Law Entitled: Special Assessments for Agricultural, Horticultural, Forest or Open Space. These amendments provide for standards of classification of real estate as devoted to forest use, agricultural use and horticultural use under the Virginia Land Use Assessment Law.

Statutory Authority: § 58.1-3240 of the Code of Virginia.

Written comments to VR 115-01-02 may be submitted until July 22, 1988, to S. Mason Carbarugh, Commissioner of Agriculture and Consumer Services, P.O. Box 1163, Richmond, Va. 23209.

Written comments to VR 312-01-02 may be submitted until July 22, 1988, to James W. Garner, State Forester, P.O. Box 3758, Charlottesville, Va. 22903.

Contact: (VR 115-01-02) T. Graham Copeland, Jr., Director, Policy Analysis and Development, Department of Agriculture and Consumer Services, P.O. Box 1163, Richmond, Va. 23209, telephone (804) 786-3539. (VR 312-01-02) W. C. Stanley, Chief, Forest Management, Department of Forestry, P.O. Box 3758, Charlottesville, Va. 23903, telephone (804) 977-6555, SCATS 487-1230.

STATE AIR POLLUTION CONTROL BOARD

June 6, 1988 - 9 a.m. – Open Meeting
General Assembly Building, Capitol Square, Senate Room A, Richmond, Virginia

This is a general meeting of the board.

Contact: Richard Stone, Public Information Office, State Air Pollution Control Board, P.O. Box 10089, Richmond, Va. 23240, telephone (804) 786-5478, SCATS 786-5478

† **June 20, 1988 - 7:30 p.m.** – Open Meeting
† **June 20, 1988 - 8 p.m.** – Public Hearing
Patrick Henry Elementary School, 4643 Taney Avenue, Auditorium, Alexandria, Virginia. ☒ (Interpreter for deaf provided if requested)

A meeting to hear public testimony regarding proposed amendments to the State Air Pollution Control Board permit issued to Ogden Martin Systems of Alexandria/Arlington, Incorporated for operation of a municipal solid waste incinerator located at 5301 Eisenhower Avenue, Alexandria, Virginia.

Calendar of Events

Contact: L. Baumann, Acting Regional Director, SAPCB, Springfield Towers, 6320 Augusta Dr., Suite 502, Springfield, Va. 22150, telephone (703) 644-0311

ALCOHOLIC BEVERAGE CONTROL BOARD

† June 14, 1988 - 9:30 a.m. - Open Meeting
† June 28, 1988 - 9:30 a.m. - Open Meeting
† July 12, 1988 - 9:30 a.m. - Open Meeting
† July 26, 1988 - 9:30 a.m. - Open Meeting
† August 9, 1988 - 9:30 a.m. - Open Meeting
† August 23, 1988 - 9:30 a.m. - Open Meeting
2901 Hermitage Road, Richmond, Virginia. ☒

A meeting to receive and discuss reports and activities from staff members. Other matters not yet determined.

Contact: Robert N. Swinson, Secretary to the Board, 2901 Hermitage Rd., P. O. Box 27491, Richmond, Va. 23261, telephone (804) 367-0616 or SCATS 367-0616

VIRGINIA ATHLETIC BOARD

June 30, 1988 - 9 a.m. - Open Meeting
Travelers Building, 3600 West Broad Street, Room 580, Richmond, Virginia

A meeting to conduct biennium review of existing regulations.

Contact: Mr. C. Doug Beavers, Assistant Director, 3600 W. Broad St., Room 580, Richmond, Va. 23230, telephone (804) 367-8507, SCATS 367-8507

VIRGINIA AVIATION BOARD

† June 21, 1988 - 10 a.m. - Open Meeting
Richmond International Airport, Conference Room A, Richmond, Virginia. ☒

A meeting to discuss matters concerning aviation in Virginia.

Contact: Kenneth A. Rowe, 4508 S. Laburnum Ave., P. O. box 7716, Richmond, Va. 23231, telephone (804) 786-6284

VIRGINIA BOATING ADVISORY BOARD

July 14, 1988 - 10 a.m. - Open Meeting
State Capitol, House Room 1, Capitol Square, Richmond, Virginia. ☒

Discussion of and action on issues of interest to recreational boaters of Virginia.

Contact: Wayland W. Rennie, 8411 Patterson Ave.,

Richmond, Va. 23229, telephone (804) 740-7206

LOCAL EMERGENCY PLANNING COMMITTEE - CITY OF BRISTOL

† August 4, 1988 - 9 a.m. - Open Meeting
Bristol Fire Department Main Station, 211 Lee Street, Bristol, Virginia

This will be the first official meeting of this LEPC, as per SARA/Title III requirements.

Plans will include review of Bristol Emergency Plan upgrade, including Interstate 81 involvement.

The public is invited to attend.

Contact: Charles W. Denton, Fire Chief, Bristol Fire Department, 211 Lee St., Bristol, Va. 24201, telephone (703) 669-7155

LOCAL EMERGENCY PLANNING COMMITTEE OF CHESTERFIELD COUNTY

June 16, 1988 - 5:30 p.m. - Open Meeting
July 7, 1988 - 5:30 p.m. - Open Meeting
† July 21, 1988 - 5:30 p.m. - Open Meeting
† August 4, 1988 - 5:30 p.m. - Open Meeting
Chesterfield County Administration Building, 10001 Ironbridge Road, Room 502, Chesterfield, Virginia. ☒

A meeting to meet requirements of Superfund Amendment and Reauthorization Act of 1986.

Contact: Lynda G. Furr, Assistant Emergency Services Coordinator, Chesterfield Fire Department, P. O. Box 40, Chesterfield, Va. 23832, telephone (804) 748-1236

CHILD DAY-CARE COUNCIL

June 9, 1988 - 8:30 a.m. - Open Meeting
July 14, 1988 - 8:30 a.m. - Open Meeting
Koger Executive Center, West End, Blair Building, Conference Rooms A and B, 8007 Discovery Drive, Richmond, Virginia

The Child Day-Care Council will meet to discuss issues, concerns, and programs that impact licensed child care centers. The morning will consist of committees discussing ways to revise the standards and regulations of child care centers and then presenting the proposed changes to the full council for adoption prior to public comment.

Contact: Arlene Kasper, Program Development Supervisor, Department of Social Services, Division of Licensing, 8007 Discovery Dr., Richmond, Va. 23229-8699, telephone (804) 662-9025 or SCATS 662-9025

CONSORTIUM ON CHILD MENTAL HEALTH

† June 9, 1988 - 9 a.m. - Open Meeting
† July 6, 1988 - 9 a.m. - Open Meeting
† August 3, 1988 - 9 a.m. - Open Meeting
Eighth Street Office Building, 805 East Broad Street, 11th Floor Conference Room, Richmond, Virginia. ☒

A regular business meeting open to the public followed by an executive session, for purposes of confidentiality, to review applications for funding of services to individuals.

Contact: Wenda Singer, Planner, Virginia Department for Children, 805 E. Broad St., Richmond, Va. 23219, telephone (804) 786-2208 or SCATS 786-2208

INTERDEPARTMENTAL LICENSURE AND CERTIFICATION OF CHILDREN'S RESIDENTIAL FACILITIES

Coordinating Committee

June 10, 1988 - 8 a.m. - Open Meeting
Tyler Building, 1603 Santa Rosa Road, Suite 221, Richmond, Virginia. ☒

A regularly scheduled monthly meeting to discuss administrative and policy areas related to the Interdepartmental Licensure and Certification of Residential Facilities for Children.

Contact: John J. Allen, Jr., Coordinator, Office of the Coordinator, Interdepartmental Licensure and Certification, 8007 Discovery Dr., Richmond, Va. 23229-8699, telephone (804) 662-9025 or SCATS 662-9025

DEPARTMENT OF CONSERVATION AND HISTORIC RESOURCES

Falls of the James Advisory Committee

† June 17, 1988 - noon - Open Meeting
† July 15, 1988 - noon - Open Meeting
† August 19, 1988 - noon - Open Meeting
Richmond City Hall, 3rd Floor Conference Room, Richmond, Virginia

A regular meeting to discuss general business and issues affecting the portion of the James River that runs through the City of Richmond.

Goose Creek Scenic River Advisory Board

† July 14, 1988 - 2 p.m. - Open Meeting
Middleburg Community Center, Main Street, Middleburg, Virginia

A regular business meeting to discuss issues and

matters affecting the Goose Creek Scenic River.

Shenandoah Scenic River Advisory Board

† June 15, 1988 - 4 p.m. - Open Meeting
Clarke County Courthouse, Board of Supervisor's Room, Berryville, Virginia

A general meeting to discuss issues and matters related to the Shenandoah Scenic River.

Contact: Richard G. Gibbons, Department of Conservation and Historic Resources, Division of Parks and Recreation, 1201 Washington Bldg., Richmond, Va. 23219, telephone (804) 786-4132

STATE BOARD FOR CONTRACTORS

† June 21, 1988 - 10 a.m. - Open Meeting
† June 22, 1988 - 10 a.m. - Open Meeting
Floyd County Courthouse, East Main Street, Courtroom, Floyd, Virginia

The board will meet to conduct a formal administrative hearing: State Board for Contractors v. Chester A. Gallimore.

Contact: Sylvia W. Bryant, Hearings Coordinator, Department of Commerce, 3600 W. Broad St., Richmond, Va. 23230, telephone (804) 367-8524

DEPARTMENT OF CORRECTIONS (STATE BOARD OF)

† June 15, 1988 - 10 a.m. - Open Meeting
† July 13, 1988 - 10 a.m. - Open Meeting
Board of Corrections, 6900 Atmore Drive, Board Room #3053A, 3rd Floor, Richmond, Virginia

A regular monthly meeting to consider such matters as may be presented.

Contact: Vivian Toler, Secretary to the Board, 6900 Atmore Dr., Richmond, Va. 23225, telephone (804) 674-3235

* * * * *

June 28, 1988 - 7 p.m. - Public Hearing
Holiday Inn, Wytheville, Virginia

July 7, 1988 - 7 p.m. - Public Hearing
Omni Norfolk Hotel, Norfolk, Virginia

July 13, 1988 - 10 a.m. - Public Hearing
6900 Atmore Drive, 3rd Floor Board Room, Richmond, Virginia

Notice is hereby given in accordance with § 9-6.14:7.1 of the Code of Virginia that the Department of Corrections intends to adopt regulations entitled: VR

Calendar of Events

230-40-005. Minimum Standards for Virginia Delinquency Prevention and Youth Development Act Grant Programs. These proposed regulations set forth operating standards for Virginia Delinquency Prevention and Youth Development Act grant programs pertaining to program administration, services, personnel and fiscal management, staff training, and monitoring and evaluation.

Statutory Authority: §§ 53.1-5 and 53.1-253 of the Code of Virginia.

Written comments may be submitted until June 13, 1988.

Contact: Austen C. Micklem, Jr., Acting Chief of Operations for Programs, Division of Youth Services, Department of Corrections, P. O. Box 26963, Richmond, Va. 23261, telephone (804) 367-0130

* * * * *

June 28, 1988 - 7 p.m. – Public Hearing
Holiday Inn, Wytheville, Virginia

July 7, 1988 - 7 p.m. – Public Hearing
Omni Norfolk Hotel, Norfolk, Virginia

July 13, 1988 - 10 a.m. – Public Hearing
6900 Atmore Drive, 3rd Floor Board Room, Richmond, Virginia

Notice is hereby given in accordance with § 9-6.14:7.1 of the Code of Virginia that the Department of Corrections intends to adopt regulations entitled: **VR 230-40-006. Rules and Regulations Governing Applications for Virginia Delinquency Prevention and Youth Development Act Grants.** These regulations govern application for Virginia Delinquency Prevention and Youth Development Act grants including eligibility, criteria for review and funding, and the review process.

Statutory Authority: §§ 53.1-5 and 53.1-253 of the Code of Virginia.

Written comments may be submitted until June 13, 1988.

Contact: Austen C. Micklem, Jr., Acting Chief of Operations for Programs, Division of Youth Services, Department of Corrections, P. O. Box 26963, Richmond, Va. 23261, telephone (804) 367-0130

DANVILLE LOCAL EMERGENCY PLANNING COMMITTEE

† **June 16, 1988 - 9:30 a.m. – Open Meeting**
Municipal Building, 1st Floor Conference Room, Danville, Virginia. ☒

Local Committee, SARA Title III. Hazardous Material

Community Right-to-Know.

Contact: C. David Lampley, Chairman, LEPC, 297 Bridge St., Danville, Va. 24541, telephone (804) 799-5228

STATE BOARD OF EDUCATION

June 22, 1988 - 9 a.m. – Open Meeting

June 23, 1988 - 9 a.m. – Open Meeting

James Monroe Building, 101 North 14th Street, Conference Rooms D and E, Richmond, Virginia. ☒ (Interpreter for deaf provided if requested)

A regularly scheduled meeting. Business will be conducted according to items listed on the agenda. The agenda is available upon request. The public is reminded that the Board of Vocational Education may convene, if required.

Contact: Margaret N. Roberts, James Monroe Bldg., 101 N. 14th St., 25th Fl., Richmond, Va. 23219, telephone (804) 225-2540

DEPARTMENT OF EDUCATION (STATE BOARD OF)

July 28, 1988 - 1:15 p.m. – Public Hearing

James Monroe Building, Conference Room C, 101 North 14th Street, Richmond, Virginia

Notice is hereby given in accordance with § 9-6.14:7.1 of the Code of Virginia that the Department of Education intends to amend regulations entitled: **VR 270-01-0020. Classification of Expenditures.** The proposed amendments prescribe the major classification of expenditures that are used by local school boards when the division superintendent, with the approval of the school board, prepares the estimate of moneys needed for public schools.

Statutory Authority: §§ 22.1-92 and 22.1-115 of the Code of Virginia.

Written comments may be submitted until July 22, 1988.

Contact: Robert L. Aylor, Director, Account and Finance, Department of Education, P.O. Box 6Q, Richmond, Va. 23216-2060, telephone (804) 225-2040, SCATS 225-2040

STATE BOARD OF ELECTIONS

June 21, 1988 - 10 a.m. – Open Meeting

Capitol Building, House Room 1, Capitol Square, Richmond, Virginia

The State Board of Elections will meet to certify the results of the June 14, 1988, Primary and Special Elections.

Contact: Susan H. Fitz-Hugh, Ninth Street Office Building, Room 101, Richmond, Va. 23219, telephone (804) 786-6551

VIRGINIA EMPLOYMENT COMMISSION

Advisory Board

† June 14, 1988 - 1 p.m. - Open Meeting
† June 15, 1988 - 9 a.m. - Open Meeting
Sheraton Inn, Fredericksburg, Virginia. ☒

A regular meeting to conduct general business.

Contact: Ronald M. Montgomery, 703 East Main St., Richmond, Va. 23219, telephone (804) 786-1070

COUNCIL ON THE ENVIRONMENT

June 27, 1988 - 7 p.m. - Public Hearing
Kenmore Mansion, 1201 Washington Avenue, Fredricksburg, Virginia

June 28, 1988 - 7 p.m. - Public Hearing
Ramada Inn East, Chesapeake Room, 351 York Street, Williamsburg, Virginia

Biennial public hearing to receive comments on environmental issues of concern to citizens of the Commonwealth. Comments will be considered in compiling the agency's biennial report.

Contact: David J. Kinsey, Ninth Street Office Bldg., Room 903, Richmond, Va. 23219, telephone (804) 786-4500

LOCAL EMERGENCY PLANNING COMMITTEE OF FAIRFAX COUNTY - TOWN OF VIENNA - CITY OF FAIRFAX - TOWN OF HERNDON

June 9, 1988 - 10 a.m. - Open Meeting
† July 14, 1988 - 10 a.m. - Open Meeting
Wood Municipal Center, Old Lee Highway, Fairfax, Virginia

The committee is meeting in accordance to SARA Title III in order to carry out the provisions required within.

Contact: Melanie Pearson, Community Information Coordinator, 4031 University Dr., Suite 400, Fairfax, Va. 22030, telephone (703) 246-2331

VIRGINIA FIRE SERVICES BOARD

† June 23, 1988 - 7:30 p.m. - Open Meeting
Wagon Wheel Hall, Park Street across from the Courthouse, Marion, Virginia. ☒

† June 24, 1988 - 9 a.m. - Open Meeting
Holiday Inn, 1424 North Main Street, Exit 17, I-81, Marion, Virginia. ☒

A meeting to discuss fire training and fire policies. The business meeting is open to the public for their input.

Fire Prevention Committee

† June 23, 1988 - 9 a.m. - Open Meeting
Holiday Inn, 1424 North Main Street, Exit 17, I-81, Marion, Virginia. ☒

A meeting to discuss fire training and fire policies. The committee meeting is open to the public for their input.

Fire/EMS Training Committee

† June 23, 1988 - 1 p.m. - Open Meeting
Holiday Inn, 1424 North Main Street, Exit 17, I-81, Marion, Virginia. ☒

A meeting to discuss fire training and fire policies. The committee meeting is open to the public for their input.

Legislative Committee

† June 23, 1988 - 1 p.m. - Open Meeting
Holiday Inn, 1424 North Main Street, Exit 17, I-81, Marion, Virginia. ☒

A meeting to discuss fire training and fire policies. The committee meeting is open to the public for their input.

Contact: Anne J. Bales, James Monroe Bldg., 17th Floor, Richmond, Va. 23219, telephone (804) 225-2681

DEPARTMENT OF GENERAL SERVICES

Art and Architectural Review Board

July 8, 1988 - 10 a.m. - Open Meeting
Main Conference Room, Virginia Museum of Fine Arts, Richmond, Virginia.

The board will advise the Director of the Department of General Services and the Governor on architecture of state facilities to be constructed and works of art to be accepted or acquired by the Commonwealth.

Contact: M. Stanley Krause, AIA, AICP, Architect, Rancorn, Wildman & Krause, Architects, P. O. Box 1817, Newport News, Va. 23601, telephone (804) 867-8030

Calendar of Events

State Insurance Advisory Board

† June 10, 1988 - 9:30 a.m. - Open Meeting
Department of General Services, Ninth Street Office
Building, 9th and Grace Streets, Room 209, Director's
Conference Room, Richmond, Virginia. ☐

A quarterly meeting.

Contact: Charles F. Scott, Director, Division of Risk
Management, 805 East Broad St., 9th Floor, Richmond, Va.
23219, telephone (804) 225-4619

GLOUCESTER LOCAL EMERGENCY PLANNING COMMITTEE

June 22, 1988 - 6:30 p.m. - Open Meeting
Old Courthouse, Courthouse Green, Gloucester, Virginia. ☐

The LEPC will meet this month to further formulate
and work on the development of its local plan.
Standing committee reports will be presented on: A
Public Awareness Campaign and Facility Planning
Coordination.

Contact: Georgette N. Hurley, Assistant County
Administrator, P. O. Box 329, Gloucester, Va. 23061,
telephone (804) 693-4042

HARRISONBURG/ROCKINGHAM LOCAL EMERGENCY PLANNING COMMITTEE

† June 20, 1988 - 3 p.m. - Open Meeting
Maryland Avenue Fire Station, Harrisonburg, Virginia

A meeting to review status of emergency planning.

Contact: J. M. Russell, Jr., Chairperson H/R LEPC &
Manager, Environmental Engineering, Merck & Co., Inc., P.
O. Box 7, Elkton, Va. 22827-0007, telephone (703) 298-4110

DEPARTMENT OF HEALTH (STATE BOARD OF)

† July 27, 1988 - 2 p.m. - Public Hearing
Roanoke County Administrative Center, 3738 Brambleton
Avenue, S.W., Community Room, Roanoke, Virginia

† July 28, 1988 - 7 p.m. - Public Hearing
Spotsylvania County Board of Supervisors Room, County
Administration Building, Route 208 at Spotsylvania
Courthouse, Spotsylvania, Virginia

Notice is hereby given in accordance with § 9-6.14:7.1
of the Code of Virginia that the Department of Health
and the State Water Control Board intend to amend
jointly regulations entitled: **Sewerage Regulations**.
These regulations specify procedures for processing
applications and plans and specify minimum treatment

and design requirements for sewerage systems and
treatment works. Proposed amendments will update
technological and regulatory advances and restructure
the regulation in accordance with state requirements.

STATEMENT

Basis: Section 62.1-44.15(10) of the Code of Virginia
authorizes the State Water Control Board to adopt
regulations as it deems necessary to regulate the board's
water quality management program within the
Commonwealth.

Section 32.1-164 of the Code of Virginia authorizes the
State Board of Health to make, adopt, promulgate and
enforce reasonable rules and regulations governing the
method or methods of disposition of sewage in this
Commonwealth.

Section 62.1-44.19(8) of Chapter 3.1, Title 62.1 of the Code
of Virginia directs the State Water Control Board and the
State Department of Health to promulgate regulations
specifying procedures for processing applications and plans
and specifying minimum treatment and design
requirements for sewerage systems and treatment works.
Such revised regulations shall be adopted jointly only after
a hearing is held and the department and the board take
into consideration the economic and social costs and
benefits which can reasonably be expected to be obtained
as a result of the regulations as adopted, modified or
cancelled.

Purpose: The original Sewerage Regulations were effective
February 1, 1977. The purpose of the revisions to the
regulations is to conform to the Governor's regulatory
review activities and to update information on significant
technological and regulatory advances that have occurred
since the 1977 regulations.

Impact: The proposed revisions affect many sections of the
existing Sewerage Regulations. The majority of the
revisions would have no negative impact on the regulated
community or the Commonwealth. They do, however,
remove ambiguity from the regulations, improve the
structure and express the intent of the regulations
concisely.

In other cases, modifications are made to account for
more updated and detailed technical information which
affected the regulations. Several of the proposed revisions
will have an impact on the regulated community or the
Commonwealth. These revisions and their estimated impact
are discussed below.

Sludge Management - Part III, Article 7 provides
specific and detailed standards for sludge use and
disposal, providing the information necessary to
prepare plans for sludge management that each
generator must submit for approval. Requirements for
land application permits provide for the beneficial use
of sludge as a fertilizer and soil conditioner, while

protecting public health and water quality. The permitting process emphasizes public participation concerning review and approval of site-specific permits. Standards for sludge utilization will provide regulation to the distribution and marketing of sludge products.

In addition, Article 7 contains new sludge quality requirements that are being considered as part of the proposed Federal Sludge Management Regulations.

Wastewater disinfection - Part III, Article 10 includes information on improved control of residual chlorine in treated effluents and specifies criteria for the design and operation of alternative methods of wastewater disinfection.

Alternative methods of wastewater disinfection include ultraviolet irradiation and ozonation as new technology with criteria for dechlorination as conventional technology.

The use of alternatives to chlorination will reduce the negative secondary impacts of wastewater disinfection while protecting public health and water quality.

Land Treatment of Wastewater Effluent - Part III, Article 15 provides standards necessary for renovation of wastewater effluent by natural soil and plant systems including specific procedures and criteria for site evaluation and groundwater quality protection. This section also provides criteria for aquaculture treatment methods. Aquaculture treatment provides methods for using aquatic plants and animals in an interactive system to remove nutrients from wastewater. Article 15 provides standards for land application of treated effluent through slow rate design, rapid infiltration design and overland flow design in relation to site soils and hydrogeology. The requirements of this section will specify a two-phase evaluation of proposed application sites that will ensure that a land treatment is feasible prior to costly infield tests and studies.

Wastewater treatment - Section III, Article 8, includes design standards for low cost alternative treatment technology, such as low intensity aeration in lagoons. This section includes criteria for biological nutrient control including the reduction of nitrogen and phosphorus levels in treated effluents. Alternative treatment technologies will result in reduced energy requirements and a lower operation and maintenance cost to system owners.

Permit procedures - Section I encompasses revised procedures for submittal and review processing of application and design information in relation to permits, as required by federal and state regulations.

Permitting procedures have been made more specific and understandable. Requirements for public

notification provide for an increased level of public participation in the permitting process.

A primary impact to the regulated community is that owners of sewerage collection systems will be required to obtain a permit. Owners of sewerage collection system who do not own or operate a treatment works will be required to apply for a Virginia Pollutant Discharge Elimination System (VPDES) permit. VPDES permits will require that collection systems be properly operated and maintained in order to decrease the amount and frequency of uncontrolled bypasses, spills or other discharges of raw sewage.

Sewage sludge generators and treatment works owners will be required to supervise sewage management activities within the Commonwealth through a Virginia Pollutant Abatement Permit (VPA), if they do not hold a VPDES permit.

Statutory Authority: §§ 62.1-44.15 and 62.1-44.19 of the Code of Virginia.

Written comments may be submitted until August 10, 1988, to Dr. Calmet M. Sawyer, Department of Health, 109 Governor Street, Richmond, Virginia 23219 or Doneva Dalton, Hearing Reporter, State Water Control Board, P. O. Box 11143, Richmond, Virginia 23230.

Contact: E. Paul Farrell, Jr., Applications Engineer, Department of Health, 109 Governor St., James Madison Bldg., Room 927, Richmond, Va. 23219, telephone (804) 786-1758 or Alfred L. Willett, Office of Engineering Applications, State Water Control Board, P. O. Box 11143, Richmond, Va. 23230, telephone (804) 367-6136

Bureau of Radiological Health

† August 10, 1988 - 10 a.m. - Public Hearing
State Capitol, Capitol Square, House Room 4, Richmond, Virginia. ☐

Notice is hereby given in accordance with § 9-6.14:7.1 of the Code of Virginia that the Department of Health intends to adopt regulations entitled: **VR 355-20-2. Virginia Radiation Protection Regulations: Fee Schedule.** The purpose of the proposed regulation is to establish a fee schedule for the registration of X-ray machines and for inspections of X-ray machines by Department of Health personnel.

STATEMENT

Legal authority: The authority to establish a fee schedule for the registration of X-ray machines and for inspections of X-ray machines by Department of Health personnel is based on the requirements of § 32.1-229.1 of the Code of Virginia as amended.

Purpose: The purpose of this amendment is to establish a fee schedule for the registration of X-ray machines and

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for inspections of X-ray machines by Department of Health personnel as authorized by the 1987 Session of the General Assembly as a result of House Bill 91.

Summary and analysis: The following amendments incorporate provisions required by House Bill 91. The major proposals will include:

Require a registration fee for diagnostic and therapeutic X-ray machines, particle accelerators and teletherapy machines used in the healing arts.

Require the proposed registration fee be collected based on the inspection cycle.

Require a registration fee for each machine and additional tube.

Exempt state agencies and local governments from the requirement to pay the registration fees.

Require payment of an inspection fee for inspections of X-ray machines performed by Department of Health personnel; however, no fee shall be charged for inspections initiated by the Health Department. The inspection fee will be a flat fee based on the type of machine.

Require the inspection fees to include all reasonable cost.

Estimated impact: The proposed amendment will be applicable to all persons owning or having administrative control of radiation producing machines used in the healing arts. There are currently 3,865 private facilities operating 8,799 X-ray machines.

The proposed registration fee will be collected every year or three years depending on the inspection cycle for the type of facility and will not have a significant impact.

The inspection fees will not have a significant impact since most of the inspections are performed by private inspectors. The Health Department intends to continue this practice.

Statutory Authority: § 32.1-229.1 of the Code of Virginia.

Written comments may be submitted no later than 5 p.m., August 10, 1988.

Contact: Leslie P. Foldesi, Radiation Safety Specialist, Radiological Health, Room 915, 109 Governor St., Richmond, Va. 23219, telephone (804) 786-5932 or toll-free 1-800-468-0138

COUNCIL ON HEALTH REGULATORY BOARDS

Special Committee on Allied Health

† June 8, 1988 - 6 p.m. - Open Meeting
Hyatt Richmond Hotel, West Broad Street at I-64, Jefferson Room, Richmond, Virginia. ☒

The committee will prepare recommendations on the regulation of allied health professions for further consideration by the Council on Health Regulatory Boards at its July 19, 1988 quarterly meeting.

Compliance and Discipline Committee

† June 9, 1988 - 1 p.m. - Open Meeting
Hyatt Richmond Hotel, West Broad Street at I-64, Richmond, Virginia. ☒

A regular monthly meeting to oversee evaluation of the enforcement system operated by the Department of Health Regulatory Boards.

Regulatory Evaluation and Research Committee

† June 28, 1988 - 10 a.m. - Open Meeting
Department of Health Regulatory Boards, 1601 Rolling Hills Drive, Richmond, Virginia. ☒

The committee will review a proposal for the regulation by certification of occupational therapists and establish a workplan for a review of the need to regulate cytotechnologists as requested by House Joint Resolution 83 of the 1988 General Assembly.

Committee on Scopes and Standards of Practice

† June 9, 1988 - 9 a.m. - Open Meeting
Hyatt Richmond Hotel, West Broad Street at I-64, Richmond, Virginia. ☒

The committee will consider the (i) regulation of acupuncturists in Virginia; (ii) definition and scope of practice of professional counselors; and (iii) need to regulate marriage and family therapists.

Contact: Richard D. Morrison, Executive Director, 1601 Rolling Hills Dr., Richmond, Va. 23229, telephone (804) 662-9904 or SCATS 662-9904

DEPARTMENT OF HEALTH REGULATORY BOARDS

June 10, 1988 - 9 a.m. - Open Meeting
1601 Rolling Hills Drive, Richmond, Virginia 23229

A board meeting to (i) conduct general board business; (ii) make policies; (iii) respond to board correspondence; and (iv) conduct regulatory review.

Contact: Joyce D. Williams, Administrative Assistant, 1601 Rolling Hills Dr., Richmond, Va. 23229, telephone (804) 662-9912 -

VIRGINIA HEALTH SERVICES COST REVIEW COUNCIL

† June 22, 1988 - 9:30 a.m. - Open Meeting
Department of Rehabilitative Services, 4901 Fitzhugh Avenue, Richmond, Virginia. ☒

A monthly meeting to address financial, policy or technical matters which may have arisen since the last meeting.

The council will adopt rules and regulations that will be promulgated on an emergency basis regarding HB 1058 - survey to determine extent of diversification of Virginia hospitals.

Contact: Ann Y. McGee, Director, 805 E. Broad St., 9th Fl., Richmond, Va. 23219, telephone (804) 786-6371 or SCATS 786-6371

HOPEWELL INDUSTRIAL SAFETY COUNCIL

June 7, 1988 - 9 a.m. - Open Meeting
July 5, 1988 - 9 a.m. - Open Meeting
Hopewell Community Center, Second and City Point Road, Hopewell, Virginia. ☒ (Interpreter for deaf provided if requested)

Local Emergency Preparedness Committee meeting on emergency preparedness as required by SARA Title III.

Contact: Robert Brown, Emergency Service Coordinator, City of Hopewell, 300 N. Main St., Hopewell, Va. 23860, telephone (804) 541-2298

BOARD OF HOUSING AND COMMUNITY DEVELOPMENT

† June 17, 1988 - 10 a.m. - Open Meeting
Fourth Street Office Building, 205 North 4th Street, 2nd Floor Conference Room, Richmond, Virginia. ☒ (Interpreter for deaf provided if requested)

A meeting to (i) consider requests for interpretation of the Virginia Uniform Statewide Building Code; (ii) consider appeals from the rulings of local appeal boards regarding application of the Virginia Uniform Statewide Building Code, and (iii) approve minutes of previous meeting.

Amusement Device Technical Advisory Committee

† July 12, 1988 - 8:30 a.m. - Open Meeting
Fourth Street Office Building, 205 North 4th Street, Richmond, Virginia. ☒

A meeting to review and discuss regulations pertaining to the construction, maintenance, operation and inspection of amusement devices adopted by the Board

of Housing and Community Development.

Contact: Jack A. Proctor, CPCA, Deputy Director, Division of Building Regulatory Services, Department of Housing and Community Development, 205 N. 4th St., Richmond, Va. 23219-1747, telephone (804) 786-4752

VIRGINIA HOUSING DEVELOPMENT AUTHORITY

† June 21, 1988 - 10 a.m. - Open Meeting
13 South 13th Street, Richmond, Virginia. ☒

A regular monthly meeting to (i) review and, if appropriate, approve the minutes from the prior monthly meeting; (ii) consider for approval and ratification mortgage loan commitments under its various programs; (iii) review the authority's operations for the prior month; (iv) consider and, if appropriate, approve the proposed amendments to Procedures, Instructions and Guidelines for Virginia Rental Rehabilitation Program; and (v) consider such other matters and take such other actions as they may deem appropriate. The planned agenda of the meeting will be available at the office of the authority one week prior to the date of the meeting.

Contact: J. Judson McKellar, Jr., General Counsel, Virginia Housing Development Authority, 13 S. 13th St., Richmond, Va. 23219, telephone (804) 782-1986

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† June 17, 1988 - Written comments may be submitted until this date.

Notice is hereby given in accordance with § 9-6.14:7.1 of the Code of Virginia that the Virginia Housing Development Authority intends to amend regulations entitled: **VR 400-02-0008. Procedures, Instructions and Guidelines for Virginia Rental Rehabilitation Program.** The amendments make certain administrative and procedural changes in the Procedures, Instructions and Guidelines for Virginia Rental Rehabilitation Program.

STATEMENT

Purpose: The proposed amendments to the procedures, instructions and guidelines for Virginia rental rehabilitation program make certain technical and administrative changes which give the authority more flexibility in administering the rental rehabilitation program, while maintaining the program's compliance with applicable federal regulations.

Basis: To be adopted pursuant to regulations which were issued under § 36-55.30:3 of the Code of Virginia.

Subject, substance and issues: Under the current procedures, instructions and guidelines, the authority

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imposes certain requirements in connection with making grants under the rental rehabilitation program that either (i) exceed the requirements imposed by the U. S. Department of Housing and Urban Development ("HUD"), or (ii) are based on HUD requirements that have since been eliminated. Of these authority requirements, certain have been deemed no longer necessary or in need of modification in order to promote the efficient administration of the program. The proposed amendments make modifications in or deletion of provisions which include deleting a requirement that income information be based on the U. S. Census, permitting multiple extensions of grant allocations, and amending the notice of funding provision. All of the changes are technical or administrative in nature and all are in conformity with the HUD regulations applicable to the program.

Impact: The authority does not expect that a significant number of units or persons will be affected by the proposed amendments, nor does that authority expect that any significant costs will be incurred for the implementation of and compliance with the proposed amendments.

Statutory Authority: § 36-55.30:3 of the Code of Virginia.

Written comments may be submitted until June 17, 1988.

Contact: J. Judson McKellar, Jr., General Counsel, Virginia Housing Development Authority, 13 S. 13th St., Richmond, Va. 23219, telephone (804) 782-1986

COUNCIL ON HUMAN RIGHTS

† **June 23, 1988 - 10 a.m.** – Open Meeting
James Monroe Building, 101 North 14th Street, 17th Floor Conference Room, Richmond, Virginia. ☒

A monthly council meeting.

Contact: Alison Browne Parks, Executive Assistant, Council on Human Rights, P. O. Box 717, Richmond, Va. 23206, telephone (804) 225-2438, toll-free 1-800-633-5510 or SCATS 225-2438

COUNCIL ON INDIANS

† **July 20, 1988 - 2 p.m.** – Open Meeting
Ninth Street Office Building, Cabinet Conference Room, 6th Floor, Richmond, Virginia. ☒

The agenda will include a presentation on the Better Information Program, and financial aid available to Native Americans.

Contact: Mary Zoller, Special Assistant, Virginia Council on Indians, 8007 Discovery Dr., Richmond, Va. 23229, telephone (804) 662-9285

LIBRARY BOARD

June 27, 1988 - 2 p.m. – Open Meeting
The Jefferson Sheraton Hotel, Franklin and Adams Street, Richmond, Virginia. ☒

June 28, 1988 - 9:30 a.m. – Open Meeting
Virginia State Library and Archives, Supreme Court Room, 11th Street and Capitol Square, Richmond, Virginia. ☒

A regular meeting to discuss administrative matters.

Nominating Committee

† **June 27, 1988 - 1 p.m.** – Open Meeting
The Jefferson Sheraton Hotel, Franklin and Adams Street, Richmond, Virginia. ☒

A meeting to discuss administrative matters of the Virginia State Library and Archives.

Public Library Development Committee

† **June 27, 1988 - noon** – Open Meeting
The Jefferson Sheraton Hotel, Franklin and Adams Street, Richmond, Virginia. ☒

A meeting to discuss administrative matters of the Virginia State Library and Archives.

Contact: Mrs. Jean K. Reynolds, Virginia State Library and Archives, 11th St. at Capitol Square, Richmond, Va. 23219, telephone (804) 786-2332

COMMISSION ON LOCAL GOVERNMENT

† **June 27, 1988 - 9 a.m.** – Open Meeting
Roanoke County Administrative Center, 3738 Brambleton Avenue, S.W., Community Room, Roanoke, Virginia

The commission will hold a special meeting for the receipt of testimony from local governments with respect to the study being conducted under the direction of Item 76 in the Appropriations Act for the 1988-90 Biennium (HB 30). Item 76 directs the Commission to "conduct a study of the financial impact of annexation and immunity actions on affected localities with regard to state aid, mandates, and regulations."

Contact: G.E. McCormack, Jr., Assistant Director, Ninth Street Office Bldg., Room 901, Richmond, Va. 23219, telephone (804) 786-6508 or SCATS 786-6508

MARINE RESOURCES COMMISSION

June 7, 1988 - 9:30 a.m. – Open Meeting
Newport News City Council Chambers, 2400 Washington Avenue, Newport News, Virginia. ☒

The Virginia Marine Resources Commission meets on the first Tuesday of each month at 9:30 a.m. in Newport News City Council Chambers, located at 2400 Washington Avenue, Newport News, Virginia. It hears and decides cases on fishing licensing, oyster ground leasing, environmental permits in wetlands, bottomlands, coastal sand dunes and beaches. It hears and decides appeals made on local wetlands board decisions.

Fishery management and conservation measures are discussed by the commission. The commission is empowered to exercise general regulatory power within 15 days, and is empowered to take specialized marine life harvesting and conservation measures within five days.

Contact: Sandra S. Schmidt, Secretary to the Commission, 2401 West Ave., P.O. Box 756, Newport News, Va. 23607-0756, telephone (804) 247-2208

DEPARTMENT OF MEDICAL ASSISTANCE SERVICES

† **July 6, 1988** – Written comments may be submitted until this date.

Notice is hereby given in accordance with § 9-6.14:7.1 of the Code of Virginia that the Department of Medical Assistance Services intends to amend regulations entitled: **VR 460-02-4.191. Hospital Reimbursement Methodology Changes.** The purpose of the final regulation is to implement the 1988 General Assembly mandate to incorporate into the Plan the DRI inflator and establish separate group ceilings for state owned university teaching hospitals.

Statutory Authority: § 32.1-325 of the Code of Virginia.

Written comments may be submitted no later than 4:30 p.m., July 6, 1988, to N. Stanley Fields, Director, Division of Provider Reimbursement, Department of Medical Assistance Services, 600 East Broad Street, Richmond, Virginia 23219.

Contact: Victoria P. Simmons, Regulatory Coordinator, Department of Medical Assistance Services, 600 E. Broad St., Suite 1300, Richmond, Va. 23219, telephone (804) 786-7933

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† **July 6, 1988** – Written comments may be submitted until this date.

Notice is hereby given with § 9-6.14:7.1 of the Code of Virginia that the Department of Medical Assistance Services intends to amend regulations entitled: **VR 460-03-4.194 and VR 460-02-3.1. 1988 Nursing Home Reimbursement Changes.** The 1988 General Assembly mandated that the Board of Medical Assistance

Services amend the Plan for Medical Assistance concerning several aspects of the nursing home reimbursement methodology.

Statutory Authority: § 32.1-325 of the Code of Virginia.

Written comments may be submitted no later than 4:30 p.m., July 6, 1988, to N. Stanley Fields, Director, Division of Provider Reimbursement, Department of Medical Assistance Services, 600 East Broad Street, Richmond, Virginia 23219.

Contact: Victoria P. Simmons, Regulatory Coordinator, Department of Medical Assistance Services, 600 E. Broad St., Suite 1300, Richmond, Va. 23219, telephone (804) 786-7933

VIRGINIA STATE BOARD OF MEDICINE

Informal Conference Committee

† **June 6, 1988 - 9 a.m.** – Open Meeting
Holiday Inn Fanny's, 6531 West Broad Street, Richmond, Virginia. ☐

June 15, 1988 - 10:30 a.m. – Open Meeting
Radisson Hotel Lynchburg, 601 Main Street, Lynchburg, Virginia

June 17, 1988 - 10 a.m. – Open Meeting
Patrick Henry Inn and Conference Center, York and Page Streets, Williamsburg, Virginia. ☐

A meeting to inquire into allegations that certain practitioners may have violated laws and regulations governing the practice of medicine in Virginia. The committee will meet in open and closed sessions pursuant to § 2.1-344 of the Code of Virginia.

Executive Committee

† **June 10, 1988 - 8 a.m.** – Open Meeting
Holiday Inn Fanny's, 6531 West Broad Street, Richmond, Virginia. ☐

A meeting to (i) consider disciplinary actions; (ii) review closed cases; and (iii) discuss any other items which may come before the committee.

Contact: Eugenia K. Dorson, Board Administrator, 1601 Rolling Hills Dr., Surry Bldg., 2nd Floor, Richmond, Va. 23229-5005, telephone (804) 662-9925

STATE MENTAL HEALTH, MENTAL RETARDATION AND SUBSTANCE ABUSE SERVICES BOARD

† **June 22, 1988 - 9:30 a.m.** – Open Meeting
James Madison Building, 109 Governor Street, 13th Floor Conference Room, Richmond, Virginia. ☐

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A regular monthly meeting. The agenda will be published on June 15 and may be obtained by calling Jane Helfrich.

Contact: Jane V. Helfrich, State Board Staff, Department of Mental Health, Mental Retardation and Substance Abuse Services, P. O. Box 1797, Richmond, Va. 23214, telephone (804) 786-3921

DEPARTMENT OF MENTAL HEALTH, MENTAL RETARDATION AND SUBSTANCE ABUSE SERVICES

† June 8, 1988 - 8:30 a.m. - Open Meeting
Holiday Inn, 6531 West Broad Street, Richmond, Virginia.
☒ (Interpreter for deaf provided if requested)

A meeting of Virginia's Early Intervention Council for Part H, P.L. 99-457. The council is to advise and assist the Department of Mental Health, Mental Retardation and Substance Abuse Services as lead agency to administer Part H, in the development and implementation of a statewide, interagency, multidisciplinary system of early intervention services of infants and toddlers with disabilities.

Contact: Michael Fehl, Ed.D., Department of Mental Health, Mental Retardation and Substance Abuse Services, P. O. Box 1797, Richmond, Va. 23214, telephone (804) 786-3710

Prevention and Promotion Advisory Council

June 29, 1988 - 10 a.m. - Open Meeting
James Madison Building, 8th Floor Conference Room, Richmond, Virginia

A meeting to (i) consider update of activities of the Office of Prevention, Promotion and Library Services, (ii) discuss draft of State Prevention Plan and (iii) discuss other topics including future plans of the Prevention and Promotion Advisory Council.

Contact: Tamara Stovall or Susan Geller, Office of Prevention, Promotion, Library Services, P.O. Box 1797, Richmond, Va. 23214, telephone (804) 786-1530

COUNTY OF MONTGOMERY/TOWN OF BLACKSBURG LOCAL EMERGENCY PLANNING COMMITTEE

† June 14, 1988 - 3 p.m. - Open Meeting
Montgomery County Courthouse, Supervisor's Room, 3rd Floor, Christiansburg, Virginia. ☒

A meeting to develop a Hazardous Materials Emergency Response Plan for Montgomery County and the Town of Blacksburg.

Contact: Steve Via, New River Valley Planning District Commission, P. O. Box 3726, Radford, Va. 24143, telephone

(703) 639-9313 or SCATS 676-4012

LOCAL EMERGENCY PLANNING COMMITTEE FOR THE COUNTY OF NEW KENT

† June 23, 1988 - 7:30 p.m. - Open Meeting
New Kent County Administration Building, Emergency Operations Center, New Kent, Virginia

Local Emergency Planning Committee will meet to discuss general business and other items pertaining to SARA Title III requirements.

Contact: J. Lawrence Gallaher, Director of Public Safety, County of New Kent, P. O. Box 50, New Kent, Va. 23124, telephone (804) 966-9680

VIRGINIA STATE BOARD OF NURSING

† June 7, 1988 - 9 a.m. - Open Meeting
General Assembly Building, Capitol Square, House Room 1, Richmond, Virginia. ☒ (Interpreter for deaf provided if requested)

Two formal hearings will be held to inquire into allegations that certain laws and regulations governing the practice of nursing in Virginia may have been violated regarding:

9 a.m. - Retha Lee, L.P.N.

2 p.m. - Roger Barrack, L.P.N.

A formal hearing will be held at 1 p.m. to inquire if the endorsement of a license to practice practical nursing should be granted to Steve Douglas Pleasant.

† June 15, 1988 - 11 a.m. - Open Meeting
James Madison University, Warren Campus Center, Meeting Room A, Harrisonburg, Virginia. ☒ (Interpreter for deaf provided if requested)

A formal hearing will be held to inquire into allegations that certain laws and regulations governing the practice of nursing in Virginia may have been violated regarding:

Lamar Harrison, R.N.

Contact: Corinne F. Dorsey, R.N., Executive Director, 1601 Rolling Hills Dr., Richmond, Va. 23229, telephone (804) 662-9909, toll-free 1-800-533-1560 or SCATS 662-9909

Informal Conference Committee

June 14, 1988 - 8:30 a.m. - Open Meeting
June 24, 1988 - 8:30 a.m. - Open Meeting
1601 Rolling Hills Drive, Conference Room 2, Richmond, Virginia

A meeting to inquire into allegations that certain licensees may have violated laws and regulations governing the practice of nursing in Virginia.

Contact: Corinne F. Dorsey, R.N., Executive Director, 1601 Rolling Hills Dr., Richmond, Va. 23229, telephone (804) 662-9909, Toll Free 1-800-533-1560

STATE BOARD OF EXAMINERS FOR NURSING HOME ADMINISTRATORS

June 16, 1988 - 9 a.m. - Open Meeting
Department of Commerce, 3600 West Broad Street, Richmond, Virginia

An open board meeting to conduct (i) examinations; (ii) review of revenue and expenditures; (iii) review of applications; (iv) signing of certificates; and (v) other matters of the board.

Contact: Gerald W. Morgan, Administrator, Department of Commerce, 3600 W. Broad St., 5th Floor, Richmond, Va. 23230-4917, telephone (804) 367-8534, Toll Free 1-800-552-3016

VIRGINIA OUTDOORS FOUNDATION

† **June 8, 1988 - 10:30 a.m. - Open Meeting**
State Capitol, Capitol Square, House Room 1, Richmond, Virginia. ☐

A general business meeting.

Contact: Tyson B. Van Auken, Executive Director, 221 Governor St., Richmond, Va. 23219, telephone (804) 786-5539 or SCATS 786-5539

STATE BOARD OF PHARMACY

† **June 13, 1988 - 2 p.m. - Open Meeting**
Cavalier Hotel, Virginia Beach, Virginia

Routine board business.

Contact: Jack B. Carson, Executive Director, Virginia Board of Pharmacy, 1601 Rolling Hills Dr., Richmond, Va. 23229, telephone (804) 662-9911

BOARD OF COMMISSIONERS TO EXAMINE PILOTS

June 21, 1988 - 10 a.m. - Open Meeting
Virginia Port Authority, World Trade Center, Suite 600, Norfolk, Virginia. ☐

A committee of the board will meet to review board procedures, consider public comment concerning its existing regulations and develop recommendations for

revisions to its current recommendations to conform to Senate Bill 238 which becomes law on January 1, 1989.

July 14, 1988 - 10 a.m. - Open Meeting
Virginia Port Authority, World Trade Center, Suite 600, Norfolk, Virginia. ☐

The board will meet to conduct routine business at its regular quarterly business meeting.

Contact: David E. Dick, 3600 W. Broad St., Richmond, Va. 23230, telephone (804) 367-8531 or toll-free 1-800-552-3016

PRINCE WILLIAM COUNTY, MANASSAS CITY, AND MANASSAS PARK CITY LOCAL EMERGENCY PLANNING COMMITTEE

June 17, 1988 - 2 p.m. - Open Meeting
July 15, 1988 - 2 p.m. - Open Meeting
July 29, 1988 - 2 p.m. - Open Meeting
August 12, 1988 - 2 p.m. - Open Meeting
1 County Complex Court, Prince William, Virginia. ☐

Local Emergency Planning Committee to discharge the provisions of SARA Title III.

Contact: Thomas J. Hajduk, Information Coordinator, 1 County Complex Court, Prince William, Va. 22192-9201, telephone (703) 335-6800

RADIATION ADVISORY BOARD

† **June 15, 1988 - 1 p.m. - Open Meeting**
State Capitol Building, House Room 1, Richmond, Virginia. ☐

The Health Department will inform the Radiation Advisory Board of the department's activities regarding radiation protection and solicit the advisory board for their comments.

Contact: Les Foldesi, Radiation Safety Specialist, Department of Health, Radiological Health, 109 Governor St., Room 915, Richmond, Va. 23219, telephone (804) 786-5932 or SCATS 786-5932

VIRGINIA REAL ESTATE BOARD

† **June 30, 1988 - 9 a.m. - Open Meeting**
Travelers Building, 3600 West Broad Street, Richmond, Virginia. ☐

A regular business meeting of the board. The agenda will consist of (i) investigative cases (files) to be considered; (ii) files to be reconsidered; and (iii) matters relating to Fair Housing, Property Registration, and Licensing issues (e.g., reinstatement, eligibility

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requests). A possible revision of the Rules and Regulations of Fair Housing, Property Registration, and Licensing may be included.

Contact: Joan L. White, Assistant Director for Real Estate, Department of Commerce, 3600 W. Broad St., Richmond, Va. 23230, telephone (804) 367-8552, toll-free 1-800-552-3016 or SCATS 367-8552

RESPIRATORY THERAPY PRACTITIONER CREDENTIALLING

† **June 28, 1988 - 1 p.m.** – Open Meeting
Department of Health Regulatory Boards, 1601 Rolling Hills Drive, Surry Building, Board Room 1, 2nd Floor, Richmond, Virginia. ☒

A meeting to review the credentialling process of Respiratory Therapy and to review the rules and regulations.

Contact: Eugenia K. Dorson, Board Administrator, 1601 Rolling Hills Dr., Surry Bldg. 2nd Floor, Richmond, Va. 23229-5005, telephone (804) 662-9925

STATE SEWAGE HANDLING AND DISPOSAL APPEALS REVIEW BOARD

June 29, 1988 - 10 a.m. – Open Meeting
General Assembly Building, Capitol Square, Senate Room A, Richmond, Virginia. ☒

A meeting to hear and render a decision on all appeals of denials of on-site sewage disposal system permit.

Contact: Deborah E. Randolph, 109 Governor St., Room 500, Richmond, Va. 23219, telephone (804) 786-3559

DEPARTMENT OF SOCIAL SERVICES (BOARD OF)

June 22, 1988 - 9 a.m. – Public Hearing
Blair Building, 8007 Discovery Drive, Conference Rooms A and B, Richmond, Virginia

Notice is hereby given in accordance with § 9-6.14:7.1 of the Code of Virginia that the Department of Social Services intends to amend regulations entitled: **VR 615-08-1. Virginia Fuel Assistance Program.** The purpose of the proposed amendment is to assist low income households with the cost of energy needs.

Statutory Authority: § 63.1-25 of the Code of Virginia.

Written comments may be submitted until June 10, 1988.

Contact: Charlene H. Chapman, Supervisor, Energy and Emergency Assistance, Division of Benefit Programs, 8007

Discovery Dr., Richmond, Va. 23229-8699, telephone (804) 662-9050 or toll-free 1-800-552-7091

VIRGINIA BOARD OF SOCIAL WORK

June 17, 1988 - 9 a.m. – Open Meeting
1601 Rolling Hills Drive, Richmond, Virginia

A meeting to (i) conduct general board business; (ii) review applications; (iii) respond to correspondence; and (iv) discuss proposed regulations.

Contact: Beverly Putnam, Administrative Assistant, 1601 Rolling Hills Dr., Richmond, Va. 23229, telephone (804) 662-9914

VIRGINIA PUBLIC TELECOMMUNICATIONS BOARD

June 9, 1988 - 10 a.m. – Open Meeting
WBRA-TV, 1215 McNeal Drive, Roanoke, Virginia

Quarterly meeting of the Virginia Public Telecommunications Board regarding public television and radio issues.

Contact: Ms. Suzanne Piland, Department of Information Technology, 110 S. 7th St., 1st Floor, Richmond, Va. 23219, telephone (804) 344-5544

DEPARTMENT OF TRANSPORTATION (COMMONWEALTH TRANSPORTATION BOARD)

June 9, 1988 - 9 a.m. – Public Hearing
Salem District Office, Harrison Avenue north of Main Street and east of Route 311 in Salem, Virginia. ☒
(Interpreter for deaf provided if requested)

June 16, 1988 - 9 a.m. – Public Hearing
Auditorium, Virginia Department of Transportation Building, 1221 East Broad Street, Richmond, Virginia. ☒
(Interpreter for deaf provided if requested)

Final public hearing to receive comments on highway allocations for the coming year and on updating the six-year improvement program for the interstate, primary, and urban systems.

June 9: For the four western districts (Bristol, Salem, Lynchburg and Staunton).

June 16: For the districts of Richmond, Fredericksburg, Suffolk, Culpeper and Northern Virginia.

Contact: Albert W. Coates, Jr., Assistant Commissioner, Department of Transportation, 1401 E. Broad St., Richmond, Va., telephone (804) 786-9950

TREASURY BOARD

June 7, 1988 - 10:30 a.m. - Open Meeting
June 22, 1988 - 9 a.m. - Open Meeting
James Monroe Building, 101 North 14th Street, 3rd Floor,
Treasury Board Conference Room, Richmond, Virginia

A general board meeting.

Contact: Betty A. Ball, Department of Treasury, James
Monroe Bldg., 3rd Floor, Richmond, Va., telephone (804)
225-2142

VIRGINIA BOARD OF VETERINARY MEDICINE

† June 20, 1988 - 9 a.m. - Open Meeting
Department of Health Regulatory Boards, 1601 Rolling
Hills Drive, Conference Room 1, Richmond, Virginia

A meeting to (i) consider general business; (ii)
consider disciplinary hearings; and (iii) discuss
regulations.

† June 21, 1988 - 9 a.m. - Open Meeting
Sanger Hall, 1101 East Marshall Street, Richmond, Virginia

Veterinary State Board Examination.

Contact: Moira C. Lux, 1601 Rolling Hills Dr., Richmond,
Va. 23229, telephone (804) 662-9915

VIRGINIA-ISRAEL COMMISSION

† June 16, 1988 - 4 p.m. - Open Meeting
General Assembly Building, Capitol Square, House Room C,
Richmond, Virginia. ☐

Final meeting of the commission to present its final
report to the Governor.

Contact: Richard A. Arenstein, Governor's Office, State
Capitol, Richmond, Va. 23219, telephone (804) 786-2211

VIRGINIA RESOURCES AUTHORITY

† June 14, 1988 - 9 a.m. - Open Meeting
Ramada Inn, 57th Street, 17th Floor Conference Room,
Virginia Beach, Virginia

The board will meet to (i) approve minutes of the
meeting of May 10, 1988; (ii) review the authority's
operations for the prior months; and (iii) consider
other matters and take other actions as they may
deem appropriate. The planned agenda of the meeting
will be available at the offices of the authority one
week prior to the date of the meeting.

Contact: Shockley D. Gardner, Jr., P. O. Box 1300,

Richmond, Va. 23210, telephone (804) 644-3100

BOARD FOR THE VISUALLY HANDICAPPED

† July 6, 1988 - 11 a.m. - Open Meeting
Administrative Headquarters, 397 Azalea Avenue,
Richmond, Virginia. ☐ (Interpreter for deaf provided if
requested)

The board meets bi-monthly to review the policy and
procedures of the Virginia Department for the Visually
Handicapped. The board reviews and approves the
department's budget, executive agreement, and
operating plan.

Advisory Committee on Services

† July 23, 1988 - 10:30 a.m. - Open Meeting
Administrative Headquarters, 397 Azalea Avenue,
Richmond, Virginia. ☐ (Interpreter for deaf provided if
requested)

A quarterly meeting to advise the Virginia Department
for the Visually Handicapped on matters related to
services for blind and visually handicapped citizens of
the Commonwealth.

Contact: Diane Allen, Executive Secretary Senior, 397
Azalea Ave., Richmond, Va. 23227, telephone (804)
371-3145, toll-free 1-800-622-2155, SCATS 371-3145 or
371-3140/TDD ☐

VIRGINIA VOLUNTARY FORMULARY BOARD

June 23, 1988 - 10:30 a.m. - Open Meeting
Virginia Department of Health, James Madison Building,
109 Governor Street, Main Floor Conference Room,
Richmond, Virginia

A meeting to review public hearing comments and
product data for drug products being considered for
inclusion in the Virginia Voluntary Formulary.

Contact: James K. Thomson, Director, Bureau of
Pharmacy Services, Virginia Department of Health, 109
Governor St., Richmond, Va. 23219, telephone (804)
786-4326

VIRGINIA WASTE MANAGEMENT BOARD

June 10, 1988 - 10 a.m. - Open Meeting
General Assembly Building, House Room D, Capitol
Square, Richmond, Virginia

A general business meeting and review of proposed
draft solid waste management regulations and public
participation regulations.

Calendar of Events

Contact: Cheryl Cashman, Legislative Liaison, 11th Floor Monore Bldg., 101 N. 14th St., Richmond, Va. 23219, telephone (804) 225-2667

STATE WATER CONTROL BOARD

† **June 13, 1988 - 7 p.m. - Public Hearing**

Central High School, Susan Avenue, Gymnasium, Woodstock, Virginia

A public hearing to receive comments on (i) the proposed National Pollutant Discharge Elimination System (NPDES) permit for Rocco Farms Foods, Inc.; (ii) the issuance or denial of the permit; and (iii) the possible effect of the discharge on ground and surface water.

Contact: Tedd H. Jett, Regulatory Services Supervisor, State Water Control Board, Valley Regional Office, 116 N. Main St. Bridgewater, Va. 22812, telephone (703) 828-2595

† **June 21, 1988 - 7 p.m. - Public Hearing**
Exmore/Willis Wharf Elementary School, State Road 600, Exmore, Virginia

A public hearing to receive comments on the proposed National Pollutant Discharge Elimination System (NPDES) permit for The American Original Corporation; (ii) the reissuance or denial of the permit; and (iii) the effect of the discharge on water quality or beneficial uses of state waters.

Contact: Robert P. Goode, State Water Control Board, Tidewater Regional Office, 287 Pembroke Office Park, Pembroke II, Suite 310, Virginia Beach, Va. 23462, telephone (804) 499-8742

June 27, 1988 - 9 a.m. - Open Meeting
June 28, 1988 - 9 a.m. - Open Meeting
General Assembly Building, Capitol Square, Senate Room B, Richmond, Virginia. ☐

A regular quarterly meeting.

Contact: Doneva A. Dalton, State Water Control Board, P. O. Box 11143, Richmond, Va. 23230, telephone (804) 367-6829

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June 6, 1988 - 7 p.m. - Public Hearing
Norfolk City Council Chambers, City Hall Building, 810 Union Street, Norfolk, Virginia

Notice is hereby given in accordance with § 9-6.14:7.1 of the Code of Virginia that the State Water Control Board intends to amend regulations entitled: **VR 680-21-01.13. Tributyltin in Surface Waters - Water Quality Standards.** The purpose of the proposed

amendment is to establish an instream water quality standard for tributyltin.

Statutory Authority: § 62.1-44.15(3) of the Code of Virginia.

Written comments may be submitted until 5 p.m., June 24, 1988, to Doneva Dalton, Hearing Reporter, State Water Control Board, P. O. Box 11143, Richmond, Virginia 23230.

Contact: Jean Gregory, Office of Environmental Research and Standards, State Water Control Board, P. O. Box 11143, Richmond, Va. 23230, telephone (804) 367-6985

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June 7, 1988 - 7 p.m. - Public Hearing
Loudoun County Board of Supervisors Room, County Administration Building, 18 North King Street, Leesburg, Virginia

Notice is hereby given in accordance with § 9-6.14:7.1 of the Code of Virginia that the State Water Control Board intends to amend regulations entitled: **VR 680-11-04. Policy for Waste Treatment and Water Quality Management for the Dulles Area Watershed.** The purpose of this action is to amend the policy to reduce the minimum separation distance between wastewater discharges in the Dulles Area Watershed and downstream public water supply intakes from 15 stream miles to five stream miles.

Statutory Authority: § 62.1-44.15(3) of the Code of Virginia.

Written comments may be submitted until 5 p.m., June 24, 1988, to Doneva Dalton, Hearing Reporter, State Water Control Board, P. O. Box 11143, Richmond, Virginia 23230.

Contact: Steve Hoge, Supervisor of Water Resources Development, State Water Control Board, Northern Regional Office, 5515 Cherokee Avenue, Suite 404, Alexandria, Va. 22312, telephone (703) 750-9111 or SCATS 466-4950

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June 9, 1988 - 7 p.m. - Public Hearing
Paul D. Camp Community College, Lecture Hall, Room 143, Franklin, Virginia

Notice is hereby given in accordance with § 9-6.14:7.1 of the Code of Virginia that the State Water Control Board intends to amend regulations entitled: **VR 680-21-07.03. Nutrient Enriched Waters - Water Quality Standards.** The purpose of the amendment is to designate the tidal freshwater portions of the Blackwater River and Nottoway River as "nutrient enriched waters."

Statutory Authority: § 62.1-44.15(3) of the Code of Virginia.

Written comment may be submitted until 5 p.m., June 24,

1988, to Doneva Dalton, Hearing Reporter, State Water Control Board, P. O. Box 11143, Richmond, Virginia 23230.

Contact: Jean Gregory, Office of Environmental Research and Standards, State Water Control Board, P. O. Box 11143, Richmond, Va. 23230, telephone (804) 367-6985 or SCATS 367-6985

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† **July 27, 1988 - 2 p.m.** – Public Hearing
Roanoke County Administrative Center, 3738 Brambleton Avenue S.W., Community Room, Roanoke, Virginia

† **July 28, 1988 - 7 p.m.** – Public Hearing
Spotsylvania County Board of Supervisors Room, County Administration Building, Route 208 at Spotsylvania Courthouse, Spotsylvania, Virginia

Title of Regulation: Sewerage Regulations.

Written comments may be submitted until August 10, 1988, to Doneva Dalton, Hearing Reporter, State Water Control Board, P. O. Box 11143, Richmond, Virginia 23230.

NOTICE: Please refer to Notice of Comment Period listed under the Department of Health.

COLLEGE OF WILLIAM AND MARY

Board of Visitors

† **June 24, 1988 - 8 a.m.** – Open Meeting
College of William and Mary, Jamestown Road, Campus Center, Williamsburg, Virginia

A regularly scheduled meeting of the Board of Visitors of the College of William and Mary to act on those resolutions that are presented by the administrations of William and Mary and Richard Bland College.

An informational release will be available four days prior to the board meeting for those individuals or organizations who request it.

Contact: Office of University Relations, James Blair Hall, College of William and Mary, Room 308, Williamsburg, Va. 23185, telephone (804) 253-4226

LEGISLATIVE MEETINGS

HOUSE APPROPRIATIONS COMMITTEE

† **June 27, 1988 - 9:30 a.m.** – Open Meeting
Eastern Shore Community College, Route 1, Box 6, Melfa, Virginia

A regular monthly meeting of the full committee.

† **June 28, 1988 - 9:30 a.m.** – Open Meeting
Norfolk City Council Chambers, 811 East City Hall Avenue, Norfolk, Virginia

A regular monthly meeting of the full committee, in conjunction with the June 27th meeting held at Eastern Shore Community College.

Contact: Donna C. Johnson, House Appropriations Committee, General Assembly Bldg., Capitol Sq., 9th Floor, Richmond, Va. 23219, telephone (804) 786-1837

VIRGINIA CODE COMMISSION

June 17, 1988 - 9:30 a.m. – Open Meeting
Speaker's Conference Room, 6th Floor, General Assembly Building, 910 Capitol Street, Richmond, Virginia. ☒

Begin recodification of Title 46.1.

Contact: Joan W. Smith, Registrar of Regulations, P.O. Box 3-AG, Richmond, Va. 23208, telephone (804) 786-3591

JOINT SUBCOMMITTEE STUDYING THE NEED FOR EARLY CHILDHOOD AND DAY-CARE PROGRAMS

† **June 23, 1988 - 10 a.m.** – Open Meeting
General Assembly Building, House Room C, Capitol Square, Richmond, Virginia. ☒

This will be the first meeting of this study committee, which was continued from 1987. The meeting's agenda will be focused around the presentations of various state agencies associated with the topics of early childhood development and day-care programs. HJR 27

Contact: For additional information contact: Brenda Edwards, Research Associate, or Norma Szakal, Staff Attorney, Division of Legislative Services, P.O. Box 3-AG, Richmond, Va. 23208, telephone (804) 786-3591. Persons wishing to speak contact: Jeffrey A. Finch, House of Delegates, P.O. Box 406, Richmond, Va. 23203, telephone (804) 786-2227

JOINT SUBCOMMITTEE STUDYING THE FREEDOM OF INFORMATION ACT

† **June 14, 1988 - 10 a.m.** – Open Meeting
General Assembly Building, House Room C, Richmond, Virginia. ☒

The first meeting of this subcommittee will be held for organizational purposes and to establish agenda for interim meetings.

Contact: Angela Bowser, Staff Attorney, Division of

Calendar of Events

Legislative Services, P. O. Box 3-AG, Richmond, Va. 23208, telephone (804) 786-3591

JOINT SUBCOMMITTEE STUDYING INVESTIGATIVE PROCEDURES USED IN CHILD ABUSE CASES

† June 13, 1988 - 10 a.m. - Open Meeting
General Assembly Building, Capitol Square, House Room C, Richmond, Virginia. ☒

The first meeting of this subcommittee will be held for organizational purposes and to establish agenda for interim meetings.

Contact: Mary Devine, Staff Attorney, Division of Legislative Services, P. O. Box 3-AG, Richmond, Va. 23208, telephone (804) 786-3591

SPECIAL COUNTIES, CITIES AND TOWNS SUBCOMMITTEE STUDYING THE PRESERVATION OF TREES

June 6, 1988 - 1 p.m. - Open Meeting
General Assembly Building, Capitol Square, Richmond, Virginia. ☒

Subcommittee will meet to have work session prior to public hearings planned for Northern Virginia in September and Virginia Beach in October.

Contact: Clem Conner, Staff Attorney or Jack Austin, Research Associate, Division of Legislative Services, 2nd Floor, General Assembly Bldg., Richmond, Va., telephone (804) 786-3591

SPECIAL JOINT SUBCOMMITTEE STUDYING THE TAXATION OF DAILY RENTAL EQUIPMENT

June 8, 1988 - 10 a.m. - Open Meeting
General Assembly Building, House Room C, Capitol Square, Richmond, Virginia. ☒

This meeting will be for organizational purposes and to review the tax impact of daily rental equipment on local revenues.

Contact: Reggie McNally, Staff Attorney, Division of Legislative Services, 2nd Floor, General Assembly Bldg., Richmond, Va., telephone (804) 786-3591

JOINT SUBCOMMITTEE STUDYING ALTERNATIVES FOR IMPROVING WASTE REDUCTION AND RECYCLING EFFORTS

† June 6, 1988 - 2 p.m. - Public Hearing
Newport News City Council Chambers, 2400 Washington Avenue, Newport News, Virginia

The first public hearing of the interim for this continued joint subcommittee.

Contact: For additional information contact: John T. Heard, Staff Attorney, or Martin G. Farber, Research Associate, Division of Legislative Services, P. O. Box 3-AG, Richmond, Va. 23208, telephone (804) 786-3591. Persons wishing to speak contact: Anne R. Howard, House of Delegates, P. O. Box 406, Richmond, Va. 23203, telephone (804) 786-7681

OPEN MEETINGS

June 6

Air Pollution Control Board, State Counties, Cities and Towns Subcommittee Studying the Preservation of Trees, Special
† Medicine, Virginia State Board of

June 7

Hopewell Industrial Safety Council
Marine Resources Commission
† Nursing, Virginia State Board of Treasury Board

June 8

† Health Regulatory Board, Council on
- Special Committee on Allied Health
† Mental Health, Mental Retardation and Substance Abuse Services, Department of
† Outdoors Foundation, Virginia
Taxation of Daily Rental Equipment, Special Joint Subcommittee Studying the

June 9

Child Day-Care Council
† Child Mental Health, Consortium on
Local Emergency Planning Committee of Fairfax County-Town of Vienna-City of Fairfax-Town of Herdon
† Health Regulatory Boards, Council on
- Compliance and Discipline Committee
- Committee on Scopes and Standards of Practice
Telecommunications Board, Virginia Public

June 10

Children's Residential Facilities, Interdepartmental Licensure and Certification of
- Coordinating Committee
† General Services, Department of
- State Insurance Advisory Board
Health Regulatory Boards, Department of
† Medicine, Virginia State Board of
- Executive Committee
Waste Management Board, Virginia

June 13

† Investigative Procedures Used in Child Abuse Cases, Joint Subcommittee Studying
† Pharmacy, State Board of

June 14

Calendar of Events

† Alcoholic Beverage Control Board
† Employment Commission Advisory Board, Virginia
† Freedom of Information Act, Joint Subcommittee Studying the
† Montgomery, Town of Blacksburg Local Emergency Planning Committee, County of
Nursing, Virginia State Board of
- Informal Conference Committee
† Virginia Resources Authority

June 15

† Conservation and Historic Resources, Department of
- Shenandoah Scenic River Advisory Board
† Corrections, State Board of
† Employment Commission Advisory Board, Virginia
Medicine, Virginia State Board of
- Informal Conference Committee
† Nursing, Virginia State Board of
† Radiation Advisory Board

June 16

Chesterfield County, Local Emergency Planning Committee of
† Danville Local Emergency Planning Committee
Nursing Home Administrators, State Board of Examiners for
† Virginia-Israel Commission

June 17

Code Commission, Virginia
† Conservation and Historic Resources, Department of
- Falls of the James Advisory Committee
† Housing and Community Development, Board of
Medicine, Virginia State Board of
- Informal Conference Committee
Prince William County, Manassas City, and Manassas Park City Local Emergency Planning Committee
Social Work, Virginia Board of

June 20

† Air Pollution Control Board, State
† Harrisonburg/Rockingham Local Emergency Planning Committee
† Veterinary Medicine, Virginia Board of

June 21

† Aviation Board, Virginia
† Contractors, State Board of
Elections, State Board of
† Housing Development Authority, Virginia
Pilots, Board of Commissioners to Examine
† Veterinary Medicine, Virginia Board of

June 22

† Contractors, State Board of
Education, State Board of
Gloucester Local Emergency Planning Committee
† Health Services Cost Review Council, Virginia
† Mental Health, Mental Retardation and Substance Abuse Services Board, State
Treasury Board

June 23

† Early Childhood and Day Care Programs, Joint Subcommittee Studying the Need for
Education, State Board of
† Fire Services Board, Virginia
- Fire Prevention Committee
- Fire/EMS Training Committee
- Legislative Committee
† Human Rights, Council on
† New Kent, Local Emergency Planning Committee for the County of
Voluntary Formulary Board, Virginia

June 24

† Fire Services Board, Virginia
Nursing, Virginia State Board of
- Informal Conference Committee
† William and Mary, College of
- Board of Visitors

June 27

† Appropriations Committee, House
Library Board
† - Nominating Committee
† - Public Library Development Committee
† Local Government, Commission on
Water Control Board, State

June 28

† Alcoholic Beverage Control Board
† Appropriations Committee, House
† Health Regulatory Boards, Council on
- Regulatory Evaluation and Research Committee
Library Board
† Respiratory Therapy Practitioner Credentialing
Water Control Board, State

June 29

Mental Health, Mental Retardation and Substance Abuse Services, Department of
- Prevention and Promotion Advisory Council
Sewage Handling and Disposal Appeals Review Board, State

June 30

Athletic Board, Virginia
† Real Estate Board, Virginia

July 5

Hopewell Industrial Safety Council

July 6

† Child Mental Health, Consortium on
† Visually Handicapped, Board for the

July 7

Chesterfield County, Local Emergency Planning Committee of

July 8

General Services, Department of

Calendar of Events

- Art and Architectural Review Board

July 11

Agriculture and Consumer Services, Department of
- Virginia Winegrowers Advisory Board

July 12

† Alcoholic Beverage Control Board
† Housing and Community Development, Board of
- Amusement Device Technical Advisory Committee

July 13

† Corrections, State Board of

July 14

Boating Advisory Board, Virginia
Child Day-Care Council
† Conservation and Historic Resources, Department of
- Goose Creek Scenic River Advisory Board
† Fairfax County, Town of Vienna, City of Fairfax,
Town of Herndon, Local Emergency Planning
Committee of
Pilots, Board of Commissioners to Examine

July 15

† Conservation and Historic Resources, Department of
- Falls of the James Advisory Committee
Prince William County, Manassas City, and Manassas
Park City Local Emergency Planning Committee

July 20

† Indians, Council on

July 21

† Chesterfield County, Local Emergency Planning
Committee of

July 23

† Visually Handicapped, Department for the
- Advisory Committee on Services

July 26

† Alcoholic Beverage Control Board

July 29

Prince William County, Manassas City, and Manassas
Park City Local Emergency Planning Committee

August 3

† Child Mental Health, Consortium on

August 4

† Bristol, Local Emergency Planning Committee, City
of
† Chesterfield County, Local Emergency Planning
Committee of

August 9

† Alcoholic Beverage Control Board

August 12

Prince William County, Manassas City, and Manassas
Park City Local Emergency Planning Committee

August 19

† Conservation and Historic Resources, Department of
- Falls of the James Advisory Committee

August 23

† Alcoholic Beverage Control Board

PUBLIC HEARINGS

June 6

† Waste Reduction and Recycling Efforts, Joint
Subcommittee Studying Alternatives for
Water Control Board, State

June 7

Water Control Board, State

June 9

Transportation, Department of
Water Control Board, State

June 13

† Water Control Board, State

June 16

Transportation, Department of

June 21

† Water Control Board, State

June 22

Social Services, Department of

June 27

Environment, Council on the

June 28

Corrections, Department of
Environment, Council on the

July 7

Corrections, Department of

July 13

Corrections, Department of

July 15

Agriculture and Consumer Services, Department of
Forestry, Department of

July 27

† Health, Department of, and the State Water Control
Board, Jointly

July 28

Education, Department of
† Health, Department of, and the State Water Control

Board, Jointly

August 10

† Health, Department of

Calendar of Events
