A regulation becomes effective at the conclusion of the 30-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by the promulgating agency, unless (i) a legislative objection has been filed, in which event the regulation, unless withdrawn, becomes effective on the date specified, which shall be after the expiration of the 21-day extension period; (ii) the Governor exercises his authority to require the agency to provide for additional public comment, in which event the regulation, unless withdrawn, becomes effective on the date specified, which shall be after the expiration of the 30-day public comment period.

Proposed regulatory action may be withdrawn by the promulgating agency at any time before the regulation becomes final.

EMERGENCY REGULATIONS

If an agency demonstrates that (i) there is an immediate threat to the public’s health or safety; or (ii) Virginia statutory law, the appropriation act, federal law, or federal regulation requires a regulation to take effect no later than (a) 280 days from the enactment in the case of Virginia or federal law or the appropriation act, or (b) 280 days from the effective date of a federal regulation, it then requests the Governor’s approval to adopt 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 to addressing specifically defined situations and may not exceed 12 months in duration. Emergency regulations are published as soon as possible in the Register.

During the time the emergency status is in effect, the agency may proceed with the adoption of permanent regulations through the usual procedures. To begin promulgating the replacement regulation, the agency must (i) file the Notice of Intended Regulatory Action with the Registrar within 60 days of the effective date of the emergency regulation; and (ii) file the proposed regulation with the Registrar within 180 days of the effective date of the emergency regulation. If the agency chooses not 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 (§ 9-6.14:7.1 et seq.) of Chapter 1.1:1 of the Code of Virginia be examined carefully.

THE VIRGINIA REGISTER

The Virginia Register is cited by volume, issue, page number, and date. 12:8 VA.R. 1096-1106 January 8, 1996, refers to Volume 12, Issue 8, pages 1096 through 1106 of the Virginia Register issued on January 8, 1996.

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Staff of the Virginia Register: Jane D. Chaffin, Registrar of Regulations.
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**Title 13. Housing**

13 VAC 5-175-10 through 13 VAC 5-175-40 Added 16:4 VA.R. 405-406 10/20/99

**Title 14. Insurance**

14 VAC 5-270-30 Amended 16:5 VA.R. 582 1/1/00
14 VAC 5-270-40 Amended 16:5 VA.R. 582 1/1/00
14 VAC 5-270-60 Amended 16:5 VA.R. 582 1/1/00
14 VAC 5-270-70 Amended 16:5 VA.R. 583 1/1/00
14 VAC 5-270-80 Amended 16:5 VA.R. 583 1/1/00
14 VAC 5-270-160 Repealed 16:5 VA.R. 584 1/1/00
14 VAC 5-319-10 through 14 VAC 5-319-80 Added 16:5 VA.R. 585-599 1/1/00
14 VAC 5-395-20 Amended 16:4 VA.R. 407 10/20/99
14 VAC 5-395-25 Added 16:4 VA.R. 407 10/20/99
14 VAC 5-395-60 Amended 16:4 VA.R. 407 10/20/99

**Title 18. Professional and Occupational Licensing**

18 VAC 5-20-10 emer Amended 16:3 VA.R. 319 10/4/99-10/3/00
18 VAC 5-20-11 emer Added 16:3 VA.R. 321 10/4/99-10/3/00
18 VAC 5-20-20 emer Amended 16:3 VA.R. 322 10/4/99-10/3/00
18 VAC 5-20-30 emer Repealed 16:3 VA.R. 324 10/4/99-10/3/00
18 VAC 5-20-40 emer Repealed 16:3 VA.R. 324 10/4/99-10/3/00
18 VAC 5-20-41 emer Added 16:3 VA.R. 324 10/4/99-10/3/00
18 VAC 5-20-50 emer Repealed 16:3 VA.R. 325 10/4/99-10/3/00
18 VAC 5-20-60 emer Repealed 16:3 VA.R. 325 10/4/99-10/3/00
18 VAC 5-20-70 emer Repealed 16:3 VA.R. 326 10/4/99-10/3/00
18 VAC 5-20-80 emer Repealed 16:3 VA.R. 326 10/4/99-10/3/00
18 VAC 5-20-81 emer Added 16:3 VA.R. 326 10/4/99-10/3/00

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**Title 19. Public Safety**

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**Title 22. Social Services**

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**Title 24. Transportation and Motor Vehicles**

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**NOTICES OF INTENDED REGULATORY ACTION**

**Symbol Key**
† Indicates entries since last publication of the *Virginia Register*

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**TITLE 6. CRIMINAL JUSTICE AND CORRECTIONS**

**CRIMINAL JUSTICE SERVICES BOARD**

**Notice of Intended Regulatory Action**

Notice is hereby given in accordance with § 9-6.14:7.1 of the Code of Virginia that the Criminal Justice Services Board intends to consider amending regulations entitled: 6 VAC 20-60-10 et seq. *Rules Relating to Compulsory Minimum Training Standards for Dispatchers*. Prior rules pertaining to the training of dispatchers has been developed by a committee of practitioners representing the law-enforcement community. These training requirements are not legally defensible. A job task analysis has been conducted to determine the knowledge, skills and abilities required for the position. This was developed in conjunction with an advisory committee representing law enforcement, fire programs, emergency medical services, joint dispatch centers and affected associations. Potential amendments will revolve around subject matter requirements and the number of hours of training required. Opportunity for comment will be provided in a written format on draft rules and proposed rules and a public hearing will be conducted prior to consideration for adoption.

Statutory Authority: § 9-170 of the Code of Virginia.

Public comments may be submitted until January 5, 2000.

**Contact:** Judy Kirkendall, Job Task Analysis Administrator, Department of Criminal Justice Services, 805 E. Broad St., Richmond, VA 23219, telephone (804) 786-8003, FAX (804) 786-0410 or (804) 386-8732/TTY.

VA.R. Doc. No. R00-48; Filed November 5, 1999, 4:21 p.m.

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**TITLE 9. ENVIRONMENT**

**VIRGINIA WASTE MANAGEMENT BOARD**

† **Notice of Intended Regulatory Action**

Notice is hereby given in accordance with § 9-6.14:7.1 of the Code of Virginia that the Virginia Waste Management Board intends to consider amending regulations entitled: 9 VAC 20-130-10 et seq. *Regulations for the Development of Solid Waste Management Plans*. The purpose of the proposed action is to consider all aspects of the regulations for amendment; however, focal issues are expected to include the definition of the terms defining the recycle rate and the structure, methodology and frequency of amendments to the plans. The establishment of progress reports may be considered, including the frequency, methodology and structure of the reports. The agency intends to hold a public hearing on the proposed regulation after publication.


Public comments may be submitted until February 1, 2000.

**Contact:** Robert G. Wickline, Department of Environmental Quality, P.O. Box 10009, Richmond, VA 23240, telephone (804) 698-4213.

VA.R. Doc. No. R00-60; Filed December 1, 1999, 8:46 a.m.

† **Notice of Intended Regulatory Action**

Notice is hereby given in accordance with § 9-6.14:7.1 of the Code of Virginia that the Virginia Waste Management Board intends to consider amending regulations entitled: 9 VAC 20-140-10 et seq. *Regulations for the Certification of Recycling Machinery and Equipment for Tax Exemption Purposes*. The purpose of the proposed action is to amend the regulation to incorporate legislative changes made to the Code of Virginia since the regulations were adopted. The legislative changes include: (i) the increase in total credit allowable in a taxable year to 60%, as amended by the 1998 Acts of Assembly; (ii) carry over of tax credit from five to 10 years until the total credit amount is used and tax credit extended to year 2001, as amended by the 1996 Acts of Assembly; (iii) tax credit extended to January 1, 1997, as amended by the 1995 Acts of Assembly; (iv) the elimination of fixed location, as amended by the 1993 Acts of Assembly; and (v) the certification of items related to capitalized cost of equipment, as amended by the 1992 Acts of Assembly. The agency does not intend to hold a public hearing on the proposed regulation after publication.


Public comments may be submitted until February 1, 2000.

**Contact:** John E. Ely, Director, Office of Waste Programs, Department of Environmental Quality, P.O. Box 10009, Richmond, VA 23240, telephone (804) 698-4249 or FAX (804) 698-4327.

VA.R. Doc. No. R00-59; Filed December 1, 1999, 8:46 a.m.

† **Notice of Intended Regulatory Action**

Notice is hereby given in accordance with § 9-6.14:7.1 of the Code of Virginia that the Virginia Waste Management Board intends to consider amending regulations entitled: 9 VAC 20-180-10 et seq. *Regulations Governing the Commercial Transportation of Nonhazardous Municipal Solid Waste and Regulated Medical Waste by Truck*. The purpose of the proposed action is to adopt a regulation to govern the
transportation of certain wastes by truck. The new regulation will establish requirements necessary to protect public health, safety and welfare and the environment from pollution, impairment or destruction. As part of this action, the board will consider what procedural rules and forms may be necessary for filing of reports, as required by the statute, concerning loss or spillage of waste during transport. It will also consider rules and forms necessary to assure the Commonwealth that losses or spills are contained and removed as required by the statute and in accordance with all federal, state and local laws and regulations.

The agency intends to hold a public hearing on the proposed regulation after publication.

Statutory Authority: § 10.1-1454.2 of the Code of Virginia.

Public comments may be submitted until February 1, 2000.

Contact: Robert G. Wickline, Department of Environmental Quality, P.O. Box 10009, Richmond, VA 23240, telephone (804) 698-4213 or (804) 698-4327.

VA.R. Doc. No. R00-58; Filed December 1, 1999, 8:46 a.m.

STATE WATER CONTROL BOARD

† Notice of Intended Regulatory Action

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 consider amending regulations entitled: 9 VAC 25-260-5 et seq. Water Quality Standards. The purpose of the proposed action is to consider amending the water quality standards to update numerical or narrative criteria for dissolved oxygen for certain waters of the Chesapeake Bay and other naturally occurring low dissolved oxygen waters where current criteria are not appropriate.

Intent: The intent of this rulemaking is to protect designated and beneficial uses in the Commonwealth by adopting regulations that are technically correct and reasonable. These standards will be used in setting Virginia Pollutant Discharge Elimination System Permit limits and for evaluating the waters of the Commonwealth for inclusion in the federal Clean Water Act § 305(b) report and § 303(d) list. Waters not meeting standards will require development of a Total Maximum Daily Load under the federal Clean Water Act § 303(d).

Need: This rulemaking is needed because the current dissolved oxygen criteria (4mg/l minimum and 5mg/l daily average) are not appropriate in waters where the naturally occurring dissolved oxygen levels are below the existing criteria. These types of water may include the deep trenches of the Chesapeake Bay, the deep waters of stratified lakes and wetlands. Changes to these criteria are needed to facilitate permitting, monitoring and Total Maximum Daily Load development.

Alternatives Available to Meet the Need: Many alternatives in the subject areas listed will become available as DEQ staff and the public begin to review scientific data and the needs of permitting and monitoring. DEQ will work in conjunction with other state and federal agencies to consider various alternatives. Alternatives provided by the public will also be considered.

The department has not accepted nor rejected any alternatives as of yet. Some alternatives being considered by the agency now include, but are not limited to, the following:

• whether we should include alternative dissolved oxygen criteria for the Chesapeake Bay, wetlands and lakes;
• whether we should consider for adoption the Chesapeake Bay Living Resources Goals or Environmental Protection Agency criteria or some other criteria;
• whether zones for application of the criteria should be included and what these zones should be (i.e. application of a lower dissolved oxygen criterion one meter off the bottom (for the Bay), in the hypolimnion or below the thermocline (lakes), throughout the column (wetlands) or should some other zone be considered for application of the alternative criteria);
• whether to improve the specific narrative criterion that recognizes natural background differences for all waters. Currently natural conditions in surface water are recognized in the following sections of the regulation: 9 VAC 25-260-10.G, 9 VAC 25-260-50 and 9 VAC 25-260-250;

Request for Comments: Comments are requested on the intended regulatory action, including any ideas to assist the agency in the development of the proposal. Comments are requested on the costs and benefits of the stated alternatives or other alternatives. DEQ also requests comments as to whether the agency should use the participatory approach to assist the agency in the development of the proposal. The participatory approach is defined as a method for the use of (i) standing advisory committees, (ii) ad hoc advisory groups or panels, (iii) consultation with groups or individuals registering interest in working with the agency, or (iv) any combination thereof.

Public Meeting: A public meeting will be held on January 27, 2000, at 2 p.m. at the Virginia War Memorial, 621 South Belvidere Street, Richmond, Virginia 23220. Public comments on the intended regulatory action will be accepted until February 18, 2000. Please submit comments to Elleanore Daub, Office of Water Quality Programs, Department of Environmental Quality, 629 East Main Street, Richmond, VA 23219.

The agency intends to hold a public hearing on the proposed regulation after publication.

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

Public comments may be submitted until February 18, 2000.

Contact: Elleanore Daub, Environmental Program Planner, Department of Environmental Quality, P.O. Box 10009, Richmond, VA 23240, telephone (804) 698-4111 or (804) 698-4522.

VA.R. Doc. No. R00-57; Filed December 1, 1999, 8:46 a.m.
† Notice of Intended Regulatory Action

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 consider amending regulations entitled: 9 VAC 25-430-10 et seq. Roanoke River Basin Water Quality Management Plan. The purpose of the proposed action is to amend 9 VAC 25-430-20 of the current water quality management plan for the Town of Chase City. The amendment would allow for increased wasteload allocations for the existing wastewater treatment plant based on the results of mathematical modeling of water quality in the receiving water body.

A discharger currently permitted under the Virginia Pollutant Discharge Elimination System (VPDES) has requested revised waste load allocations in its VPDES permit. The VPDES permitted discharge is Chase City Municipal Sewage Treatment Plant (VPDES No. VA0076881), which discharges to Little Bluestone Creek. Chase City is in Mecklenburg County in Water Quality Management Area VII as defined in the Roanoke River Basin WQMP; this discharge is currently limited by waste load allocations in the WQMP. The Roanoke River Basin Water Quality Management Plan was originally adopted by the State Water Control Board December 9, 1976, and most recently amended January 6, 1999. Regulatory action, in the form of an amendment to the existing Roanoke River Basin WQMP, is necessary because State Water Control Law requires that VPDES permits be consistent with approved water quality management plans. Any time the allowable discharge in a VPDES permit which is limited by a waste load allocation in a WQMP is changed, the WQMP must be amended to reflect the new waste load allocation.

Water quality management plans identify water quality problems, consider alternative solutions, and recommend control measures needed to attain or maintain water quality standards. The existing Roanoke River Basin WQMP states, As more data becomes available, alternative methods of analysis can be considered, and in future updates of this plan, the appropriate action item(s) can be amended to reflect the use of these other equations and methods of analysis. (9 VAC 25-430-20). This amendment addresses the results of such an analysis. The affected segment is Little Bluestone Creek.

The Little Bluestone Creek segment was originally modeled in 1976 using the TVA Flat Water Equation. In 1997, a Streeter-Phelps mathematical model characteristic of Little Bluestone Creek was developed by conducting an intensive stream survey (B&B Consultants, Inc., November 1997). In 1997, the Town of Chase City requested increased wasteload allocations for their existing facility on the basis that a seasonally tiered approach would take advantage of higher flows and lower temperatures during winter months. Based on this model, waste load allocations were developed for the existing 0.600 mgd discharge which are predicted by the model to maintain the dissolved oxygen standard in Little Bluestone Creek.

Statement of Statutory Mandates: Water Quality Management Plans are required by § 303(e) of the federal Clean Water Act (WCA) [33 USC 1251] as implemented by 40 CFR 130, et seq. The State Water Control Law § 62.1-44.15(13) as implemented in the Permit Regulation states no permit may be issued: ... For any discharge inconsistent with a plan or plan amendment approved under Section 208(b) of the CWA [9 VAC 25-31-50, Prohibitions C.7., July 1996].

Statement of Conclusions: The Roanoke River Basin WQMP is an existing regulation. The Town of Chase City requested changes to the waste load allocations in its VPDES discharge permit. The proposed waste load allocations for the Town of Chase City discharge were predicted, through mathematical modeling, to be adequate to maintain water quality standards in Little Bluestone Creek. This amendment to the Roanoke River Basin WQMP will satisfy the intent of the original plan, ensure existing beneficial uses of the affected water body are maintained, and accommodate the request of the VPDES permitted discharge.

The proposed Town of Chase City STP discharge waste load allocation will enable the Town to more effectively manage its limited resources in an effort to protect the health and safety of the citizens of the community, and the citizens of the Commonwealth.

Statement of Process for Considering Alternatives:

Alternative 1: Amend the Roanoke River Basin Water Quality Management Plan as proposed.

This alternative is recommended. The specific recommended changes to the wasteload allocations for the affected discharge are as follows:

Delete the § 303(e) Wasteload Allocation (BOD₅) for Chase City Regional STP in WQMA VII - Clarksville-Chase City-Boydown, from Table 2 - Wasteload Allocations for Significant Discharges for Selected Alternative (9 VAC 25-430-20), and substitute a reference to Table 3; and add to Table 3 - Wasteload Allocations for Discharges with Tiered Permits (9 VAC 25-430-20), as follows:

<table>
<thead>
<tr>
<th>Water Quality Management Area (WQMA)</th>
<th>Study Area Name</th>
<th>Discharger</th>
<th>Months</th>
<th>Flow (mgd)</th>
<th>Effluent D.O. (mg/l)</th>
<th>cBOD₅ (lbs/day)</th>
<th>BOD₅ (mg/l)</th>
<th>Ammonia (mg/l)</th>
<th>TKN (mg/l)</th>
</tr>
</thead>
<tbody>
<tr>
<td>WQMA VII</td>
<td>Clarksville-Chase City-Boydown</td>
<td>Chase City Regional STP</td>
<td>Dec-Apr</td>
<td>0.60</td>
<td>7.0</td>
<td>125.22</td>
<td>25.0</td>
<td>3.4</td>
<td>8.8</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>May-Nov</td>
<td>0.60</td>
<td>6.0</td>
<td>65.04</td>
<td>13.0</td>
<td>1.8</td>
<td>4.2</td>
</tr>
</tbody>
</table>

NOTES:

1\(^{\text{cBOD₅/BOD₅ = 25/30}}\)
Alternative 2: Deregulate the existing Roanoke River Basin WQMP.

This alternative is not recommended at this time for this discharge. In the Executive Order 15 (94) review of the Water Quality Management Plan regulations, the Department of Environmental Quality (DEQ) proposed the repeal of 17 existing water quality management plans and replacement of the plans with one nonregulatory statewide plan. This proposal included the Roanoke River Basin WQMP. Deregulation and replacement of the current regulatory WQMP would eliminate the need for this proposed WQMP amendment. However, deregulation of the WQMP will not be completed in time to enable the affected discharge to increase loadings and remain in compliance with its VPDES permit.

Alternative 3: Maintain existing waste load allocations (No Action Alternative)

This alternative is not recommended. Receiving water quality modeling, based on data collected after the adoption of the existing WQMP, predicts that the proposed Town of Chase City waste load allocation will be adequate to maintain the dissolved oxygen water quality standard in the receiving water body. It is clear that the intent of the WQMP is to incorporate the results of analysis based on data made available after the adoption of the original WQMP. Additionally, because VPDES permitted discharges are required to be in conformance with WQMPs, unless the WQMP waste load allocations are changed, increased loadings requested by the permittee will not be permitted.

In compliance with the SWCB's Public Participation Guidelines (9 VAC 25-10-10 et seq.), the DEQ will, during the Notice of Intended Regulatory Action and the Notice of Public Comment, include the proposed amendment and alternatives, and request comments from the public on these and other alternatives. The DEQ will also request comments on the costs and benefits of these alternatives or any other alternatives the public may wish to provide.

The DEQ intends to hold one public meeting on this proposed amendment no less than 30 days after it is published in the Virginia Register of Regulations. The intent of the public meeting is to further explain the proposed amendment and to allow for verbal comments as requested from the public regarding the amendment. Additionally, the DEQ will form a Technical Advisory Committee to review the proposed amendment if there are more than five requests to do so within 30 days after publication of the Notice of Intended Regulatory Action in the Virginia Register of Regulations.

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

Public comments may be submitted until January 31, 2000.

Contact: John van Soestbergen, Environmental Engineer Senior, Department of Environmental Quality, 4949-A Cox Rd., Glen Allen, VA 23060, telephone (804) 527-5043 or FAX (804) 527-5106.

Notice of Intended Regulatory Action

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 consider amending regulations entitled: 12 VAC 30-50-10 et seq. Amount, Duration, and Scope of Medical and Remedial Care Services; 12 VAC 30-60-10 et seq. Standards Established and Methods Used to Assure High Quality Care; and 12 VAC 30-70-10-et seq. Methods and Standards for Establishing Payment Rates--Inpatient Hospital Care. The purpose of the proposed action is to clarify and expand upon limits to be placed upon coverage of inpatient hospital services by providers who are located outside the borders of the Commonwealth in order to promote the use of Virginia's inpatient hospitals. The agency does not intend to hold a public hearing on the proposed regulation after publication.

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

Public comments may be submitted until December 22, 1999, to Jim Cohen, Provider Operations, Department of Medical Assistance Services, 600 East Broad Street, Suite 1300, Richmond, VA 23219.

Contact: Victoria P. Simmons, Regulatory Coordinator, Department of Medical Assistance Services, 600 E. Broad St., Suite 1300, Richmond, VA 23219, telephone (804) 371-8850 or FAX (804) 371-4981.

VA.R. Doc. No. R00-40; Filed November 2, 1999, 10:16 a.m.

STATE MENTAL HEALTH, MENTAL RETARDATION AND SUBSTANCE ABUSE SERVICES BOARD

Notice of Intended Regulatory Action

Notice is hereby given in accordance with § 9-6.14-7.1 of the Code of Virginia that the State Mental Health, Mental Retardation and Substance Abuse Services Board intends to consider promulgating regulations entitled: 12 VAC 35-115-10 et seq. Rules and Regulations to Assure the Rights of Individuals Receiving Services from Providers of Mental Health, Mental Retardation and Substance Abuse Services. The purpose of the proposed action is to promulgate regulations that will protect the legal and human rights of all individuals who receive services in programs and facilities operated, funded, or licensed by the Department of Mental Health, Mental Retardation and Substance Abuse Services. The agency intends to hold a public hearing on the proposed regulation after publication.

Statutory Authority: § 37.1-84.1 of the Code of Virginia.

Public comments may be submitted until 5 p.m. on December 22, 1999, to Rita Hines, Acting Human Rights Director, Department of Mental Health, Mental Retardation and
Notice is hereby given in accordance with § 9-6.14:7.1 of the Code of Virginia that the Board of Medicine intends to consider amending regulations entitled: **18 VAC 85-50-10 et seq. Regulations Governing the Practice of Physician Assistants.** The purpose of the proposed action is to address the practice of physician assistants in hospital emergency departments. The agency intends to hold a public hearing on the proposed regulation after publication.

Statutory Authority: Chapter 29 (§ 54.1-2900 et seq.) of Title 54.1 of the Code of Virginia.

Public comments may be submitted until January 19, 2000.

Contact: Warren W. Koontz, M.D., Executive Director, Board of Medicine, 6606 W. Broad St., Richmond, VA 23230-1717, telephone (804) 662-9908 or FAX (804) 662-9943.

VA.R. Doc. No. R00-50; Filed November 23, 1999, 10:56 a.m.

† Notice of Intended Regulatory Action

Notice is hereby given in accordance with § 9-6.14:7.1 of the Code of Virginia that the Board of Nursing intends to consider amending regulations entitled: **18 VAC 90-30-10 et seq. Regulations Governing the Licensure of Nurse Practitioners.** The purpose of the proposed action is to amend regulations to increase fees pursuant to a statutory mandate in § 54.1-113 of the Code of Virginia for the board to levy fees sufficient to meet expenditures. The agency intends to hold a public hearing on the proposed regulation after publication.


Public comments may be submitted until December 22, 1999.

Contact: Nancy K. Durrett, R.N., Executive Director, Board of Nursing, 6606 W. Broad St., Richmond, VA 23230-1717, telephone (804) 662-9909 or FAX (804) 662-9943.

VA.R. Doc. No. R00-45; Filed November 3, 1999, 11:48 a.m.

### BOARD OF MEDICINE

#### † Notice of Intended Regulatory Action

Notice is hereby given in accordance with § 9-6.14:7.1 of the Code of Virginia that the Board of Nursing intends to consider amending regulations entitled: **18 VAC 90-40-10 et seq. Regulations for Prescriptive Authority for Nurse Practitioners.** The purpose of the proposed action is to amend regulations to increase fees pursuant to a statutory mandate in § 54.1-113 of the Code of Virginia for the board to levy fees sufficient to meet expenditures. The agency intends to hold a public hearing on the proposed regulation after publication.


Public comments may be submitted until December 22, 1999.

Contact: Nancy K. Durrett, R.N., Executive Director, Board of Nursing, 6606 W. Broad St., Richmond, VA 23230-1717, telephone (804) 662-9909 or FAX (804) 662-9943.

VA.R. Doc. No. R00-45; Filed November 3, 1999, 11:48 a.m.

#### Notice of Intended Regulatory Action

Notice is hereby given in accordance with § 9-6.14:7.1 of the Code of Virginia that the Board of Nursing intends to consider amending regulations entitled: **18 VAC 90-40-10 et seq. Regulations for Prescriptive Authority for Nurse Practitioners.** The purpose of the proposed action is to amend regulations to increase fees pursuant to a statutory mandate in § 54.1-113 of the Code of Virginia for the board to levy fees sufficient to meet expenditures. The agency intends to hold a public hearing on the proposed regulation after publication.


Public comments may be submitted until December 22, 1999.

Contact: Nancy K. Durrett, R.N., Executive Director, Board of Nursing, 6606 W. Broad St., Richmond, VA 23230-1717, telephone (804) 662-9909 or FAX (804) 662-9943.

VA.R. Doc. No. R00-45; Filed November 3, 1999, 11:48 a.m.

### BOARD OF MEDICINE

#### † Notice of Intended Regulatory Action

Notice is hereby given in accordance with § 9-6.14:7.1 of the Code of Virginia that the Board of Nursing intends to consider amending regulations entitled: **18 VAC 90-40-10 et seq. Regulations for Prescriptive Authority for Nurse Practitioners.** The purpose of the proposed action is to amend regulations to increase fees pursuant to a statutory mandate in § 54.1-113 of the Code of Virginia for the board to levy fees sufficient to meet expenditures. The agency intends to hold a public hearing on the proposed regulation after publication.


Public comments may be submitted until December 22, 1999.

Contact: Nancy K. Durrett, R.N., Executive Director, Board of Nursing, 6606 W. Broad St., Richmond, VA 23230-1717, telephone (804) 662-9909 or FAX (804) 662-9943.

VA.R. Doc. No. R00-45; Filed November 3, 1999, 11:48 a.m.

#### Notice of Intended Regulatory Action

Notice is hereby given in accordance with § 9-6.14:7.1 of the Code of Virginia that the Board of Nursing intends to consider amending regulations entitled: **18 VAC 90-40-10 et seq. Regulations for Prescriptive Authority for Nurse Practitioners.** The purpose of the proposed action is to amend regulations to increase fees pursuant to a statutory mandate in § 54.1-113 of the Code of Virginia for the board to levy fees sufficient to meet expenditures. The agency intends to hold a public hearing on the proposed regulation after publication.


Public comments may be submitted until December 22, 1999.

Contact: Nancy K. Durrett, R.N., Executive Director, Board of Nursing, 6606 W. Broad St., Richmond, VA 23230-1717, telephone (804) 662-9909 or FAX (804) 662-9943.

VA.R. Doc. No. R00-45; Filed November 3, 1999, 11:48 a.m.
Practitioners.

The purpose of the proposed action is to amend regulations to increase fees pursuant to a statutory mandate in § 54.1-113 of the Code of Virginia for the board to levy fees sufficient to meet expenditures. The agency intends to hold a public hearing on the proposed regulation after publication.


Public comments may be submitted until December 22, 1999.

Contact: Nancy K. Durrett, R.N., Executive Director, Board of Nursing, 6606 W. Broad St., Richmond, VA 23230-1717, telephone (804) 662-9909 or FAX (804) 662-9943.

VA.R. Doc. No. R00-43; Filed November 3, 1999, 11:48 a.m.

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BOARD OF LICENSED PROFESSIONAL COUNSELORS, MARRIAGE AND FAMILY THERAPISTS AND SUBSTANCE ABUSE TREATMENT PROFESSIONALS

† Notice of Intended Regulatory Action

Notice is hereby given in accordance with § 9-6.14:7.1 of the Code of Virginia that the Board of Licensed Professional Counselors, Marriage and Family Therapists and Substance Abuse Treatment Professionals intends to consider amending regulations entitled: 18 VAC 115-60-10 et seq. Regulations Governing the Practice of Licensed Substance Abuse Treatment Practitioners. The purpose of the proposed action is to consider an increase in fees for licensees to comply with a statutory requirement for revenues to be sufficient to cover the expenditures of the board. The agency intends to hold a public hearing on the proposed regulation after publication.

Statutory Authority: § 54.1-2400 and Chapter 36 (§ 54.1-3600 et seq.) of Title 54.1 of the Code of Virginia.

Public comments may be submitted until January 19, 2000.

Contact: Janet D. Delorme, Deputy Executive Director, Board of Psychology, 6606 W. Broad St., Richmond, VA 23230-1717, telephone (804) 662-9575 or FAX (804) 662-9943.

VA.R. Doc. No. R00-65; Filed December 1, 1999, 11:36 a.m.
† Notice of Intended Regulatory Action

Notice is hereby given in accordance with § 9-6.14:7.1 of the Code of Virginia that the State Board of Social Services intends to consider amending regulations entitled: 22 VAC 40-720-10 et seq. Child Protective Services Release of Information to Family Advocacy Representative of the United States Armed Forces. The purpose of the proposed action is to amend the definition of “founded” to ensure that it is consistent with the definition of “founded” in the regulation entitled Child Protective Services (22 VAC 40-705-10 et seq.), which requires “preponderance of the evidence” for a founded disposition. The agency does not intend to hold a public hearing on the proposed regulation after publication.

Statutory Authority: §§ 63.1-25 and 63.1-248.6 of the Code of Virginia

Public comments may be submitted until January 19, 2000.

Contact: Betty Jo Zarris, Program Consultant, Department of Social Services, 730 E. Broad St., Richmond, VA 23219, telephone (804) 692-1220 or FAX (804) 692-2215.

VA.R. Doc. No. R00-63; Filed December 1, 1999, 8:20 a.m.

† Notice of Intended Regulatory Action

Notice is hereby given in accordance with § 9-6.14:7.1 of the Code of Virginia that the State Board of Social Services intends to consider repealing regulations entitled: 22 VAC 40-790-10 et seq. Minimum Standards for Local Agency Operated Volunteer Respite Child Care Programs. The purpose of the proposed action is to repeal this regulation because it is not essential to protect the health, safety or welfare of citizens, or for the efficient, economical performance of an important government function. There are no programs being operated which fall under this program. The agency does not intend to hold a public hearing on the proposed regulation after publication.

Statutory Authority: §§ 63.1-25 and 63.1-55 of the Code of Virginia

Public comments may be submitted until January 19, 2000.

Contact: Phyllis S. Parrish, Program Consultant, Department of Social Services, 730 E. Broad St., Richmond, VA 23219, telephone (804) 692-1895 or FAX (804) 692-1869.

VA.R. Doc. No. R00-62; Filed December 1, 1999, 8:20 a.m.
TITIE 9. ENVIRONMENT

STATE AIR POLLUTION CONTROL BOARD

January 25, 2000 - 10 a.m. -- Public Hearing
Department of Environmental Quality, Main Street Centre,
600 East Main Street, Lower Level, Conference Room,
Richmond, Virginia.

February 18, 2000 - Public 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 State Air Pollution Control Board intends to amend regulations entitled: 9 VAC 5-510-10 et seq. Nonmetallic Mineral Processing General Permit. The general permit establishes terms and conditions that form the legally enforceable basis for the implementation of all regulatory and statutory requirements applicable to new and existing emissions units in nonmetallic mineral mining facilities. Application for coverage under the general permit is voluntary; however, for any nonmetallic mineral processing facility to be covered by the general permit, all equipment and emissions units at a stationary source that make up the nonmetallic mineral processing facility shall be covered by the general permit. The general permit requires the owners of existing and new emissions units in the nonmetallic mineral processing industry to construct, modify, relocate and operate within the terms and conditions of the general permit. The terms and conditions of the general permit cover emission standards, emission testing, emission monitoring, recordkeeping, reporting, compliance and enforcement.

Localities Affected: There is no locality which will bear any identified disproportionate material air quality impact due to the proposed regulation which would not be experienced by other localities.

Location of Proposal: The proposal and any other supporting documents may be examined by the public at the department's Office of Air Regulatory Development (Eighth Floor), 629 East Main Street, Richmond, Virginia and the department's regional offices (listed below) between 8:30 a.m. and 4:30 p.m. of each business day until the close of the public comment period.

Southwest Regional Office
Department of Environmental Quality
355 Deadmore Street
Abingdon, Virginia
Ph: (540) 676-4800

West Central Regional Office
Department of Environmental Quality
3019 Peters Creek Road
Roanoke, Virginia
Ph: (540) 562-6700

Lynchburg Satellite Office
Department of Environmental Quality
7705 Timberlake Road
Lynchburg, Virginia
Ph: (804) 582-5120

Valley Regional Office
Department of Environmental Quality
4411 Early Road
Harrisonburg, Virginia 22801
Ph: (540) 574-7800

Fredericksburg Satellite Office
Department of Environmental Quality
806 Westwood Office Park
Fredericksburg, Virginia
Ph: (540) 899-4600

Northern Regional Office
Department of Environmental Quality
13901 Crown Court
Woodbridge, Virginia
Ph: (703) 583-3800

Piedmont Regional Office
Department of Environmental Quality
4949-A Cox Road
Glen Allen, Virginia
Ph: (804) 527-5020

Tidewater Regional Office
Department of Environmental Quality
5636 Southern Boulevard
Virginia Beach, Virginia
Ph: (757) 518-2000

Public comments may be submitted until 4:30 p.m. February 18, 2000, to the Director, Office of Air Regulatory Development, Department of Environmental Quality, P.O. Box 10009, Richmond, Virginia 23240.

**Contact:** Robert Mann, Director, Office of Air Regulatory Development, Department of Environmental Quality, P.O. Box 10009, Richmond, VA 23240, telephone (804) 698-4419, FAX (804) 698-4510, toll-free 1-800-592-5482, or (804) 698-4021/TTY.

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**TITLE 12. HEALTH**

**DEPARTMENT OF MEDICAL ASSISTANCE SERVICES**

**February 18, 2000** - Public 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: **12 VAC 30-50-10 et seq. Amount, Duration, and Scope of Medical and Remedial Care Services.** These proposed regulations establish educational and licensing criteria for staff of community services boards when the staff renders services to Medicaid recipients and seeks reimbursement from Medicaid.

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

Public comments may be submitted until February 18, 2000, to Pam Fisher, Analyst, Policy Division, Department of Medical Assistance Services, 600 East Broad Street, Suite 1300, Richmond, VA 23219.

**Contact:** Victoria Simmons, Regulatory Coordinator, Department of Medical Assistance Services, 600 E. Broad St., Suite 1300, Richmond, VA 23219, telephone (804) 786-7959 or FAX (804) 786-1680.

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**TITLE 18. PROFESSIONAL AND OCCUPATIONAL REGULATION**

**BOARD OF AUDIOLOGY AND SPEECH-LANGUAGE PATHOLOGY**

**February 17, 2000 - 9 a.m. -- Public Hearing**

Department of Health Professions, 6606 West Broad Street, 5th Floor, Conference Room, Richmond, Virginia.

**February 18, 2000** - Public 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 Board of Audiology and Speech-Language Pathology intends to amend regulations entitled: **18 VAC 30-20-10 et seq. Regulations of the Board of Audiology and Speech-Language Pathology.** The amendments are proposed to establish requirements for the licensure of school speech-language pathologists.

Statutory Authority: § 54.1-2400 and Chapter 26 (§ 54.1-2600 et seq.) of Title 54.1 of the Code of Virginia.

**Contact:** Elizabeth Young Tisdale, Executive Director, Board of Audiology and Speech-Language Pathology, 6606 W. Broad St., 4th Floor, Richmond, VA 23230-1717, telephone (804) 662-9111.

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**TITLE 22. SOCIAL SERVICES**

**STATE BOARD OF SOCIAL SERVICES**

**February 18, 2000** - Public 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 State Board of Social Services intends to repeal regulations entitled: **22 VAC 40-30-10 et seq. Food Stamp Program - Resource Exclusion.** This action proposes the repeal of the regulation that allows households applying for or receiving food stamps to have a special savings account excluded from being counted in determining eligibility for food stamps. Virginia no longer has federal approval to allow the expansion of the resource exclusion.

Statutory Authority: § 63.1-25 of the Code of Virginia.

**Contact:** Patricia Duva, Food Stamp Program Manager, Department of Social Services, Division of Temporary Assistance Programs, 730 E. Broad St., Richmond, VA 23219, telephone (804) 692-1712 or FAX (804) 692-1704.

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February 18, 2000 - Public 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 State Board of Social Services intends to adopt regulations entitled: **22 VAC 40-325-10 et seq. Fraud Reduction/Elimination Effort.** The purpose of the proposed regulation is to add a new chapter to the Virginia Administrative Code in order to have regulatory authority to operate a statewide fraud control program as mandated in § 63.1-58.2 of the Code of Virginia.

Statutory Authority: § 63.1-58.2 of the Code of Virginia.

**Contact:** Jeff Brown, Program Manager, Department of Social Services, 730 E. Broad St., Richmond, VA 23219, telephone (804) 786-9170 or FAX (804) 692-0007.
TITLE 9. ENVIRONMENT

STATE AIR POLLUTION CONTROL BOARD

REGISTRAR'S NOTICE: Section 9-6.14:4.1 C 11 of the Code of Virginia excludes from Article 2 of the Administrative Process Act general permits issued by the State Air Pollution Control Board pursuant to Chapter 13 (§ 10.1-1300 et seq.) of Title 10.1 of the Code of Virginia if the board proceeds under the following conditions: (i) provides a Notice of Intended Regulatory Action (NOIRA) in conformance with the provisions of § 9-6.14:7.1 B; (ii) no less than 30 days from publication of the NOIRA, forms a technical advisory committee composed of relevant stakeholders, including potentially affected citizens groups, to assist in the development of the general permit; (iii) provides notice and receives oral and written comment as provided in § 9-6.14:7.1 F; and (iv) conducts at least one public hearing on the proposed general permit. The State Air Pollution Control Board will receive, consider and respond to petitions by any interested person at any time with respect to reconsideration or revision.

Title of Regulation: 9 VAC 5-510-10 et seq. Nonmetallic Mineral Processing General Permit.


Public Hearing Date: January 25, 2000 - 10 a.m.

Public comments may be submitted until February 18, 2000.

(See Calendar of Events section for additional information)

Summary:

The proposed general permit establishes terms and conditions that form the legally enforceable basis for the implementation of all regulatory and statutory requirements applicable to new and existing emissions units in nonmetallic mineral mining facilities. Application for coverage under the general permit is voluntary; however, for any nonmetallic mineral processing facility to be covered by the general permit, all equipment and emissions units at a stationary source that make up the nonmetallic mineral processing facility shall be covered by the general permit. The general permit requires the owners of existing and new emissions units in the nonmetallic mineral processing industry to construct, modify, relocate and operate within the terms and conditions of the general permit. The terms and conditions of the general permit cover emission standards, emission testing, emission monitoring, recordkeeping, reporting, compliance and enforcement.

Locality Affected: There is no locality which will bear any identified disproportionate material air quality impact due to the proposed general permit which would not be experienced by other localities.

Comparison With Statutory Mandates:

The proposed general permit does not exceed the specific minimum requirements of any legally binding state or federal mandate.

CHAPTER 510.
NONMETALLIC MINERAL PROCESSING GENERAL PERMIT.

PART I.
DEFINITIONS.

9 VAC 5-510-10. General.

A. For the purpose of this chapter or any orders issued by the board, the words or terms shall have the meanings given them in 9 VAC 5-510-20.

B. Unless specifically defined in the Virginia Air Pollution Control Law or in this chapter, terms used shall have the meaning given them by 9 VAC 5-10-20 (general definitions, Regulations for the Control and Abatement of Air Pollution), 9 VAC 5-170-20 (definitions, Regulation for General Administration), or commonly ascribed to them by recognized authorities, in that order of priority.

9 VAC 5-510-20. Terms defined.

"Actual emissions" means the actual emissions of a pollutant from a stationary source or emissions unit reflecting the rate, in tons per year, at which the source or unit actually emitted the pollutant during the most recent annual period. Actual emissions shall be calculated using the source or unit's actual operating hours, in place emission controls, production rates, and types of materials processed, stored, or combusted during the annual period. Valid continuous emission monitoring data or source test data shall be preferentially used to determine actual emissions. In the absence of valid continuous emissions monitoring data or source test data, the basis for determining actual emissions shall be any or all of the following as may be determined by the department: throughputs of process materials; throughputs of materials stored; usage of materials; data provided in manufacturer's product specifications, material volatile organic compound content reports or laboratory analyses; other information required by this chapter and other regulations of the board; or information requested in writing by the department. All calculations of actual emissions shall use U.S. EPA or department-approved methods, including emission factors and assumptions.

"Annual period" means a period of 12 consecutive months determined on a rolling basis with a new 12-month period beginning on the first day of each calendar month.
"Federal operating permit" means a permit issued pursuant to Article 1 (9 VAC 5-80-50 et seq.) of Part II of 9 VAC 5 Chapter 80.

"Fugitive dust" means particulate matter composed of soil or other materials, or both, of natural origin. Fugitive dust may include emissions from haul roads, wind erosion of exposed surfaces and storage piles and other activities in which the material is either removed, stored, transported or redistributed.

"Fugitive emissions" means emissions which are generated by industrial or other activities and which do not pass through a stack, chimney, vent or other functionally equivalent opening, but which may escape from openings (such as windows, doors, ill-fitting closures or poorly maintained equipment) or material handling equipment.

"General permit" means the terms and conditions in Part IV of this chapter that meet the requirements of Part III of this chapter and issued under the provisions 9 VAC 5-80-1030 and 9 VAC 5-80-1250.

"New source review program" means a program for the preconstruction review and permitting of new stationary sources or emissions units or expansions to existing ones in accordance with regulations promulgated to implement the requirements of §§ 110(a)(2)(C), 165 (relating to permits in nonattainment areas), and 112 (relating to permits in nonattainment areas), and 116 (relating to permits for hazardous air pollutants) of the federal Clean Air Act.

"Nonmetallic mineral" means any of the following minerals:

1. Crushed and broken stone, including limestone, dolomite, granite, traprock, sandstone, quartz, quartzite, marl, marble, slate, shale, oil shale, and shell.
2. Sand and gravel.
3. Clay including kaolin, fireclay, bentonite, fuller's earth, ball clay, and common clay.
4. Rock salt.
5. Gypsum.
6. Sodium compounds, including sodium carbonate, sodium chloride, and sodium sulfate.
7. Pumice.
8. Gilsonite.
9. Talc and pyrophyllite.
10. Boron, including borax, kernite, and colemanite.
12. Fluorospar.
13. Feldspar.
15. Perlite.
16. Vermiculite.

17. Mica.
18. Kyanite, including andalusite, sillimanite, topaz, and dumortierite.

"Nonmetallic mineral processing facility" means any combination of equipment that is used to crush or grind any nonmetallic mineral wherever located, including lime plants, power plants, steel mills, asphalt concrete plants, Portland cement plants, or any other facility processing nonmetallic minerals. Includes activity at facilities where the primary purpose is classified as Standard Industrial Classification (SIC) Code 1411, 1422, 1423, 1429, 1442, 1446, 1455, 1459, and 1499 as described in the Standard Industrial Classification Manual (see 9 VAC 5-20-21). Includes stationary diesel engines. Also includes activity at facilities classified under other SIC codes that may be colocated within the nonmetallic mineral processing area, unless they are expressly excluded by this chapter.

"Permittee" means the owner of a nonmetallic mineral processing facility covered under this general permit.

"Portable facility" means any nonmetallic mineral processing facility that is mounted on any chassis or skids and may be moved by the application of a lifting or pulling force. In addition, there shall be no cable, chain, turnbuckle, bolt or other means (except electrical connections) by which any piece of equipment is attached or clamped to any anchor, slab, or structure, including bedrock that must be removed prior to the application of a lifting or pulling force for the purpose of transporting the unit.

"Potential to emit" means the maximum capacity of a stationary source to emit any air pollutant under its physical and operational design. Any physical or operational limitation on the capacity of a source to emit an air pollutant, including air pollution control equipment and restrictions on hours of operation or on the type or amount of material combusted, stored, or processed, shall be treated as part of its design if the limitation is state and federally enforceable.

"Relocation" means a change in physical location of a nonmetallic mineral processing facility or an emissions unit from one nonmetallic mineral processing facility to another nonmetallic mineral processing facility.

"Spreadsheet" means the Aggregate Processing Emission Calculation Spreadsheet and the Stationary Diesel Engine Emission Calculation Spreadsheet.

"State operating permit" means a permit issued pursuant to Article 5 (9 VAC 5-80-800 et seq.) of Part II of 9 VAC 5 Chapter 80.

PART II.
GENERAL PROVISIONS.

9 VAC 5-510-30. Purpose and basis.

A. The purpose of the general permit is to require the owners of existing and new emissions units in the nonmetallic mineral processing industry to construct, modify, relocate and operate within the terms and conditions of a general permit that forms the legally enforceable basis for all regulatory and statutory requirements.
B. This general permit is being issued under the authority of 9 VAC 5-80-1030 and 9 VAC 5-80-1250.

C. This chapter does not require any owner to apply for coverage under the general permit but provides the opportunity for an owner to apply for coverage if the nonmetallic mineral processing facility meets the applicability criteria in 9 VAC 5-510-40 and all other requirements of this chapter.

9 VAC 5-510-40. Applicability.

A. This chapter applies to any nonmetallic mineral processing facility.

B. This chapter applies throughout the Commonwealth of Virginia.

C. Nothing in this section shall prevent any owner of a stationary source from obtaining authorization to operate the nonmetallic mineral processing facilities under the general permit while operating the remainder of the source under any permit issued pursuant to 9 VAC 5 Chapter 80.

9 VAC 5-510-50. General.

A. The permittee shall operate the stationary source in conformance with all applicable regulations of the board.

B. Nonmetallic mineral processing facilities desiring authority to operate under the general permit shall register with the department as required under 9 VAC 5-20-160. For emissions units or groups of emissions units covered, the completion or updating of the spreadsheet shall be considered registration.

C. No provision of this chapter shall limit the power of the board to issue an operating permit pursuant to 9 VAC 5 Chapter 80.

D. This chapter shall not relieve any stationary source from complying with the requirements of (i) any otherwise applicable permit issued under 9 VAC 5 Chapter 80, (ii) any condition or term of any permit issued under 9 VAC 5 Chapter 80, or (iii) any provision of a permit program. This chapter shall not preclude issuance of any permit with conditions or terms necessary to ensure compliance with this chapter.

E. For any nonmetallic mineral processing facility to be covered by the general permit, all equipment and emissions units at a stationary source that make up the nonmetallic mineral processing facility shall be covered by the general permit.

F. By the adoption of this chapter, the board confers upon the department the administrative, enforcement and decision making authority enumerated herein.

G. The act of granting or denying an application for authority to operate under the general permit shall not be subject to judicial review.

H. Any decisions of the board or department made pursuant to this chapter may be appealed pursuant to 9 VAC 5-170-200.

I. This general permit may not be used to meet the requirements of 9 VAC 5-80-120.

9 VAC 5-510-60. Existence of permit no defense.

The existence of a permit under this chapter shall not constitute a defense of a violation of the Virginia Air Pollution Control Law or the regulations of the board and shall not relieve any owner of the responsibility to comply with any applicable regulations, laws, ordinances and orders of the governmental entities having jurisdiction.

9 VAC 5-510-70. Circumvention.

A. No owner or other person shall cause or permit the installation or use of any device or any means which, without resulting in reduction in the total amount of air pollutants emitted, conceals or dilutes an emission of air pollutants which would otherwise violate this chapter. Such concealment includes, but is not limited to, either of the following:

1. The use of gaseous diluents to achieve compliance with a visible emissions standard or with a standard which is based on the concentration of a pollutant in gases discharged to the atmosphere.

2. The piecemeal carrying out of an operation to avoid coverage by a standard that applies only to operations larger than a specified size.

B. This section does not prohibit the construction of a stack.

C. Regardless of the exemptions provided in this chapter, permits shall be required of owners who circumvent the requirements of this chapter by causing or allowing a pattern of ownership or development over a geographic area of a source which, except for the pattern of ownership or development, would otherwise require a permit.

9 VAC 5-510-80. Enforcement of a general permit.

A. The following general requirements apply:

1. Pursuant to § 10.1-1322, failure to comply with any term or condition of the general permit shall be considered a violation of the Virginia Air Pollution Control Law.

2. Authorization to operate under the general permit may be revoked or terminated if the owner does any of the following:

   a. Knowingly makes material misstatements in the application for coverage or any amendments thereto.

   b. Violates, fails, neglects or refuses to comply with (i) the terms or conditions of the permit, (ii) any applicable requirements, or (iii) the applicable provisions of this chapter.

3. The department may suspend, under such conditions and for such period of time as the department may prescribe, any authorization to operate under the general permit for any of the grounds for revocation or termination contained in subdivision 2 of this subsection or for any other violations of the regulations of the board.

B. The following requirements apply with respect to penalties:
1. An owner who violates or fails, neglects or refuses to obey any provision of this chapter or the Virginia Air Pollution Control Law, any applicable requirement, or any permit term or condition shall be subject to the provisions of § 10.1-1316 of the Virginia Air Pollution Control Law.

2. Any owner who knowingly violates any provision of this chapter or the Virginia Air Pollution Control Law, any applicable requirement, or any permit term or condition shall be subject to the provisions of § 10.1-1320 of the Virginia Air Pollution Control Law.

3. Any owner who knowingly makes any false statement, representation or certification in any form, in any notice or report required by a permit, or who knowingly renders inaccurate any required monitoring device or method shall be subject to the provisions of § 10.1-1320 of the Virginia Air Pollution Control Law.

C. The following requirements apply with respect to appeals:

1. The department shall notify the applicant in writing of its decision, with its reasons, to suspend, revoke or terminate the authorization to operate under the general permit in accordance with the Administrative Process Act.

2. Appeal from any decision of the department under subdivision 1 of this subsection may be taken pursuant to 9 VAC 5-170-200, § 10.1-1318 of the Virginia Air Pollution Control Law, and the Administrative Process Act.

D. The following requirements apply with respect to inspections and right of entry:

1. The director, as authorized under § 10.1-1307.3 of the Virginia Air Pollution Control Law and 9 VAC 5-170-60, has the authority to require that air pollution records and reports be made available upon request and to require owners to develop, maintain, and make available such other records and information as are deemed necessary for the proper enforcement of the general permit.

2. The director, as authorized under § 10.1-1307.3 of the Virginia Air Pollution Control Law, has the authority, upon presenting appropriate credentials to the owner, to do the following:

   a. Enter without delay and at reasonable times any business establishment, construction site, or other area, workplace, or environment in the Commonwealth; and

   b. Inspect and investigate during regular working hours and at other reasonable times, and within reasonable limits and in a reasonable manner, without prior notice, unless such notice is authorized by the department or its representative, any such business establishment or place of employment and all pertinent conditions, structures, machines, apparatus, devices, equipment, and materials therein, and question privately any such employer, officer, owner, operator, agent, or employee. If such entry or inspection is refused, prohibited, or otherwise interfered with, the department shall have the power to seek from a court having equity jurisdiction an order compelling such entry or inspection.

E. The board may enforce the general permit through the use of other enforcement mechanisms such as consent orders and special orders. The procedures for using these mechanisms are contained in 9 VAC 5-170-80 and 9 VAC 5-170-120 and in §§ 10.1-1307 D, 10.1-1309, and 10.1-1309.1 of the Virginia Air Pollution Control Law.

PART III.
GENERAL PERMIT ADMINISTRATIVE PROCEDURES.

9 VAC 5-510-90. Requirements for department issuance of authority to construct, modify, relocate and operate under the general permit.

A. The department may issue an authorization to construct, modify, relocate and operate under the general permit for a source that meets the applicability criteria in 9 VAC 5-510-40.

B. After issuance of the initial authorization to construct, modify, relocate and operate under the general permit for a nonmetallic mineral processing facility, new and modified emissions units at the facility may operate under the general permit in accordance with the terms and conditions of the general permit.

C. Stationary sources or emissions units subject to the general permit shall comply with all requirements applicable to other permits issued under 9 VAC 5 Chapter 80.

D. The general permit shall be issued in accordance with § 9-6.14:4.1 C 11 of the Administrative Process Act.

9 VAC 5-510-100. Applications for coverage under the general permit and notices of termination.

A. Nonmetallic mineral processing facilities that qualify for the general permit may apply to the department for coverage under the terms and conditions of the general permit.

B. A single application is required identifying each emissions unit or groups of emissions units to be covered by the general permit. The application shall be submitted according to the requirements of this section, 9 VAC 5-510-110 and procedures approved by the department. Where several emissions units are included in one stationary source, a single application covering all units in the source shall be submitted. A separate application is required for each stationary source subject to this chapter.

C. The application shall meet the requirements of this chapter and include all information necessary to determine qualification for and to assure compliance with the general permit.

D. Coverage under the general permit may be terminated by the permittee by filing a completed notice of termination. The notice of termination shall be filed in situations (i) where all emissions associated with the facility authorized by the general permit are eliminated, (ii) when the facility authorized by the general permit has been determined to be shutdown in accordance with 9 VAC 5-20-220, or (iii) where the facility is covered by a permit issued under the provisions of 9 VAC 5 Chapter 80.
E. Any application form, report, compliance certification, or other document required to be submitted to the department under this chapter shall meet the requirements of 9 VAC 5-20-230.

F. Any applicant who fails to submit any relevant facts or who has submitted incorrect information in an application shall, upon becoming aware of such failure or incorrect submittal, promptly submit such supplementary facts or corrected information.

9 VAC 5-510-110. Required information for initial applications.

A. The department shall furnish application forms to applicants. The information required by this section shall be determined and presented according to procedures and methods acceptable to the department.

B. Each initial application for coverage under the general permit shall include, but not be limited to, the following:

1. Information specified in 9 VAC 5-510-130.

2. Additional information that the department deems necessary to implement and enforce other requirements of the regulations of the board or to determine the applicability of such requirements.

3. Any additional information or documentation that the department deems necessary to review and analyze the air pollution aspects of the source.

4. A certification of compliance with all applicable requirements by a responsible official.

9 VAC 5-510-120. Required information for modifications and relocations.

The following information is required prior to modification of a facility or relocation of an emission unit:

1. The permittee shall provide written notification to the regional director, including a revised spreadsheet and a plant layout or flow diagram each time equipment is installed at a facility. The notification shall be submitted at least 15 days before the equipment is installed at the facility unless otherwise approved by the regional director.

2. The permittee shall provide written notification to the regional director, including a revised spreadsheet and a plant layout or flow diagram, each time an emissions unit is relocated. This notification shall be submitted within 15 days of the date the emissions unit leaves the facility, unless otherwise approved by the regional director.

9 VAC 5-510-130. Application statement and notice of termination forms.

A. The required statement for initial applications shall be in the following form:

1. Name of company:

2. Name of owner:

3. Name of plant:

4. Mailing address:

5. Plant site manager or contact:

6. Telephone number:

7. Fax number:

8. Registration number:
   (new sites leave blank)

9. Project name:

10. Description of activity (minerals processed):

11. Primary standard industrial classification (SIC) code:
    Secondary SIC codes:

12. County:

13. Location:

14. A spreadsheet and a plant layout or flow diagram for all emissions units at the nonmetallic mineral processing facility for which the application is submitted. The following information shall be included for each piece of equipment:

   a. The total rated crushing capacity for all primary crushers at the facility.

   b. A description of the equipment, including applicability of any standard of performance under 40 CFR Part 60, as follows:

      (1) Widths of belt conveyors.

      (2) Dimensions of the top screen and configuration (e.g. triple deck) of the screening unit.

      (3) Rated capacity (ton/hr) of each crusher.

      (4) Rated capacity (ton or ton/hr) of all other equipment not exempt from new source review program requirements.

   c. A unique ID number.

   d. The date the equipment was manufactured.

   e. The dates any required performance testing was conducted and submitted to the regional director.

   f. Total rated horsepower of all stationary diesel engines.

   g. Maximum hours of operation or gallons of fuel to be consumed, for each stationary diesel engine.

   h. A description and accounting of all emissions of regulated air pollutants from all emissions units or groups of emissions units. Emissions shall be
determined in a manner acceptable to the department. Fugitive emissions shall be included in the application as provided in the spreadsheet.

15. Calculations on which the information in subdivision 14 h of this subsection is based to the extent not covered in the spreadsheet, Any calculations shall include sufficient detail to permit assessment of the validity of the calculations and to enable the department to verify the actual emissions and potential to emit for the stationary source. This may include, but not be limited to, the following:

a. Actual and potential emissions in tons per annual period for each emissions unit or group of emission units.

b. Information needed to determine emissions as follows: fuels, fuel use, raw materials, production rates, loading rates, and operating schedules.

c. Identification and description of air pollution control equipment and compliance monitoring devices or activities.

16. Attach to this application an aerial photo or scale map which clearly shows the property boundaries and plant site.

Certification:

"I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering and evaluating the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations."

Signatures: Date:

Name of persons signing above: (printed or typed)

Titles:

For Department use only:

Accepted/Not accepted by: Date:

Required attachments:

1. Local government certification form (greenfield sites only)

2. Spreadsheet and a plant layout or flow diagram

3. Aerial photo or scale map

The required notice of termination shall be in the following form:

NONMETALLIC MINERAL PROCESSING GENERAL PERMIT
NOTICE OF TERMINATION

1. Nonmetallic mineral processing general permit number:

2. Reason for termination request (Choose one):

a. The emissions associated with the facility have been eliminated.

b. The facility authorized by the general permit has been determined to be shutdown in accordance with 9 VAC 5-20-220.

c. A permit has been issued for the facility covered by the general permit issued under the provisions of 9 VAC 5 Chapter 80.

3. On what date do you wish coverage under this general permit to terminate?

4. Facility owner

   Name:

   Mailing address:

   City: State: Zip code:

   Phone:

5. Facility location

   Name:

   Address:

   City: State: Zip code:

6. Certification:

"I certify under penalty of law that all emissions associated with the identified facility have been eliminated; that the facility authorized by the general permit has been determined to be shutdown in accordance with 9 VAC 5-20-220, or that a permit has been issued covering the facility under the provisions of 9 VAC 5 Chapter 80. I understand that by submitting this notice of termination, I am no longer authorized to operate under the general permit. I also understand that the submittal of this notice of termination does not release an owner from liability for any violations of this permit under the Air Pollution Control Law."

Signatures: Date:

Name of persons signing above: (printed or typed)

Titles:

9 VAC 5-510-140. General permit content.

A. The general permit issued under this chapter shall include the elements provided in this section.

B. The general permit shall contain terms and conditions setting forth the applicable emission standards and
Proposed Regulations

requirements sufficient to assure compliance with the regulations of the board.

C. The general permit shall contain terms and conditions setting forth the following requirements with respect to emission testing sufficient to assure compliance with the emission standards and requirements of the permit:

1. Requirements providing that owners of nonmetallic mineral processing facilities subject to the general permit may conduct emission tests, establish and maintain records, and make periodic emission reports as necessary to determine the actual emissions for the facility.

2. For cases where the owner elects to use the emission testing to determine the actual emissions for the facility, the permit shall prescribe the procedures for the conduct of the emission tests.

D. The general permit shall contain terms and conditions setting forth the following requirements with respect to emission monitoring sufficient to assure compliance with the emission standards and requirements of the permit:

1. Requirements providing that owners of nonmetallic mineral processing facilities subject to the general permit may install, calibrate, operate and maintain equipment for continuously monitoring and recording emissions or process parameters or both, and establish and maintain records, and make periodic emission reports as necessary to determine the actual emissions for the facility.

2. For cases where the owner elects to use the emission monitoring to determine the actual emissions for the facility, the permit shall prescribe the procedures for the installation, calibration, operation and maintenance of equipment for continuously monitoring and recording emissions or process parameters or both.

E. The general permit shall contain terms and conditions setting forth the following requirements concerning recordkeeping and reporting sufficient to assure compliance with the emission standards and requirements of the permit:

1. Requirements providing that owners of nonmetallic mineral processing facilities subject to the general permit shall establish and maintain records, provide notifications and reports, revise reports, report emission tests or monitoring results in a manner and form and using procedures as the general permit may prescribe.

2. The permit shall prescribe the procedures for providing notifications and reports, revising reports, maintaining records or reporting emission test or monitoring result.

F. The general permit shall contain terms and conditions with respect to enforcement sufficient to assure compliance with the emission standards and requirements of the permit.

G. The general permit shall contain terms and conditions setting forth the following requirements with respect to compliance sufficient to assure compliance with the terms and conditions of the permit:

1. Requirements providing for compliance certification, testing, monitoring, reporting, and recordkeeping requirements sufficient to assure compliance with the terms and conditions of the permit.

2. Requirements providing for inspection and entry sufficient to assure compliance with the terms and conditions of the permit. At a minimum the permit shall require that, upon presentation of credentials and other documents as may be required by law, the owner shall allow the department to perform the following:

a. Enter upon the premises where the source is located or emissions-related activity is conducted, or where records must be kept under the terms and conditions of the permit.

b. Have access to and copy, at reasonable times, any records that must be kept under the terms and conditions of the permit.

c. Inspect at reasonable times any facilities, equipment (including monitoring and air pollution control equipment), practices, or operations regulated or required under the permit.

d. Sample or monitor at reasonable times substances or parameters for the purpose of assuring compliance with the permit or applicable requirements.

H. The permit shall contain terms and conditions pertaining to other requirements as may be necessary to ensure compliance with the regulations of the board, the Virginia Air Pollution Control Law and the federal Clean Air Act.

9 VAC 5-510-150. Issuance of an authorization to operate under the general permit.

A. The department shall grant authorization to operate under the conditions and terms of the general permit to sources that meet the applicability criteria set forth in 9 VAC 5-510-40.

B. The issuance of an authorization to operate under the general permit to a nonmetallic mineral processing facility covered by the general permit shall not require compliance with the public participation procedures under § 9-6.14:4.1 C 11 of the Administrative Process Act.

C. A response to each application for coverage under the general permit shall be provided within 30 days.

D. Nonmetallic mineral processing facilities covered under a general permit shall be issued a letter, a certificate, or any other document which would attest that the facility is authorized to operate under the general permit. The document shall be accompanied by a copy of the general permit and the application submitted by the permittee.

E. The letter, certificate or other document, along with the copy of the general permit, application and 40 CFR Part 60, subpart OOO, shall be retained by the department and at the stationary source.
9 VAC 5-510-160. Transfer of authorizations to operate under the general permit.

A. No person shall transfer an authorization to operate under the general permit from one stationary source to another or from one piece of equipment to another.

B. In the case of a transfer of ownership of a stationary source, the new owner shall comply with any permit issued to the previous owner. The new owner shall notify the department of the change in ownership within 30 days of the transfer.

C. In the case of a name change of a stationary source, the owner shall comply with any permit issued under the previous source name. The owner shall notify the department of the change in source name within 30 days of the name change.

PART IV.
GENERAL PERMIT TERMS AND CONDITIONS.

9 VAC 5-510-170. General permit.

Any owner whose application is accepted by the director will receive the following permit and shall comply with the requirements in it and be subject to all requirements of this chapter and the regulations of the board.

General Permit No.:
Effective date:

GENERAL PERMIT FOR NONMETALLIC MINERAL PROCESSING

In compliance with the provisions of the Air Pollution Control Law and regulations adopted pursuant to it, owners of nonmetallic mineral processing facilities are authorized to operate under the authority of this permit, except those where board regulations or policies prohibit such operation.

This general permit covers all owners of activities located at nonmetallic mineral processing facilities where the primary purpose is classified as Standard Industrial Classifications 1411, 1422, 1423, 1429, 1442, 1446, 1455, 1459, and 1499.

The authorization to operate under this permit shall be in accordance with this cover page, 9 VAC 5-510-180 - Emission Standards and Requirements, 9 VAC 5-510-190 - Emission Standards, 9 VAC 5-510-200 - Compliance Determination and Verification by Emission Testing, 9 VAC 5-510-210 - Compliance Determination and Verification by Emission Monitoring, 9 VAC 5-510-220 - Recordkeeping Requirements, 9 VAC 5-510-230 - Reporting Requirements, 9 VAC 5-510-240 - Compliance Certifications, and 9 VAC 5-510-250 - Enforcement, as specified in 9 VAC 5-510-180 through 9 VAC 5-510-250.

9 VAC 5-510-180. Emission standards and requirements.

A. The permittee may construct and operate a nonmetallic mineral processing facility in accordance with conditions of this permit located within the boundaries of the Commonwealth of Virginia, except those where board regulations or policies prohibit such activities.

B. Sources operating under this permit shall operate in compliance with the standards set in 9 VAC 5 Chapters 40, 50 and 60 and other applicable provisions of the regulations of the board.

C. Sources operating under this permit shall meet the emission standards in 9 VAC 5-510-190 of this general permit in order to continue to operate under the authority of this permit.

D. The permittee shall comply with the terms and conditions of the general permit prior to commencing any physical or operational change or activity which will result in making the facility subject to the new source review program.

E. If the permittee makes any change in the design or operation of the facility which will result in making the facility subject to the new source review program, he shall evidence the change in writing to the department within 30 days of implementation of the change.

F. The permittee shall not make any changes in design or operation of the affected facility which will result in actual emissions that exceed the emission standards specified in 9 VAC 5-510-190 of this general permit.

9 VAC 5-510-190. Emissions standards.

A. The permittee shall not cause or allow to be discharged into the atmosphere from any covered emissions units any visible emissions in excess of the limits specified in subdivisions 1, 2 and 3 of this subsection.

1. Equipment manufactured or fabricated on or prior to August 31, 1983, shall not exceed an opacity of 20% when averaged over a six-minute period.

2. Equipment manufactured or fabricated after August 31, 1983, shall comply with 40 CFR Part 60, Subpart 000, 9 VAC 5-50-260 and the following standards:
   a. Crushing: primary and secondary--15% opacity, tertiary--7% opacity.
   b. Screening, conveyor transfers, and surge bins--10% opacity.
   c. Fabric filter exhausts--7% opacity.
   d. Wash plants--no visible emissions from wet screening and subsequent processing up to next crusher or storage bin.

3. Other nonspecific emission points including loadout and stationary diesel engines are limited to 10% opacity.

4. The opacity standards prescribed under this article shall apply at all times except during periods of startup, shutdown, malfunction, and as otherwise provided in the applicable standard.

B. The permittee shall not cause or allow to be discharged into the atmosphere from any covered emissions units any particulate matter in excess of the limits specified in subdivisions 1 and 2 of this subsection.

1. Fabric filter exhausts controlling equipment manufactured or fabricated on or prior to August 31,
1983, shall not exceed 0.05 grains/dscf as provided in Article 14 (9 VAC 5-40-1820 et seq.) of 9 VAC 5 Chapter 40.

2. Fabric filter exhausts controlling equipment manufactured or fabricated after August 31, 1983, shall not exceed 0.05 g/dscm (0.022 grains/dscf) as provided in 40 CFR Part 60, Subpart 000.

C. Fugitive dust/emissions controls shall include the following or equivalent as a minimum:

1. Fugitive dust/emissions from drills, stockpiles, material handling, screens, crushers, load-outs, and traffic areas shall be controlled by wet suppression or equivalent.

2. All material being stockpiled subject to windblown emissions shall be kept moist to control dust during storage and handling or covered at all times to minimize emissions.

3. Haul roads shall be controlled by wet suppression or equivalent.

4. Reasonable precautions shall be taken to prevent deposition of dirt on public roads and subsequent dust emissions. Materials spilled or tracked onto public paved surfaces shall be promptly removed to prevent particulate matter from becoming airborne.

D. In order to operate under the authority of this permit, a nonmetallic mineral processing facility shall not exceed any of the following:

1. The total rated crushing capacity for all primary crushers at the facility, including portable stone processing equipment temporarily located at the site, shall not exceed 5,000 tons per hour.

2. The total amount of fuel to be consumed by all stationary diesel engines, including portable equipment temporarily located at the site, shall not exceed 331,022 gallons of fuel per annual period.

3. The total actual emissions of any regulated pollutant from the stationary source shall not exceed 99 tons per annual period.

E. The fuel used in stationary diesel engines shall be distillate oil or diesel fuel meeting ASTM specifications for No. 1 or No. 2 distillate oil or diesel fuel.

9 VAC 5-510-200. Compliance determination and verification by emission testing.

A. The permittee may conduct emission tests, establish and maintain records, and make periodic emission reports as necessary to determine the actual emissions for the nonmetallic mineral processing facility.

B. Upon request of the department, the permittee shall conduct emission tests as are necessary to determine the type or amount or both of the pollutants emitted from the facility or whether the facility will be in compliance with 9 VAC 5-510-190 or any other provisions of any regulation of the board.

C. The emission testing conducted under this section shall be carried out in accordance with subdivisions 1 and 2 of this subsection or the provisions of 9 VAC 5 Chapters 40, 50 and 60, as applicable, or by other means acceptable to the department.

1. Visible emissions evaluations shall be conducted in accordance with 40 CFR Part 60, Subpart A, Method 9 or Method 22, as applicable.

2. Grain loading evaluations shall be conducted in accordance with 40 CFR Part 60, Subpart A, Method 5 or Method 17, as applicable.

9 VAC 5-510-210. Compliance determination and verification by emission monitoring.

A. The permittee may install, calibrate, operate and maintain equipment for continuously monitoring and recording emissions or process parameters or both, and establish and maintain records, and make periodic emission reports as necessary to determine the actual emissions for the nonmetallic mineral processing facility.

B. Upon request of the department, the permittee shall install, calibrate, maintain and operate equipment for continuously monitoring and recording emissions or process parameters or both as are necessary to determine the type or amount or both of the pollutants emitted from the facility or whether the facility will be in compliance with 9 VAC 5-510-190 or any other provisions of any regulation of the board.

C. The emission monitoring conducted under this article shall be carried out in accordance with the provisions of 9 VAC 5 Chapters 40, 50 or 60, as applicable, or by other means acceptable to the department.

D. Where the applicable requirement cited in subsection C of this section does not require periodic testing or instrumental or noninstrumental monitoring (which may consist of recordkeeping designed to serve as monitoring), periodic monitoring shall be conducted sufficient to yield reliable data from the relevant time period that are representative of the source's compliance with the general permit, as reported pursuant to subdivision 1 of 9 VAC 5-510-220. Such monitoring requirements shall assure use of terms, test methods, units, averaging periods, and other statistical conventions consistent with the applicable requirement. Recordkeeping provisions may be sufficient to meet the requirements of this subsection.

9 VAC 5-510-220. Recordkeeping requirements.

A. The permittee shall comply with the recordkeeping requirements in this section. The recordkeeping requirements of this permit shall not replace any recordkeeping requirement contained in other state or federal rules or regulations.

B. The permittee shall maintain records for each emission unit or groups of emission units sufficient to determine the actual emissions of the nonmetallic mineral processing facility. The permittee shall maintain records of emission data and operating parameters necessary to demonstrate compliance with this permit. These records shall be available for inspection by the department and shall be current for the most recent three years.
C. To meet the requirements of 9 VAC 5-510-210 with respect to recordkeeping, the permittee shall comply with the following:

1. Records of monitoring information shall include the following:
   a. The date, place as defined in the permit, and time of sampling or measurements.
   b. The date(s) analyses were performed.
   c. The company or entity that performed the analyses.
   d. The analytical techniques or methods used.
   e. The results of such analyses.
   f. The operating conditions existing at the time of sampling or measurement.

2. Records of all monitoring data and support information shall be retained for at least three years from the date of the monitoring sample, measurement, report, or application. Support information includes all calibration and maintenance records and all original strip-chart recordings for continuous monitoring instrumentation, and copies of all reports required by the permit.

D. The recordkeeping requirements under this section shall be carried out in accordance with the provisions of 9 VAC 5 Chapters 40, 50 and 60, as applicable, or by other means acceptable to the department.

E. In order to ensure the proper operation of air pollution control equipment, the permittee shall perform the following:

1. Develop a maintenance schedule and maintain records of all scheduled and nonscheduled maintenance to air pollution control equipment. These records shall be maintained on site for three years and shall be made available to department upon request.

2. Maintain an inventory of spare parts needed to minimize the duration of air pollution control equipment breakdowns.

9 VAC 5-510-230. Reporting requirements.

A. The permittee shall comply with the reporting requirements in this section. Any document (including reports) required by a permit term or condition to be submitted to the department shall contain a certification by a responsible official that meets the requirements of 9 VAC 5-510-100 E.

B. The permittee shall submit, according to procedures established by the department, an annual emissions update. Any additional information requested by the department under this subsection shall be submitted to the department within 30 days of the date of request.

C. To meet the requirements of 9 VAC 5-510-210 with respect to reporting, the permittee shall submit reports of any required monitoring at least every six months. All instances of deviations from permit requirements shall be clearly identified in such reports.

D. The permittee shall furnish written notification to the department and the regional office of the U.S. Environmental Protection Agency of the following:

1. The actual date on which construction or installation or modification or reconstruction or relocation of any emission unit commenced, postmarked within 30 days after that date.

2. The actual startup date of the emission unit within 15 days after that date.

3. The anticipated date of visible emissions evaluations for affected facilities subject to 40 CFR Part 60, Subpart OOO, postmarked at least 30 days prior to that date.

4. The anticipated date of stack emissions tests of the affected facilities subject to 40 CFR Part 60, Subpart OOO, postmarked at least 30 days prior to that date.

E. Within 30 days of completion, the permittee shall furnish written notification of equipment replacement, to include the following information, as applicable (for crushing, grinding, screening, elevator/belt conveying, bagging, storage bins, and truck/rail enclosed loading stations):

1. The rated capacity, in tons per hour, of the crusher being replaced; and the replacement crusher.

2. The total surface area of the top screen deck of:
   a. The screening operation being replaced; and
   b. The replacement screening operation.

3. The conveyor belt width of:
   a. The conveyor operation being replaced; and
   b. The replacement conveyor.

4. The rated storage capacity, in tons, of:
   a. The bins being replaced; and
   b. The replacement bins.

5. A description of the control device used to reduce particulate matter emissions from the equipment and a list of all other pieces of equipment controlled by the same device.

6. The estimated age of the emissions units being replaced.

7. The identification of the emission standards applicable to the equipment being replaced and the replacement equipment.

F. The permittee shall comply with the reporting requirements of 9 VAC 5-20-180 concerning facility and control equipment maintenance or malfunction.

9 VAC 5-510-240. Compliance.

A. The department shall evaluate a nonmetallic mineral processing facility's compliance with the emission standards in 9 VAC 5-510-190 as part of the department's annual compliance process. In performing the evaluation, the department shall consider any annual emission update submitted pursuant to 9 VAC 5-510-230.
B. Upon presentation of credentials and other documents as may be required by law, the permittee shall allow the department to perform the following:

1. Enter upon the premises where the source is located or emissions-related activity is conducted, or where records must be kept under the terms and conditions of the permit.

2. Have access to and copy, at reasonable times, any records that must be kept under the terms and conditions of the permit.

3. Inspect at reasonable times any facilities, equipment (including monitoring and air pollution control equipment), practices, or operations regulated or required under the permit.

4. Sample or monitor at reasonable times substances or parameters for the purpose of assuring compliance with the permit or applicable requirements.

Department representatives shall report to the site office and notify a company official or representative of their presence immediately upon entering any operation, as required by Mine Safety and Health Agency standards. For purposes of this condition, the time for inspection shall be deemed reasonable during regular business hours or whenever the facility is in operation. Nothing contained herein shall make an inspection time unreasonable during an emergency.

9 VAC 5-510-250. Enforcement.

A. Violation of this permit is subject to the enforcement provisions including, but not limited to, those contained in 9 VAC 5 Chapter 170 and §§ 10.1-1309, 10.1-1311 and 10.1-1316 of the Virginia Air Pollution Control Law.

B. If any condition, requirement or portion of the permit is held invalid or inapplicable under any circumstance, such invalidity or inapplicability shall not affect or impair the remaining conditions, requirements, or portions of the permit.

C. The permittee shall comply with all conditions of the permit. Any permit noncompliance constitutes a violation of the Virginia Air Pollution Control Law and is grounds (i) for enforcement action or (ii) for termination, revocation and reissuing, or modification of the authorization to operate under the general permit.

D. It shall not be a defense for a permittee in an enforcement action that it would have been necessary to halt or reduce the permitted activity in order to maintain compliance with the conditions of this permit.

E. The authorization to operate under the general permit may be revoked and reissued or terminated for cause as specified in 9 VAC 5-510-80. The filing of a request by the permittee for authorization revocation and reissuance, or termination, or of a notification of planned changes or anticipated noncompliance does not stay any permit condition.

F. The owner of the nonmetallic mineral processing facility shall be subject to enforcement action under 9 VAC 5-510-80 for operation without a permit if the facility is later determined by the department not to qualify for the conditions and terms of the general permit.

G. The general permit does not convey any property rights of any sort, or any exclusive privilege.

H. The permittee shall furnish to the department, within a reasonable time, any information that the department may request in writing to determine whether cause exists for modifying, revoking and reissuing, or terminating the authorization to operate under the general permit or to determine compliance with the permit. Upon request, the permittee shall also furnish to the department copies of records required to be kept by the permit and, for information claimed to be confidential, the permittee shall furnish such records to the department along with a claim of confidentiality.
# Aggregate Crushing Spreadsheet

**Virginia Department of Environmental Quality**

**Spreadsheet for Aggregate Processing Emission Calculation**

**Process Definitions:**
- **MANF.** = Equipment Manufacturer's Name
- **MODEL #** = Manufacturer's Model Number

**Modification Codes - Choose a code and insert:**
1. For increase in regulated limit
2. For physical change in emissions unit
3. For changes in related equipment
4. For new emissions unit(s)
5. For replacement emissions unit(s)

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<p>| SECONDARY CRUSHER | PROCESS ID # | NSPS? | PM LBS/TON | PM TONS/yr | PM LBS/HR | PM TONS/yr | POTENTIAL PM LBS/S | POTENTIAL PM TONS/yr |
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**NOTES:**
- Values are approximate and subject to change.
- PM10 refers to Particulate Matter 10 microns or less.
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## Virginia Department of Environmental Quality

**Proposed Regulations**

### Aggregate Crushing Spreadsheet

| PROCESS TYPE | DESCRIPTION               | Flags       | PM<sub>10</sub> | LBS/TON | PM<sub>10</sub> | LBS/TON | PM<sub>10</sub> | TONS/YR | PM<sub>10</sub> | LBS/HR | PM<sub>10</sub> | TONS/YR | PM<sub>10</sub> | LBS/HR | PM<sub>10</sub> | TONS/YR | Title V | POTENTIAL PM<sub>10</sub> | TONS/YR |
|--------------|----------------------------|-------------|-----------------|---------|-----------------|---------|-----------------|---------|-----------------|---------|-----------------|---------|-----------------|---------|-----------------|---------|------------------|---------|
| CONVEYOR     | PROCESS ID #               | NSPS7       |                 |         |                 |         |                 |         |                 |         |                 |         |                 |         |                 |         |                 |         |
|              | Manuf.                     |             |                 |         |                 |         |                 |         |                 |         |                 |         |                 |         |                 |         |                 |         |
|              | Model #                    |             |                 |         |                 |         |                 |         |                 |         |                 |         |                 |         |                 |         |                 |         |
|              | Mod. Code                  |             |                 |         |                 |         |                 |         |                 |         |                 |         |                 |         |                 |         |                 |         |
| CONVEYOR     | PROCESS ID #               | NSPS7       |                 |         |                 |         |                 |         |                 |         |                 |         |                 |         |                 |         |                 |         |
|              | Manuf.                     |             |                 |         |                 |         |                 |         |                 |         |                 |         |                 |         |                 |         |                 |         |
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**Note:** The table continues with similar entries for different types and models.
### Aggregate Crushing Spreadsheet

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## Emission Summary

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### Notes:

1. If this spreadsheet is altered, other than entering process/plant information, then it is no longer considered to be DEQ approved.
2. All equipment must be at least 97% efficient.
3. The emission factors used in this spreadsheet are based on the final Jan 1995 version of AP-42, section 11.18.2, Crushed Stone Processing. Emission factors are summarized in Table 11.19.2.2.
4. The 'Wet Suppression' emission factors include all wet suppression (natural and manmade) and no extra control efficiency should be added.
5. Title V Potential: The maximum potential will be based on the dry emission factors multiplied by the rated capacity of the equipment at 8760 hours.
6. Cement silo emission factors includes pneumatic loading and silo discharge. Spreadsheet user should only enter tons of cement in the "Actual Processed" field instead of tons of cement treated aggregate processed.
7. For wet processing, enter "WIP" in "flags" field adjacent to "WET".
8. For conveyors with no transfer point, enter "NTP" in "flags" field.

### Disclaimer:

DEQ does not guarantee the accuracy of the information contained herein. It is your responsibility to be aware of the most current information available. This is a draft spreadsheet and is continually being revised and updated. DEQ is not responsible for errors or omissions that may be contained herein.

Address all comments to:
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029 E. Main Street, 8th floor
Richmond, VA 23219-2429
(804)898-4413
(804)898-4510 fax
### Diesel generator

1000 Max. rated engine capacity (horsepower)  
2 Gal. fuel (1) or hours/year (2)  
50 Max. expected hourly consump. (gal/hr)  
10000 Max. expected annual consump. (gal/yr)  
200 Max. expected annual operation (hrs/yr)  
0.5 Fuel sulfur content (%)

### UNCONTROLLED 8760 HRYR

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<th>Activity</th>
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<th>Diesel Electric Generator</th>
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<td>SCC 20200401</td>
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<td>Pollutant</td>
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<td>(lb/hr)</td>
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<td>PM</td>
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Note 1: most diesel engines do not have add on controls for emissions control

Note 2: red shaded number represent actual annual emissions

### CONTROLLED ACTUAL

### CRITERIA EMISSION FACTORS

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<tr>
<th>Diesel-Gal(hr&amp;yr)</th>
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<tr>
<td>EIS SCC 20200401</td>
<td>EIS SCC 20200401</td>
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<td>137,030 Btu/gal</td>
<td>137,030 Btu/gal</td>
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<td>(lb/1000 gal)</td>
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<tr>
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<td>(lb/hr)</td>
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<tr>
<td>13.7 lb/1000 gal</td>
<td>0.0007 lb/hr</td>
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<tr>
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<td>158.4 lb/lb/1000</td>
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<td>450.8 lb/lb/1000</td>
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<td>12.6 lb/lb/1000</td>
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### HAPS EMISSION FACTORS

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<td>137,030 Btu/gal</td>
<td>137,030 Btu/gal</td>
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<tr>
<td>(lb/1000 gal)</td>
<td>(lb/1000 gal)</td>
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<tr>
<td></td>
<td>(lb/hr)</td>
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<tr>
<td>7.85E-05 lb/10E6</td>
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<tr>
<td>2.10E-04 lb/10E6</td>
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### HAZARDOUS AIR POLLUTANT (HAPS) EMISSIONS CALCULATIONS

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<td>formaldehyde</td>
<td>6.1E-07</td>
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<td>POM</td>
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<tr>
<td>Total HAPs</td>
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Annual Factors from AP-42(5th ed.) Large Bore Diesel engines, Section 3.4

### DISCLAIMER:

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Address all comment DEQ, Lynchburg Satellite Office  
Attn: Dave Skelly  
7705 Timberlake Road  
Lynchburg, VA 24502  
(804)582-5120  
(804)582-5125410 fax

ATTACHMENT 2
TITLE 12. HEALTH

DEPARTMENT OF MEDICAL ASSISTANCE SERVICES

Title of Regulation: 12 VAC 30-50-10 et seq. Amount, Duration, and Scope of Medical and Remedial Care Services (amending 12 VAC 30-50-180).

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

Public Hearing Date: N/A -- Public comments may be submitted until February 18, 2000.

Basis: Section 32.1-325 of the Code of Virginia grants to the Board of Medical Assistance Services (BMAS) the authority to administer and amend the Plan for Medical Assistance. Section 32.1-324 of the Code of Virginia grants to the Director of the Department of Medical Assistance Services (DMAS) the authority to administer and amend the Plan for Medical Assistance in lieu of board action pursuant to the board's requirements. The Administrative Process Act provides for this agency's promulgation of proposed regulations subject to the Governor's review.

42 CFR 440.90 defines clinic services as preventive, diagnostic, therapeutic, rehabilitative, or palliative services that are furnished by a facility that is not part of a hospital but is organized and operated to provide medical care to outpatients. The term includes the following services furnished to outpatients:

1. Services furnished at the clinic by or under the direction of a physician or dentist;
2. Services furnished outside the clinic, by clinic personnel under the direction of a physician, to an eligible individual who does not reside in a permanent dwelling or does not have a fixed home or mailing address.

Purpose: The purpose of this proposal is to establish provider qualifications, applicable to public community mental health clinics, to ensure that the mental health therapy services rendered to recipients are provided by appropriately qualified and supervised medical professionals. The intent of these requirements is to prevent the development of a two-tiered system of health care: a higher level for privately paying or insured individuals and a lower quality for Medicaid recipients. Maintaining a consistent quality of health care, without regard for source of payment, will directly improve the mental health care services Medicaid recipients receive.

Substance: Department of Medical Assistance Services (DMAS) Program Compliance reviews have illustrated that some community service boards (CSBs) are uncertain about DMAS’ policy with regard to the qualifications of therapists in community mental health clinics, primarily community service boards. Because of this confusion, CSBs are constantly asking DMAS for clarification of policy on qualified therapists. Therefore, it is necessary to clarify DMAS’ policy and ensure that DMAS is billed only when psychotherapeutic services are rendered by staff with appropriate training and supervision.

When psychotherapy services are provided in a private practitioner’s office, only specifically licensed personnel are allowed reimbursement for these services. However, state law allows mental health clinics to use nonlicensed personnel. Both DMAS and the Department of Mental Health, Mental Retardation and Substance Abuse Services (DMHMRASAS) have recognized the need to provide clear guidelines for community mental health clinics on minimum staff qualifications which will entitle those clinics to qualify for Medicaid reimbursement.

To address these concerns, a work group comprised of staff from DMAS and DMHMRASAS met to develop clear guidelines on qualifications for staff providing Medicaid-reimbursable psychotherapy services in community mental health clinics. DMHMRASAS raised several concerns about the implementation of the provider credential requirements—the fiscal impact on the CSBs and access to care. Both of these concerns can be resolved by establishing a grace period during which the CSBs can convert caseloads to those staff who meet the DMAS standards. The provider standards included in this regulation are the result of this work group and have been shared with CSBs for input.

Additional questions have arisen regarding the requirement that licensed providers be supervised by a physician. DMAS recently promulgated regulations allowing Licensed Professional Counselors (LPCs) and Licensed Clinical Social Workers (LCSWs) and licensed Clinical Nurse Specialists-Psychiatric (CNS) to directly enroll and receive reimbursement as Medicaid providers. The provisions regarding direct reimbursement and supervision of LPCs, LCSWs, and CNSs by Medicaid do not affect the CSBs. CSBs are providers enrolled with Medicaid as mental health clinics.

By federal definition as discussed above, clinics must be physician directed. So DMAS cannot remove the supervision requirements for individuals providing services in mental health clinics run by CSBs. In addition, reimbursement for clinics is calculated differently than reimbursement for private practitioners. The individual clinicians employed within a clinic are not reimbursed by Medicaid; the clinic is reimbursed. The clinic then pays its employees or contractors. The way independent practitioners are reimbursed does not affect reimbursement to individuals providing services in a clinic setting, so independent practitioners will not be affected by these proposed regulations.

This regulation will allow a period of 24 months for the community mental health clinics to comply with these more specific provider requirements. Because of this transition period, DMAS does not anticipate a negative fiscal impact on the CSBs. The transition period will also allow the clinics to arrange for enough qualified staff so that the current level of access to care will not be jeopardized. This change will not result in any changes to the number of recipients or families being served. This change is budget neutral.

Issues: The primary advantage to recipients is that the individuals who provide psychotherapy services will be appropriately qualified and supervised. This will prevent individuals who obtain psychotherapy services from public
mental health clinics from receiving a lesser quality of care than privately paying or insured individuals. This will have no impact on private sector licensed physicians and licensed clinical psychologists. The community services boards will be required to hire upgraded staff and to provide appropriate physician supervision in order to be reimbursed by DMAS. Therefore, the agency projects no negative issues involved in implementing this proposed change.

Fiscal/Budget Impact: This regulatory change is targeted to community mental health clinics and affects providers in public community mental health clinics (those administered by local community services boards of the Department of Mental Health, Mental Retardation, and Substance Abuse Services). The change will allow a period of 24 months for these clinics to comply with the more specific provider requirements. Because of this transition period, DMAS does not anticipate a negative fiscal impact on the clinics. There is no additional cost of implementation or enforcement, and no costs of compliance to the public.

During state Fiscal Year 1998, DMAS paid 42 mental health clinic providers $3.6 million for psychotherapy services. These providers filed 75,514 claims for services during this time period for services rendered to 15,672 individuals. No significant change in the number of filed claims is expected. There are no localities that are uniquely affected by these regulations as they apply statewide.

Funding Source/Cost to Localities/Affected Entities: The 40 CSB community mental health clinics will be required to hire upgraded staff and to provide appropriate physician supervision in order to be reimbursed by DMAS, so there will be some additional costs to localities. Consequently, there may be additional costs to some localities although there is no available data identifying which localities, and what their costs might be. There are some localities already implementing the spirit of these proposed regulations so no additional costs will accrue to them.

For those CSBs, which do need to expend money to hire licensed staff, the two-year grace period may be used to generate extra funds to offset the additional costs and to adjust their appropriations requests.

This proposed regulation would have no impact on local departments of social services because it does not affect persons eligible for Medicaid covered services nor the eligibility determination process. Because the services will be provided by staff that is licensed, affected families will benefit from more experienced and credentialed staff.

Department of Planning and Budget’s Economic Impact Analysis: The Department of Planning and Budget (DPB) has analyzed the economic impact of this proposed regulation in accordance with § 9-6.14:7.1 G of the Administrative Process Act and Executive Order Number 25 (98). Section 9-6.14:7.1 G requires that such economic impact analyses include, but need not be limited to, the projected number of businesses or other entities to whom the regulation would apply, the identity of any localities and types of businesses or other entities particularly affected, the projected number of persons and employment positions to be affected, the projected costs to affected businesses or entities to implement or comply with the regulation, and the impact on the use and value of private property. The analysis presented below represents DPB’s best estimate of these economic impacts.

Summary of the proposed regulation. The proposed amendment to this regulation would establish minimum qualifications for providers of therapy services at public community mental health clinics.

Estimated economic impact. State law requires that individuals that provide psychotherapy services in the private sector be licensed. However, state law permits public mental health clinics to employ non-licensed therapists. This proposed regulatory amendment specifies that community mental health clinics will only receive Medicaid reimbursement for medical psychotherapy services if performed by a qualified therapist. The following are defined as qualified therapists: licensed physicians who have completed three years of post-graduate residency training in psychiatry, licensed clinical psychologists, licensed clinical social workers, licensed professional counselors, and clinical nurse specialists-psychiatric. Additionally, individuals who hold a masters or doctorate degree, who have completed all coursework necessary for licensure by the appropriate board, who have applied for a license but have not yet received such license, and who are currently supervised by a licensed practitioner as described above, are also defined as qualified therapists.

Under the proposed new language for the regulation, clinics that employ unqualified therapists will continue to be reimbursed for their services for the 24 months following the enactment of the proposed regulation amendment. After 24 months have expired, the community mental health clinics will not be reimbursed for medical psychotherapy services provided by unqualified therapists.

According to the Department of Medical Assistance (DMAS), the vast majority of community mental health clinics already employ only qualified therapists. The few clinics that employ unqualified individuals to provide psychotherapy will need to find and hire qualified replacements. Two years following the enactment of the proposed regulation change should be sufficient time for these clinics to find qualified personnel. The community services boards, which run the clinics, will probably face somewhat higher costs as qualified therapists will likely demand higher wages than unqualified therapists do.

The net economic impact of the proposed change to this regulation will likely be positive, though. It is difficult to quantify the increased benefit of receiving therapy from a qualified therapist versus an unqualified individual, but there is some indirect evidence that the increased benefit outweighs the additional cost. HMOs in Virginia and throughout the country only pay for therapy conducted by licensed therapists, even when legally they could potentially accept lower fees from unqualified practitioners. Additionally, there is no assurance that the unqualified therapists are providing services of any medical value, while qualified therapists have several years of training and have passed competitive exams designed to test relevant knowledge and ability.

Volume 16, Issue 7 Monday, December 20, 1999

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Proposed Regulations

Businesses and entities affected. This proposed regulation amendment applies to the 40 community services board community mental health clinics in Virginia.

Localities particularly affected. Community mental health clinics in the more rural parts of the Commonwealth where it may be more difficult to find qualified personnel will be particularly affected.

Projected impact on employment. The number of hours of therapy services provided should not change, assuming that all community services boards are able to hire sufficient qualified personnel. The enactment of this proposed regulation amendment will somewhat increase the amount of work for qualified therapists and decrease employment for unqualified therapists.

Effects on the use and value of private property. The value of the practices of some qualified therapists will increase somewhat as demand for their services will increase with the enactment of this proposed regulation amendment.

Agency's Response to the Department of Planning and Budget's Economic Impact Analysis: The agency concurs with the Economic Impact Analysis prepared by the Department of Planning and Budget regarding the regulations concerning Narrative for the Amount, Duration, and Scope of Medical and Remedial Care Services: Qualifications for Community Mental Health Clinic Providers.

Summary:

These proposed regulations establish educational and licensing criteria for staff of community services boards when the staff renders services to Medicaid recipients and seeks reimbursement from Medicaid. The provider qualifications ensure that the mental health therapy services rendered to recipients are provided by appropriately qualified and supervised medical professionals. Community mental health clinics that employ unqualified therapists will continue to be reimbursed for 24 months following enactment. After 24 months have expired, the clinics will not be reimbursed for services provided by unqualified therapists.

12 VAC 30-50-180. Clinic services.

A. Reimbursement for induced abortions is provided in only those cases in which there would be a substantial endangerment of health or life to the mother if the fetus were carried to term.

B. Clinic services means preventive, diagnostic, therapeutic, rehabilitative, or palliative items or services that:

1. Are provided to outpatients;
2. Are provided by a facility that is not part of a hospital but is organized and operated to provide medical care to outpatients; and
3. Except in the case of nurse-midwife services, as specified in 42 CFR 440.165, are furnished by or under the direction of a physician or dentist.

C. Reimbursement to community mental health clinics for medical psychotherapy services is provided only when performed by a qualified therapist. Community mental health clinics which have a valid Medicaid provider agreement [upon the effective date of these regulations] and which do not employ qualified therapists shall continue to be eligible for Medicaid reimbursement for medical psychotherapy services for no later than 24 months from the effective date of these regulations. No payment shall be made after that date unless rendered by a therapist meeting these qualifications. For purposes of this section, a qualified therapist is:

1. A licensed physician who has completed three years of post-graduate residency training in psychiatry;
2. An individual licensed by one of the boards administered by the Department of Health Professions to provide medical psychotherapy services including: licensed clinical psychologists, licensed clinical social workers, licensed professional counselors, or clinical nurse specialists-psychiatric; or
3. An individual who holds a masters or doctorate degree, who has completed all coursework necessary for licensure by the appropriate board, and who has applied for a license but has not yet received such license, and who is currently supervised in furtherance of the application for such license, in accordance with requirements or regulations promulgated by DMAS, by one of the licensed practitioners listed in subdivisions 1 and 2 of this subsection.
Proposed Regulations

Purpose: Amendments are proposed pursuant to a statutory mandate in Chapters 967 and 1005 of the 1999 Acts of the Assembly which provide for the board to license school speech-language pathologists upon review of credentials and payment of an application fee. Regulations of the board for licensure and practice are promulgated to protect the health, safety and welfare of children who are in need of speech-language pathology services.

Substance:

18 VAC 30-20-10. Definitions. A definition for "school speech-language pathologist" is added to clarify that it is a person licensed pursuant to § 54.1-2603 to provide speech-language pathology services in public school divisions.

18 VAC 30-20-80. Fees. The proposed amendment would set the application fee at $50, which is one-half the application fee for persons who are fully licensed to practice. The renewal and other fees have not been amended and would be the same for both categories of licensure.

18 VAC 30-20-170. Requirements for licensure. The proposed amendments establish the requirements for licensure as specified in the Code of Virginia.

18 VAC 30-20-180. Application process. An amendment is proposed to add the school speech-language pathologists to the requirements for submission of an application for licensure.

18 VAC 30-20-230. Prohibited conduct. A proposed amendment would include in the section on prohibited conduct the practice of speech-language pathology outside the public school setting by a school speech-language pathologist.

Issues:

A. Qualifications for licensure. Chapters 967 and 1005 of the 1999 Acts of the Assembly amended the practice act for audiology and speech-language pathology by adding subsection B to § 54.1-2603, which mandates that the board promulgate regulations for the licensure of school speech-language pathologists. The Code is very specific that the board shall issue a license "without examination" to persons "licensed by the Board of Education with an endorsement in speech-language pathology and a master's degree in speech-language pathology." Therefore, the board was not authorized to impose additional criteria or qualifications for licensure, and the adopted regulations follow the specific language of the law.

B. Establishment of fees for school speech-language pathology. Since the credentials required for licensure of school speech-language pathologist are more limited than those required for persons licensed for independent practice, there should be less board member and staff time spent in review. Therefore, the board determined that a lesser application fee was appropriate. The application fee for the school speech-language pathologist is set at $50, while the regular application fee is set at $100. Renewal fees, however, must cover the majority of expenditures of the board, including costs for investigations, disciplinary hearings, board meetings, mailings, and board staff. Since the school licensees will likely incur those costs at the same rate as current licensees, the board determined that the current renewal fee of $60 per biennium was appropriate.

C. Scope of practice for school speech-language pathologists. During the development of regulations, questions were raised about the scope of practice for school speech-language pathologists. While the statute is clear that their practice is limited to the public schools of the Commonwealth, it does not further specify the scope of activities which are or are not permitted. However, the practice of speech-language pathology is defined in § 54.1-2600, so it is presumed that persons practicing with the school license would be practicing within that scope of practice definition. Therefore, the board determined that no additional amendments were necessary or authorized to clarify the scope of practice for school speech-language pathologists who are also subject to disciplinary action for unprofessional conduct if they practice without skill and safety.

Advantages to the licensees and the school systems: Persons seeking licensure as school speech-language pathologists will only need to meet the requirements of law - a master's degree in speech-language pathology and licensure from the Department of Education with an endorsement in the field. There is very little benefit to the individuals holding this license since it will not entitle them to practice outside the public schools where they are already employed.

The advantage of these regulations, which simply establish a license as required by law, is for the employers of the licensees who will seek Medicaid reimbursement for their services. If the Health Care Financing Authority does reimburse for services rendered by persons holding this limited license, schools will have significant additional dollars with which to pay for mandated services to children.

Disadvantages to the licensees. For licensees, there will be some additional costs - $50 to apply for the license and $60 to renew the license every two years. In addition, persons holding the new license will be subject to the laws and regulations of the Board of Audiology and Speech-Language Pathology as well as the rules and policies of the Board of Education and the local school systems.

Advantages or disadvantages to the public. The advantages of this license to the public are the possibility that additional Medicaid funding will be made available to support speech-language services thereby increasing the availability of such services to children in the public schools. In addition, local school funds that would be required to pay for such services may be available for other needs.

Advantages or disadvantages to the agency. The board may have to license and regulate as many as 1,000 new licensees, but there will be additional income through fees to support that activity. There should be very little impact on the Enforcement division, since the disciplinary load for this board is typically very low.
Proposed Regulations

Estimated Impact:
Projected number of persons affected and their cost of compliance. There are approximately 1,000 persons who hold licensure from the Department of Education who could be affected by these regulations.

The cost for compliance will depend on whether any of persons licensed under the Department of Education will actually apply for the licensure. There has been some uncertainty about whether the federal agency, Health Care Financing Authority (HCFA), will reimburse school divisions for speech-language pathology services of persons holding this new limited license under the Board of Audiology and Speech-Language Pathology. If it does not, there would be no incentive for the persons to seek this license.

It is also unknown whether local school divisions will financially assist school speech-language pathologists in becoming licensed, since the benefit of such licensure accrues solely to the school system and not to the licensee.

Cost to the agency for implementation.
Impact on board revenue. If the estimated 1,000 persons who currently work in the public schools as speech-language pathologists all sought licensure under the Board of Audiology and Speech-Language Pathology, there would be an increase of $50,000 in board revenues for application fees and approximately $60,000 additional revenue each biennium from renewal fees.

Impact on board expenditures. The agency will incur some costs (less than $1,000) for mailings to the Public Participation Guidelines mailing list, conducting a public hearing, and sending copies of final regulations to regulated entities.

There will be some additional on-going costs for inclusion of these persons in mailings of regulations and newsletters to licensees of the board. In addition, there may be some additional costs for disciplinary hearings. While the complaint and sanction rates for professions regulated by this board are the lowest in the department, the addition of several hundred new licensees increases the probability that the number of investigative and disciplinary cases will increase. There is no estimate of how much additional costs would be incurred.

Cost to local governments. Unless the local school systems voluntarily provide financial support for licensure of school speech-language pathologists, there will be no impact of these regulations on local government.

Department of Planning and Budget's Economic Impact Analysis: The Department of Planning and Budget (DPB) has analyzed the economic impact of this proposed regulation in accordance with § 9-6.14:7.1 G of the Administrative Process Act and Executive Order Number 25 (98). Section 9-6.14:7.1 G requires that such economic impact analyses include, but need not be limited to, the projected number of businesses or other entities to whom the regulation would apply, the identity of any localities and types of businesses or other entities particularly affected, the projected number of persons and employment positions to be affected, the projected costs to affected businesses or entities to implement or comply with the regulation, and the impact on the use and value of private property. The analysis presented below represents DPB’s best estimate of these economic impacts.

Summary of the proposed regulation. Section 44.1-2603 of the Code of Virginia requires the Board of Audiology and Speech-Language Pathology to offer a license for school speech-language pathologists. The proposed regulation sets forth the application and educational requirements for this license.

Estimated economic impact. Local school divisions either employ directly, or contract with, individuals to provide treatment for children in public schools identified with special education health needs. Individuals providing speech-language services in public schools must hold a license from the Board of Education (BOE) with an endorsement in speech-language pathology. Currently, speech-language services provided in public schools to Medicaid-eligible children can be billed to Medicaid if the provider additionally holds either of the following credentials:

1. A license from the Board of Audiology and Speech-Language Pathology (BASLP) as a speech-language pathologist; or

The 1999 General Assembly directed the Board of Audiology and Speech-Language Pathology to offer a “School Speech-Language Pathologist” license to persons licensed by the Board of Education with an endorsement in speech-language pathology and a master’s degree in speech-language pathology. Upon approval by the Health Care Financing Administration (HCFA), this change will allow employers of licensees to seek Medicaid reimbursement for their services.

The Department of Education reports that there were 1,248 individuals providing public school speech-language services in 1997-1998 school year. Based on the results of a survey conducted by the department in October 1998, it is estimated that:

1. 661 individuals (53%) already meet the qualification requirements to bill services to Medicaid; (i.e., either hold a Certification from the American Speech-Language Hearing Association or licensure in Speech Pathology from the BASLP).
2. 237 providers (19%) hold a Board of Education license and have a master’s degree in speech-language pathology, yet do not hold a BASLP license or a Certificate of Clinical Competence from the American Speech-Language Hearing Association. These individuals would be eligible for the school speech-language pathologists license proposed by the Department of Health Professions.

1 At the request of the Joint Subcommittee studying Medicaid Billing in Public Schools, the Department of Education sent a survey to all school divisions requesting data on the qualifications of speech-language pathologists, school psychologists, and school social workers. Sixty-two percent of the school divisions responded. The estimated impact presented here apply the percentage of providers in each category to the total number of providers in 1998.
3. The remaining 28% of providers hold either a provisional or "grandfathered" BOE license and do not have a master's degree.\textsuperscript{2}

If the HCFA authorizes reimbursement for services rendered by persons holding the proposed school-speech language pathologist license, the number of providers eligible to bill Medicaid could increase by 19% (237 providers). This could in turn increase reimbursement to local school divisions by $672,000 if all 237 BOE-licensed individuals with master's degrees obtained the school-speech language pathologist license and billed qualifying services to Medicaid.\textsuperscript{3}

The savings of $672,000 may be over-estimated for two reasons. First, according to the Department of Education, local school divisions billed speech-language services to Medicaid in 1998 on behalf of only 106 providers. This represents only 16 percent of the estimated 661 providers qualified to currently bill services to Medicaid. Secondly, since the benefits of the proposed school-speech language pathologist license will accrue solely to the local school system, rather than the licensee, some individuals may hesitate to pay the $50 application fee and $60 biennial renewal fee to obtain the license. However, it would seem reasonable to expect that local school divisions will financially assist school speech-language pathologists in becoming licensed.

The following table summarizes the potential costs and savings associated with the proposed school-speech language pathologist license and indicates that there exists a net economic benefit for each individual who obtains the proposed school-speech language pathologist license.

Table 1: Estimated Economic Impact of Proposed BASLP License

| Per Provider | Aggregate |            |            |            |
|--------------|-----------|------------|------------|
|              |           | Minimum    | Maximum    |
| 1st Year     | Subsequent Years | 1st Year | Subsequent Years |
| Savings      | $2,836    | $2,836     | $0         | $672,000   | $672,000   |
| Costs        | $80       | $30        | $0         | $18,960    | $7,110     |
| Net Economic Benefit | $2,756 |

Businesses and entities affected. The proposed regulation will affect the estimated 237 individuals licensed by the Board of Education with an endorsement in speech-language pathology.

Localities particularly affected. The proposed regulation is not expected to uniquely affect any particular localities.

Projected impact on employment. The proposed regulation is not expected to have any significant impact on employment in Virginia.

Effects on the use and value of private property. The proposed regulation is not expected to have any significant effects on the use and value of private property in Virginia.

Agency's Response to the Department of Planning and Budget's Economic Impact Analysis: The agency concurs with the analysis of the department.

Summary:

The proposed amendments provide for the Board of Audiology and Speech-Language Pathology to license school speech-language pathologists upon review of credentials and payment of an application fee. Pursuant to a statutory mandate in Chapters 967 and 1005 of the 1999 Acts of the Assembly, the qualifications for licensure are licensure by the Department of Education with an endorsement in speech-language pathology and a master's degree in speech-language pathology. An application fee of $50 and a renewal fee of $60 per biennium are established.

18 VAC 30-20-10. Definitions.

The words and terms "audiologist," "board," "practice of audiology," "practice of speech-language pathology," "speech-language disorders," and "speech-language pathologist," when used in this chapter, shall have the meanings ascribed to them in § 54.1-2600 of the Code of Virginia.

The following word, words when used in this chapter, shall have the following meaning meanings, unless the context clearly indicates otherwise:

"School speech-language pathologist" means a person licensed pursuant to § 54.1-2603 of the Code of Virginia to provide speech-language pathology services solely in public school divisions.

"Supervision" means that the audiologist or speech-language pathologist is responsible for the entire service being rendered or activity being performed, is available for consultation, and is providing regular monitoring of clinical activities and competencies of the person being supervised.

18 VAC 30-20-80. Fees.

A. The following fees shall be paid as applicable for licensure:

1. Application for audiology or speech-language pathology license $100

2. Application for school speech-language pathology license $50

\textsuperscript{2} The Board of Education requires a master's degree in speech-language pathology for all hires after 1999. Persons hired with a bachelor's degree may work with a provisional license and must work toward the master's degree. Persons hired prior to 1992 may be "grandfathered" with a bachelor's degree and certain graduate coursework.

\textsuperscript{3} Information provided by the Department of Education showed that a total of $583,770 was billed to Medicaid by local school divisions in 1998 for speech-language services by 106 providers. This averages to $5,507 billed per provider. Assuming a 51.49% Medicaid reimbursement rate, approximately $2,836 in matching funds could be drawn for each billing provider.
2. Verification of licensure requests from other states $20
3. Biennial renewal $60
4. Reinstatement fee $50
5. Duplicate wall certificates $50
6. Duplicate license $10
7. Returned check $25

B. Fees shall be made payable to the Treasurer of Virginia and shall not be refunded once submitted.

18 VAC 30-20-170. Requirements for licensure.

A. The board may grant a license to an applicant who:

1. Holds a current and unrestricted Certificate of Clinical Competence in the area in which he seeks licensure issued by the American Speech-Language-Hearing Association. Verification of currency shall be in the form of a certified letter from the American Speech-Language-Hearing Association issued within six months prior to licensure; and

2. Has passed the qualifying examination for the Certificate of Clinical Competence within three years preceding the date of licensure, or has held employment in the area for which he seeks licensure for one of the past three consecutive years or two of the past five consecutive years.

B. The board may grant a license to an applicant who:

1. Holds a master’s or doctoral degree from a college or university whose audiology and speech-language program is accredited by the American Speech-Language-Hearing Association or an equivalent accrediting body; and

2. Has passed a qualifying examination approved by the board. The applicant shall have passed the examination within three years preceding the date of applying for licensure in Virginia or have been actively engaged in the respective profession during the 24 months immediately preceding the date of application.

C. The board may grant a license to an applicant as a school speech-language pathologist who:

1. Holds a master’s degree in speech-language-pathology; and

2. Holds an endorsement in speech-language pathology from the Virginia Department of Education.

18 VAC 30-20-180. Application process.

A. Prior to seeking licensure as an audiologist or a speech-language pathologist, or a school speech-language pathologist, an applicant shall submit:

1. A completed and signed application;

2. The applicable fee prescribed in 18 VAC 30-20-80; and

3. Additional documentation as may be required by the board to determine eligibility of the applicant.

B. An incomplete application package shall be retained by the board for a period of one year.

18 VAC 30-20-230. Prohibited conduct.

A. No person unless otherwise licensed to do so, shall prepare, order, dispense, alter or repair hearing aids or parts of or attachments to hearing aids for consideration. However, audiologists licensed under this chapter may make earmold impressions and prepare and alter earmolds for clinical use and research.

B. No person licensed as a school speech-language pathologist shall conduct the practice of speech-language pathology outside the scope of the public school setting.

**NOTICE:** The forms used in administering 18 VAC 30-20-10 et seq., Regulations of the Board of Audiology and Speech-Language Pathology, are listed below. Any amended or added forms are reflected in the listing and are published following the listing.

**FORMS**

Application for Licensure, 7/97.
Licensure Reinstatement Application, 7/97.
Endorsement Certification Form, 7/97.
Renewal Notice, 7/97.
DEPARTMENT OF HEALTH PROFESSIONS  
VIRGINIA BOARD OF AUDIOLGY AND SPEECH-LANGUAGE PATHOLOGY  
6606 W. BROAD STREET, 4TH FL  
RICHMOND, VIRGINIA 23230-1717  
(804) 662-7390 [TELEPHONE]  
(804) 662-9523 [FAX]  

APPLICATION FOR SCHOOL SPEECH-LANGUAGE PATHOLOGIST LICENSURE  

INSTRUCTIONS:  
- Please type or print clearly.  
- Enclose Application Fee of $100, made payable to Treasurer of Virginia. All fees are non-refundable.  
- Include all applicable documents.  
- A resume is not an acceptable substitute for any questions on this application.  
- You will be advised, in writing, the status of your application within 5 to 7 days from the date your application is received.  

DISCLOSURE OF SOCIAL SECURITY OR VIRGINIA DMV CONTROL NUMBER: In accordance with § 54.1-116 of the Code of Virginia, you are required to submit your Social Security number or your control number issued by the Virginia Department of Motor Vehicles. If you fail to do so, the processing of your application will be suspended and fees will not be refunded. This number will be used by the Department of Health Professions for identification and will not be disclosed for other purposes except as provided for by law. NO LICENSE, CERTIFICATION OR REGISTRATION WILL BE ISSUED TO ANY INDIVIDUAL WHO FAILS TO DISCLOSE ONE OF THESE NUMBERS. * In order to obtain a Virginia driver’s license control number, it is necessary to appear in person at an office of the Department of Motor Vehicles in Virginia. A fee and disclosure of your Social Security Number will be required.  

PART I - PERSONAL INFORMATION  
NAME: First Middle Last (Maiden)  
HOME ADDRESS: Street City State Zip  
NAME YOU WISH PRINTED ON LICENSE:  
HOME PHONE: ( ) OFFICE PHONE: ( )  
DATE OF BIRTH: / / SOCIAL SECURITY OR VA DMV CONTROL #:  

PART II - EDUCATION  
List all colleges and universities attended. For each college or university attended, you must attach an OFFICIAL transcript of academic course work.  

<table>
<thead>
<tr>
<th>UNIVERSITY/COLLEGE</th>
<th>CITY/STATE</th>
<th>DATES ATTENDED</th>
<th>DEGREE</th>
</tr>
</thead>
</table>

PART III - PROFESSIONAL BACKGROUND  
INSTRUCTIONS:  
- If you answer "Yes" to any of the following questions, attach an explanation, relevant documents and a description of the current status.  
- For the purpose of the following questions, the terms "licensee," "registration," and "certification" are synonymous.  

☐ Yes ☐ No Do you now hold, or have you in the past held anywhere a professional license?  
License Title State Date issued Exp. Date  
☐ Yes ☐ No Have you had revoked or suspended or otherwise sanctioned any license issued to you by any Board or agency in Virginia or any other state? or  
☐ Yes ☐ No Were you denied issuance of or, pursuant to disciplinary proceedings, refused renewal of a license or the privilege of taking an examination by any state licensing board?  
☐ Yes ☐ No To the best of your knowledge, is there any disciplinary action pending against you by any licensing board or professional organization?  
☐ Yes ☐ No Have you been convicted of a felony or any crime involving moral turpitude?  
☐ Yes ☐ No Have you ever been convicted of a felony or misdemeanor (other than a traffic violation)?
TITLE 22. SOCIAL SERVICES

STATE BOARD OF SOCIAL SERVICES

Title of Regulation: 22 VAC 40-30-10 et seq. Food Stamp Program - Resource Exclusion (REPEALING).

Statutory Authority: § 63.1-25 of the Code of Virginia.

Public Hearing Date: N/A -- Public comments may be submitted until February 18, 2000. 
(See Calendar of Events section for additional information)

Basis: Section 63.1-25 of the Code of Virginia places responsibility on the State Board of Social Services to make rules and regulations necessary to carry out the purpose and intent of the sections of the Code related to social services. House Bill 1502, passed by the 1993 General Assembly, amended §63.1-110 of the Code and required the Department of Social Services to seek waivers of federal regulations, if needed, to be able to implement the resource modification. The department sought and received a waiver of regulations at 7 CFR 273.8 from the U.S. Department of Agriculture. In December 1997, the waiver was subsequently withdrawn from Virginia because of a procedural change in allowing waivers only if there is cost neutrality. Exclusions for special accounts were terminated effective January 1, 1998. No future requests for a waiver of federal regulations are expected because there are no foreseeable changes to reduce or offset program costs.

Purpose: This regulation allowed food stamp households an opportunity to save money that would be excluded in determining households' countable resources and program eligibility. The regulation was intended to promote self-sufficiency by enabling Virginians to save money, without penalty, for education or to gain permanency in the community through the purchase of a house. Without the sanction of a federal waiver, the repeal of this regulation is needed to allow Virginia to operate the Food Stamp Program in line with federal regulations.

Substance: The repeal of the regulation will allow the list of exempt resources for the Food Stamp Program to match existing federal regulations or allowances. Maintaining the regulation and operating the Food Stamp Program with the regulation after the expiration of the federal waiver exposes Virginia to potential case errors and federal fiscal sanction.

Issues: Food stamp households may accumulate resources of up to $2,000 and remain eligible for program benefits. The resource level for a household with an elderly member is $3,000. Certain resources are not counted toward the maximum resource level. The regulation expanded the resource exclusions to encourage savings for the purposes of education or housing. The repeal of the regulation will result in the evaluation of all savings accounts, regardless of the reason the accounts were established.

The repeal of the regulation provides no advantages to the public but a small number of food stamp recipients would be adversely affected. The disadvantages to these recipient households would occur when the households' resources exceed the allowable limit and result in the denial or termination of eligibility. The repeal provides no disadvantages to the agency. By repealing the regulation, the agency potentially will positively impact the case error rate by reducing the number of resource exclusions allowed and ultimately enhancing the agency's ability to properly count all available, countable resources when determining entitlement to food stamp benefits.

Department of Planning and Budget's Economic Impact Analysis: The Department of Planning and Budget (DPB) has analyzed the economic impact of this proposed regulation in accordance with §9-6.14-7.1 G of the Administrative Process Act and Executive Order Number 25 (98). Section 9-6.14-7.1 G requires that such economic impact analyses include, but need not be limited to, the projected number of businesses or other entities to whom the regulation would apply, the identity of any localities and types of businesses or other entities particularly affected, the projected number of persons and employment positions to be affected, the projected costs to affected businesses or entities to implement or comply with the regulation, and the impact on the use and value of private property. The analysis presented below represents DPB’s best estimate of these economic impacts.

Summary of the proposed regulation. The Department of Social Services (DSS) proposes to repeal its Food Stamp Program - Resource Exclusion regulation. The regulation, originated under a federal waiver, allowed exclusion of certain savings accounts up to $5,000 for each food stamp household. The Personal Responsibility and Work Opportunity Reconciliation Act of 1996 established new federal rules that allow waivers only if there is cost-neutrality. Since this resource exclusion slightly expands the number of eligible food stamp recipients, the federal waiver was withdrawn from Virginia in December 1997. This regulation has not been applied for new recipients since January 1, 1998. This regulation does not apply to food stamp recipients who qualify through their participation in the TANF program (approximately one-fourth of the total food stamp population).

Estimated economic impact. The resource exclusion allowed by this regulation expanded the number of eligible food stamp recipients. As a result of this repeal, which is necessary to comply with the new federal policy (effective January 1, 1998), some households will no longer be eligible for food stamp benefits. In December 1997, there were 175,881 food stamp households. The number of households that maintained a special savings account was never determined, although DSS expects that only a few households had such accounts with balances in excess of the maximum resource limits ($2,000).

In response to a DPB inquiry for a more specific estimate of the number of households affected by this repeal, DSS staff analyzed a sample of 659 negative actions taken in 1998. Of those negative actions, 6.5% (43) represented accounts closed for “excess resources.” DSS staff further examined these 43 accounts and found no instances where the excess resource was a special savings account. The resource...
Proposed Regulations

involved in the majority of cases was a vehicle. While information from local eligibility workers and household representatives confirms that benefits have been terminated for some households as a result of this change, the research by DSS indicates that the number of households is indeed small.

Repeal of the regulation may also eliminate some incentive for educational and housing savings by food stamp recipients, which are generally accepted as providing benefits for society. However, since the estimated number of households that took advantage of this special savings account exclusion was small, this effect is small also.

Businesses and entities affected. Repeal of this regulation will affect any food stamp households who have, or wish to establish, savings accounts above $2,000. Although exact numbers are not available, research by DSS indicates that the number of households who took advantage of the exclusion was small.

Localities particularly affected. The proposed changes should not uniquely affect any particular localities.

Projected impact on employment. The proposed changes are not expected to have any impact on employment in Virginia.

Effects on the use and value of private property. The proposed changes are not expected to have any effects on the use and value of private property in Virginia.

Agency’s Response to the Department of Planning and Budget’s Economic Impact Analysis: The Department of Social Services concurs with the assessment by the Department of Planning and Budget.

Summary:

This regulation expanded the list of resources that are excluded from consideration in the Food Stamp Program by allowing each food stamp household an interest-bearing savings account up to $5,000. The exclusion was allowed if households established the accounts for purposes of education or toward the purchase of a residence. The proposed action is to initiate the repeal of the resource exclusion. Virginia no longer has federal support to allow the expansion of the resource exclusion.

Title of Regulation: 22 VAC 40-325-10 et seq. Fraud Reduction/Elimination Effort.

Statutory Authority: § 63.1-58.2 of the Code of Virginia.

Public Hearing Date: N/A -- Public comments may be submitted until February 18, 2000.

Basis: The State Board of Social Services is mandated by § 63.1-58.2 of the Code of Virginia to promulgate regulations for implementation of a statewide fraud control and prevention program.

Purpose: This regulation defines state requirements for local operation of the Fraud FREE program and describes the methodology by which local departments of social services may receive reimbursement for costs associated with program operation. Fraud FREE will ensure a uniform approach to welfare fraud control, prevention, and investigation through state supervision of the program, provision of a manual of policy and procedures, statewide training, and development of a database which will be used for tracking case information. Fraud FREE also requires the investigation of all questionable applications for public assistance prior to approval of benefits. These combined efforts will result in overall increased efficiency and effectiveness of program operation. Fraud FREE will result in savings of taxpayer dollars by providing tools and training to identify and investigate questionable or fraudulent public assistance cases, and assuring that benefits are received only by those eligible to receive them.

Substance: The proposed regulation establishes the statewide welfare fraud prevention and control program called the Fraud/Elimination Effort (FREE), requires each local department of social services to operate Fraud FREE and to submit to the state for approval a local plan of program operation. It also defines how requests for staffing will be approved, as well as the specifics of local reimbursement. In order to receive full reimbursement of local costs of operation, the state-retained portion of a local agency’s combined collections must equal or exceed the reimbursed cost of its positions dedicated to Fraud FREE.

Issues: The primary advantage to the public for implementing these regulations will be the establishment of a comprehensive welfare fraud control and prevention program to identify, investigate, and prevent fraud by public assistance recipients. Since the program will be funded through collection of overpayments, there should be no disadvantages to the public associated with program operation.

The primary advantages to the department will be realization of a greater degree of program integrity, and increased emphasis on collection of overpayments. A disadvantage to the department may be the belief of some local directors that allocation of program funding is insufficient, fueling further debate regarding “unfunded mandates” to local agencies. Start-up funding of Fraud FREE is not intended to cover the total local cost of operation, but is intended to help local agencies establish their programs, hire investigators, and strengthen their collection efforts.

Department of Planning and Budget’s Economic Impact Analysis: The Department of Planning and Budget (DPB) has analyzed the economic impact of this proposed regulation in accordance with § 9-6.14:7.1 G of the Administrative Process Act and Executive Order Number 25 (98). Section 9-6.14:7.1 G requires that such economic impact analyses include, but need not be limited to, the projected number of businesses or other entities to whom the regulation would apply, the identity of any localities and types of businesses or other entities particularly affected, the projected number of persons and employment positions to be affected, the projected costs to affected businesses or entities to implement or comply with the regulation, and the impact on the use and value of private
The FREE program has some incentive flaws. Local departments will incur some new costs that will not be entirely reimbursed. Overall, though, the citizens of Virginia may benefit by some reduction in future taxpayer-financed overpayments of funds for public assistance due to fraud and mistakes.

Businesses and entities affected. The 122 local social service departments in the Commonwealth are all affected by this regulation.

Localities particularly affected. The proposed regulation affects all Virginia localities.

Projected impact on employment. The implementation of the FREE program is projected to add 110 new fraud investigator positions.

Effects on the use and value of private property. The enactment of this proposed regulation will produce a marginal increase in the demand for office supplies, travel and telecommunication services and other small amounts of products and services necessary for the additional staff hired.

The private vendors that provide these products and services will likely benefit by a small increase in sales.

Agency's Response to the Department of Planning and Budget's Economic Impact Analysis: The Department of Social Services (DSS) has reviewed the economic impact analysis of the proposed regulation governing the Fraud Reduction/Elimination Effort conducted by the Department of Planning and Budget (DBP). The regulations were written to meet the mandate of § 63.1-58.2 of the Code of Virginia, which established a statewide fraud program. The department wishes to respond to certain issues raised in the report.

The Estimated Economic Impact section of the report cites § 63.1-108 of the Code of Virginia, which requires local departments of social services to investigate fraud. The impact analysis states that locals have “faced significant costs of complying with no penalty for noncompliance.” While actual fiscal penalties, or charge backs, have rarely been levied against local departments, the Code of Virginia at § 63.1-123 empowers the State Board of Social Services to authorize the Commissioner …“to withhold from such locality the entire reimbursement for administrative expenditures or a part thereof to this locality for the period of time the locality fails to comply with state laws or regulations.”

DPB states that the statewide fraud program, named Fraud FREE, is intended to provide financial incentives to local agencies to pursue fraud prevention. Actually, Fraud FREE is unlike benefit and service programs which the department supervises in that it is not a “funded” program (federal/state) in the strictest sense of the word, but the fraud function is inherent in the administration of the eligibility process. This is consistent with the federal programs, which require (for instance) the pursuit of fraud as part of the Food Stamp and Temporary Assistance for Needy Families (TANF) programs. The Agency for Families and Children (AFC) and the United States Department of Agriculture (USDA) consider this to be included in the reimbursed administrative costs. In spite of this requirement, the Virginia legislature passed an

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amendment to § 63.1-58.2 of the Code of Virginia, enacted on July 1, 1998.

For a variety of reasons, less than half of the 122 local departments of social services were operating a viable fraud program prior to the enactment of Fraud FREE. This amendment sought to increase the emphasis on the elimination of welfare fraud by mandating fraud units in every locality. To provide assistance to localities in meeting the mandate of separate fraud units, funding was offered for the reimbursement of fraud investigator positions. Funding in the amount of $750,000 was appropriated for program start-up costs. The language of the amendment states that the statewide fraud program would be funded through the state retained portion of all collections. This naturally placed the department into the role of designing and supervising a program which could be supported through local collections. The only funding available to assist local departments to cover some initial costs was the $750,000 appropriated for that purpose.

The goals of the Fraud FREE program are to prevent the occurrence of fraud through front-end investigation of questionable applications, and to investigate allegations of fraud which may have occurred in cases under care. The department believes that front-end investigation affords us the best opportunity for lowering the food stamp error rate, for which the state is currently facing sanctions by the federal government. In its report “Fraud Control and Collections In Social Services: Analysis and Recommendations,” dated September 1997, Virginia Polytechnic Institute and State University states that “at least 26% of payment errors were due to fraud, and much of an additional 44% attributed to “inadvertent” client error was probably due to fraud.” Front-end investigations have been required of all agencies by § 63.1-108 of the Code of Virginia. Fraud FREE policy, and its local plan of operation, reiterates this requirement for local departments to pursue front-end investigations.

Section 63.1-58.2 of the Code of Virginia states that local departments must establish fraud prevention and investigation units “only insofar as money is appropriated therefor.” The sponsor of the amendment, during hearings in front of the Senate Finance Committee, specifically stated that the initial appropriation was to be used only for investigative positions. Therefore, the department established a formula for local funding of the cost of investigator positions which is based on food stamp and TANF cases under care. Localities have been advised that for the first year of operation, reimbursement for investigator positions will be based on their food stamp and TANF caseloads. The department considers that this is the most equitable method for distribution of the limited funding. The department has advised local directors, through a variety of methods (information bulletins, policy transmittals, workshops, and workgroups), that program funding for subsequent years depends upon collection of any incorrect payments made. This is not necessarily the best approach to a program which is fundamental to program integrity. Local directors take exception to the funding methodology, pointing out that the formula does not take into consideration all costs associated with program operation. Since these costs have been considered part of the administration of benefits by both the federal and state government, the costs are not new mandates, but on-going responsibilities of local agencies.

The Virginia Tech study concluded that over 40% of the backlog of fraud referrals had not been investigated at the time the study was conducted (1996). There are various reasons for this backlog. Most obvious has been the lack of dedicated fraud staff. Consistent with state-established priorities established in the early 1990s, fraud has been one of the lowest priorities in many local departments. Additionally, as DPB points out in its report, some local prosecutors establish thresholds for dollar amounts of cases they will accept for prosecution. Prosecution is only one method for establishing that fraud occurred in a public assistance case. Another method is through an Administrative Disqualification Hearing (ADH). This method is used in a large number of cases for a variety of reasons. It is a very acceptable alternative to an expensive, time consuming court case. Since § 63.1-58.2 states that the state retained portion of all collections will be deposited to the Special Fraud Recovery Fund for use in the statewide fraud program, reimbursement or recoupment through any means, whether through a court order, ADH order, or voluntary repayment, will be used for funding Fraud FREE.

The DBP report states that the Fraud FREE Program has some incentive flaws. Actually, it is not designed to offer incentives, but to enforce the mandates of existing Code sections which require local departments to investigate public assistance cases for completeness and correctness. Fraud FREE does provide some funding to assist with program costs, to the extent funding is available. Any funding limitations do not negate the obligation to operate a vibrant fraud program. A fraud program should not be evaluated solely from the standpoint of cost effectiveness, but rather in terms of a commitment to prevention of fraud, waste, and abuse, and to program integrity.

Fraud FREE has completed the first two phases of its three phase implementation plan. The department is reviewing suggestions and comments received from local directors and workers, and will continue to work to improve program design and address funding issues.

Summary:

The proposed regulation describes the requirements for local administration, and state requirements for local reimbursement, of the statewide fraud program named Fraud Reduction/ Elimination Effort, or Fraud FREE. Local departments of social services must operate the Fraud FREE program, submit for approval a local plan of operation, and comply with program regulations and policy in order to receive state reimbursement for the local share of costs of fraud investigators. The regulation also describes the method by which the state will approve requests for staffing for the first year and subsequent years of program operation.
CHAPTER 325.
FRAUD REDUCTION/ELIMINATION EFFORT.


The following words and terms when used in this chapter shall have the following meanings unless the context clearly indicates otherwise:

“Department” means the Virginia Department of Social Services.

“Direct costs” means the cost of salary, fringe benefits and supporting costs of operation.

“Food stamps” means the program supervised by the Virginia Department of Social Services through which a household can receive food stamps with which to purchase food products.

“Fraud Recovery Special Fund” means the special fund established under § 63.1-58.2 D of the Code of Virginia.

“Fraud Reduction/Elimination Effort” means the program established in compliance with § 63.1-58.2 of the Code of Virginia to ensure that fraud prevention and investigation are aggressively pursued throughout the Commonwealth of Virginia.

“Fraud prevention and investigation units” means a person or persons whose job it is to work on all aspects of prevention and investigation of fraud cases.

“FREE” means the Fraud Reduction/Elimination Effort.

“General fund” means that portion of the budget of the Commonwealth of Virginia which is made up of general tax revenues, the major sources of which are sales tax, income tax, and profits from the Virginia Lottery.

“Local departments” means local departments of social services.

“Local share” means that portion of the administrative costs of operation borne by local departments of social services.

“Reimbursed” means the process by which the Department of Social Services provides monetary credit to local departments of social services for their administrative costs.

“Supporting costs of operation” means program costs other than salaries and fringe benefits. These supporting costs of operation include travel, telephone, utilities, supplies, and allowance for space.

“TANF” means the Temporary Assistance for Needy Families program.

“Temporary Assistance for Needy Families” means the program which provides a monthly cash benefit to families which meet income and eligibility requirements.

22 VAC 40-325-20. The Fraud Reduction/Elimination Effort.

A. In compliance with § 63.1-58.2 of the Code of Virginia, the Department of Social Services shall establish a statewide fraud prevention and control program, to be named the Fraud Reduction/Elimination Effort (FREE).

B. Each local department of social services shall operate FREE. Local departments shall submit a program operation plan, which shall include a description of program staffing, to the Department of Social Services for approval.

C. To the extent that state funding is available in the Fraud Recovery Special Fund, local departments which are in compliance with § 63.1-58.2 of the Code of Virginia, this chapter, and Department of Social Services FREE program policy shall be reimbursed for the local share of direct costs of approved Fraud FREE programs.

1. During the first year of the program, requests for staffing shall be approved based upon each local agency’s average TANF and food stamp caseload size.

2. Requests for subsequent years shall be evaluated based upon an agency’s average TANF and food stamp caseload size, average number of monthly applications for food stamps and TANF, number of workers, geographic location, number of fraud investigations, program compliance, and collections. In order to receive full reimbursement in subsequent years, the state retained portion of a local agency’s combined collections must equal or exceed the reimbursed cost of its positions dedicated to FREE.

VA.R. Doc. No. R99-12; Filed December 1, 1999, 8:21 a.m.
TITLE 4. CONSERVATION AND NATURAL RESOURCES

MARINE RESOURCES COMMISSION

REGISTRAR'S NOTICE: The following regulations filed by the Marine Resources Commission is exempt from the Administrative Process Act in accordance with § 9-6.14:4.1 F of the Code of Virginia; however, the commission is required to publish the full text of final regulations.

Title of Regulation: 4 VAC 20-270-10 et seq. Pertaining to Crabbing (amending 4 VAC 20-270-50).
Statutory Authority: § 28.2-201 of the Code of Virginia.
Effective Date: January 1, 2000.
Summary:
The amendment reduces the peeler crab pot limit from 400 to 300 pots per person.
Agency Contact: Copies of the regulation may be obtained from Deborah Cawthon, Regulatory Coordinator, Marine Resources Commission, P.O. Box 756, Newport New, VA 23607, telephone (757) 247-2248.

A. From April 1 through June 30, it shall be unlawful for any person to place, set or fish any crab pot in Virginia's tidal waters which does not contain at least two unobstructed cull rings of size and location within the pot as described, except as provided in subsection B of this section.
B. From July 1 through November 30, it shall be unlawful for any person to place, set or fish more than 400 peeler crab pots per vessel and it shall be unlawful for more than two peeler pot licensees to place, set or fish peeler pots from the same vessel.

VA.R. Doc. No. R00-55; Filed November 30, 1999, 11:23 a.m.

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Title of Regulation: 4 VAC 20-700-10 et seq. Pertaining to Crab Pots (amending 4 VAC 20-700-20).
Statutory Authority: § 28.2-201 of the Code of Virginia.
Effective Date: January 1, 2000.
Summary:
The amendments provide the basis for the inception of the commercial conch pot limited entry, licensed fishery for Virginia tidal waters. The amendments also establish a universal landing limit of 60 bushels and eliminate the allowance for multiple landing limits from a single vessel.
Agency Contact: Copies of the regulation may be obtained from Deborah Cawthon, Regulatory Coordinator, Marine Resources Commission, P.O. Box 756, Newport New, VA 23607, telephone (757) 247-2248.

4 VAC 20-700-20. Cull ring requirements.
A. It shall be unlawful for any person to place, set or fish any crab pot in Virginia's tidal waters which does not contain at least two unobstructed cull rings of size and location within the pot as described, except as provided in subsection B of this section.
B. The required 2-5/16 inches inside diameter cull ring may be obstructed in crab pots set in the crab dredge areas as set forth in 4 VAC 20-90-10 et seq., or on the seaside of Accomack and Northampton Counties or within Pocomoke or Tangier Sound proper. Any crab pot set within any tributary or subtributary of Pocomoke or Tangier Sound shall not contain any obstructed cull rings.
C. Peeler pots with a mesh size less than 1-1/2 inches shall be exempt from the cull ring requirement.

VA.R. Doc. No. R00-54; Filed November 30, 1999, 11:22 a.m.

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Title of Regulation: 4 VAC 20-890-10 et seq. Pertaining to Channeled Whelk (amending 4 VAC 20-890-10 and 4 VAC 20-890-35; adding 4 VAC 20-890-25).
Statutory Authority: § 28.2-201 of the Code of Virginia.
Effective Date: January 1, 2000.
Summary:
The amendments provide the basis for the inception of the commercial conch pot limited entry, licensed fishery for Virginia tidal waters. The amendments also establish a universal landing limit of 60 bushels and eliminate the allowance for multiple landing limits from a single vessel.
Agency Contact: Copies of the regulation may be obtained from Deborah Cawthon, Regulatory Coordinator, Marine Resources Commission, P.O. Box 756, Newport New, VA 23607, telephone (757) 247-2248.

The purpose of this regulation is to conserve the channeled whelk resource and provide for sustainable recruitment of channeled whelk to the fishery. As the channeled whelk are a slow-growing, long-lived species, limitations on the size and the types of gear which may harvest and possess channeled whelk from Virginia waters are necessary for the prevention of a stock decline.
channeled whelk in Virginia waters while minimizing the potential for overfishing of Virginia channeled whelk stocks.

4 VAC 20-890-25. Entry limitation; transfers; prohibitions.

A. The sale of commercial conch pot licenses shall be limited to registered commercial fishermen, solely for the harvest of channeled whelk from Virginia waters, who meet either of the following requirements:

1. The fisherman shall have held a provisional Virginia conch pot permit in 1999 and reported in accordance with the requirements of 4 VAC 20-610-60 and the 1999 conch-pot permit; or

2. The fisherman shall provide the commission with proof of having harvested channeled whelk from federal waters during the January 1, 1997, through October 1, 1999, period.

B. Any person licensed for commercial conch pot under the provisions of this section may transfer such license to any registered commercial fisherman when said transfer is documented on the form provided by the commission and approved by the Commissioner of Marine Resources. Upon approval, the person entering the Virginia commercial conch pot fishery shall purchase a commercial conch pot license in his own name. No commercial conch pot license shall be transferred more than once per calendar year.

C. It shall be unlawful for any person licensed under the provisions of subsection A of this section as a commercial conch pot fisherman to do any of the following, unless otherwise specified:

1. Fail to be on board the vessel when that vessel is operating in a commercial conch pot harvesting capacity within Virginia tidal waters;

2. Fail to display the commercial conch pot license plate prominently on the starboard side of the vessel;

3. Fail to inscribe each conch pot buoy with the last four numbers of the commercial fisherman registration license followed by the letter "W," which correspond to the lawful conch pot licensee;

4. Place, set or fish more than 200 conch pots within Virginia tidal waters;

5. Retain by-catch of any other species caught by conch pots; and

6. Fail to report harvest-related data from harvests in Virginia waters on a monthly basis on forms supplied by the commission.

D. It shall be unlawful for any person to take or catch channeled whelk with conch pots from the tidal waters of Virginia without first having purchased a conch pot license from the commission or its agent.

The fee for the conch pot license shall be $48.

No person may purchase a conch pot license unless he is a registered commercial fisherman as described in § 28.2-241 of the Code of Virginia.

4 VAC 20-890-35. Possession and landing limits.

A. The possession and landing limits for channeled whelk shall be 60 bushels per vessel; however, if the vessel is operated by a person permitted to harvest channeled whelk from Virginia waters, the possession and landing limit shall be equal to the number of persons on board the vessel who are permitted to harvest channeled whelk from Virginia waters multiplied by 60 bushels.

B. It shall be unlawful for any person to possess aboard any vessel or to land more than the possession and landing limit for channeled whelk specified in subsection A of this section. In the enforcement of this provision, the vessel operator or captain shall be responsible for the possession and landing limit.

VA.R. Doc. No. R00-53; Filed November 30, 1999, 11:21 a.m.

TITLE 9. ENVIRONMENT

STATE AIR POLLUTION CONTROL BOARD

Title of Regulation: Regulations for the Control and Abatement of Air Pollution (Rev. J97).
9 VAC 5-80-10 et seq. Permits for Stationary Sources (adding 9 VAC 5-80-1400 through 9 VAC 5-80-1590).


Effective Date: February 1, 2000.

Summary:

The regulation establishes a new source review permit program for major sources of hazardous air pollutants (HAPs) whereby owners are required to obtain a permit prior to beginning construction or reconstruction of a new facility in order to implement the requirements of § 112(g) of the federal Clean Air Act. The major components of the regulation address the following subjects: applicability; general requirements; permit application requirements; application information required; action on permit applications; public participation; standards and conditions for granting permits; application review and analysis; compliance determination and verification by performance testing; permit invalidation, rescission, revocation and enforcement; existence of permit no defense; compliance with local zoning requirements; transfer of and changes to permits; administrative and minor permit amendments; significant amendment procedures; reopening for cause; requirements for constructed or reconstructed major sources subject to a subsequently promulgated MACT standard or MACT requirements.

This regulation provides the Commonwealth with a program that satisfies the applicable requirements of 40 CFR 63.40 through 63.44.

Originally, the regulation was proposed to encompass permitting for all potential major sources of HAPs in...
addition to those affected by § 112(g) of the federal Clean Air Act. Thus, a major source for this rule was originally a § 112(g) source, a § 112(i) source, or a 40 CFR Part 61 source. During the public comment period, comments were submitted which raised issues that necessitated substantive changes to the original proposal; therefore, the proposal was revised such that it applies only to § 112(g) sources. The substantive changes that reflect the change in the overall approach to the regulation are found in 9 VAC 5-80-1400 (Applicability), 9 VAC 5-80-1410 (Definitions), and 9 VAC 5-80-1420 (General).

Summary of Public Comments and Agency’s Response: A summary of comments made by the public and the agency’s response may be obtained from the promulgating agency or viewed at the office of the Registrar of Regulations.

Agency Contact: Copies of the regulation may be obtained from Alma Jenkins, Office of Air Regulatory Development, Department of Environmental Quality, P.O. Box 10009, Richmond, VA 23240, telephone (804) 698-4070.

PART II.
Permit Procedures.

Article 7.
Permits for New and Reconstructed Major Sources of Hazardous Air Pollutants.

9 VAC 5-80-1400. Applicability.

A. The provisions of this article apply to any owner or other person who constructs or reconstructs a major source of hazardous air pollutants.

B. The provisions of this article apply throughout the Commonwealth of Virginia.

C. Regardless of the exemptions provided in this article, no owner or other person shall circumvent the requirements of this article by causing or allowing a pattern of ownership or development over a geographic area of a source which, except for the pattern of ownership or development, would otherwise require a permit.

D. No provision of this article shall be construed as exempting any stationary source, emissions unit, or affected source from the provisions of this chapter.

E. Unless specified otherwise, the provisions of this article are applicable to various sources as follows:

1. Provisions referring to “sources,” or “new or reconstructed sources, or both” or “stationary sources” are applicable to the construction or reconstruction of all major sources of hazardous air pollutants.

2. Any emissions units, stationary sources, or air pollutants not subject to the provisions of this article may be subject to other provisions of the new source review program.

F. (Unless a MACT standard is promulgated.) The provisions of this article do not apply to (i) electric utility steam generating units unless and until such time as these units are added to the source category list, (ii) research and development activities that are within a source category that has been deleted from the source category list.

9 VAC 5-80-1410. Definitions.

A. For the purpose of this article and subsequent amendments or any orders issued by the board, the words or terms shall have the meaning given them in subsection C of this section.

B. As used in this section, all terms not defined here shall have the meaning given them in 9 VAC 5 Chapter 10 (9 VAC 5-10-10 et seq.), unless otherwise required by context.

C. Terms defined.

“Affected source” means the stationary source, the group of stationary sources, or the portion of a stationary source which is regulated by a MACT standard.

“Affected states” are all states:

1. Whose air quality may be affected and that are contiguous to the Commonwealth; or

2. Whose air quality may be affected and that are within 50 miles of the major source for which a case-by-case MACT determination is made in accordance with this article.

“Available information” means, for purposes of identifying control technology options for the affected stationary source, information contained in the following information sources as of the date of approval of the permit:

1. A relevant proposed regulation, including all supporting information.

2. Background information documents for a draft or proposed regulation.

3. Data and information available from the Control Technology Center developed pursuant to § 113 of the federal Clean Air Act.

4. Data and information contained in the Aerometric Informational Retrieval System including information in the MACT database.

5. Any additional information that can be expeditiously provided by the administrator.

6. For the purpose of determinations by the board, any additional information provided by the applicant or others, and any additional information considered available by the board.

“Begin actual construction” means initiation of permanent physical on-site construction of an emissions unit. This includes, but is not limited to, installation of building supports and foundations, laying of underground pipework, and construction of permanent storage structures.

“Begin actual reconstruction” means initiation of permanent physical on-site reconstruction of an emissions unit. This includes, but is not limited to, installation of building supports and foundations, laying of underground pipework, and construction of permanent storage structures.
"Best controlled similar source" means [an affected a stationary] source that (i) has comparable emissions and is structurally similar in design and capacity to other [affected stationary] sources such that the [affected stationary] sources could be controlled using the same control technology, and (ii) uses a control technology that achieves the lowest emission rate among all other similar sources in the United States.

"Case-by-case MACT determination" means a determination by the board, pursuant to the requirements of this article, which establishes a MACT emission limitation, MACT work practice standard, or other MACT requirements for [an affected a stationary] source subject to this article.

"Commenced" means, with respect to construction or reconstruction of a stationary source, that the owner has undertaken a continuous program of construction or reconstruction or that an owner has entered into a contractual obligation to undertake and complete, within a reasonable time, a continuous program of construction or reconstruction.

"Complete application" means that the application contains all the information necessary for processing the application and the provisions of §10.1-1321.1 of the Virginia Air Pollution Control Law have been met. Designating an application complete for purposes of permit processing does not preclude the board from requesting or accepting additional information.

"Construct a major source" means:
1. To fabricate, erect, or install a major source at any undeveloped site, or
2. To fabricate, erect, or install a major process or production unit at any site.

"Construction" means:
1. The fabrication, erection, or installation of a major source at any undeveloped site, or
2. The fabrication, erection, or installation of a major process or production unit at any site.

"Control technology" means measures, processes, methods, systems, or techniques to limit the emission of hazardous air pollutants including, but not limited to, measures that:
1. Reduce the quantity of, or eliminate emissions of, such pollutants through process changes, substitution of materials or other modifications;
2. Enclose systems or processes to eliminate emissions;
3. Collect, capture or treat such pollutants when released from a process, stack, storage or fugitive emissions point;
4. Are design, equipment, work practice, or operational standards (including requirements for operator training or certification); or
5. Are a combination of subdivisions 1 through 4 of this definition.

"Electric utility steam generating unit" means any fossil fuel fired combustion unit of more than 25 megawatts that serves a generator that produces electricity for sale. A unit that co-generates steam and electricity and supplies more than one-third of its potential electric output capacity and more than 25 megawatts electric output to any utility power distribution system for sale shall be considered an electric utility steam generating unit.

"Emergency" means, in the context of 9 VAC 5-80-1580 C, a situation where immediate action on the part of a source is needed and where the timing of the action makes it impractical to meet the requirements of this article, such as sudden loss of power, fires, earthquakes, floods or similar occurrences.

"Emission standard" means an emission standard, limitation, prohibition, or other regulation promulgated in 9 VAC 5 Chapter 60 (9 VAC 5-60-10 et seq.)

"Emissions unit" means any part of a stationary source which emits or would have the potential to emit any hazardous air pollutant.

"Enforceable as a practical matter" means that the permit contains emission limitations that are enforceable by the board or the department and meet the following criteria:
1. Are permanent.
2. Contain a legal obligation for the owner to adhere to the terms and conditions.
3. Do not allow a relaxation of a requirement of the state implementation plan.
4. Are technically accurate and quantifiable.
5. Include averaging times or other provisions that allow at least monthly (or a shorter period if necessary to be consistent with the emission standard) checks on compliance. This may include, but not be limited to, the following: compliance with annual limits in a rolling basis, monthly or shorter limits, and other provisions consistent with 9 VAC 5-80-1490 and other regulations of the board.
6. Require a level of recordkeeping, reporting and monitoring sufficient to demonstrate compliance.

"EPA" means the United States Environmental Protection Agency.

"Federal operating permit" means a permit issued under Article 1 (9 VAC 5-80-50 et seq.) or Article 3 (9 VAC 5-80-360 et seq.) of this part.

"Federally enforceable" means all limitations and conditions which are enforceable by the administrator and citizens under the federal Clean Air Act or that are enforceable under other statutes administered by the administrator. Federally enforceable limitations and conditions include but are not limited to the following:
1. Emission standards, alternative emission standards, alternative emission limitations, and equivalent emission limitations established pursuant to §112 of the federal Clean Air Act as amended in 1990.

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2. New source performance standards established pursuant to § 111 of the federal Clean Air Act, and emission standards established pursuant to § 112 of the federal Clean Air Act before it was amended in 1990.

3. All terms and conditions in a federal operating permit, including any provisions that limit a source’s potential to emit, unless expressly designated as not federally enforceable.

4. Limitations and conditions that are part of an approved State Implementation Plan (SIP) or a Federal Implementation Plan (FIP).

5. Limitations and conditions that are part of a federal construction permit issued under 40 CFR 52.21 or any construction permit issued under regulations approved by EPA in accordance with 40 CFR Part 51. [This does not include limitations and conditions that are established to address plans, programs, or regulatory requirements that are enforceable only by the Commonwealth.]

6. Limitations and conditions that are part of an operating permit issued pursuant to a program approved by EPA into a SIP as meeting EPA’s minimum criteria for federal enforceability, including adequate notice and opportunity for EPA and public comment prior to issuance of the final permit and practicable enforceability. [This does not include limitations and conditions that are established to address plans, programs, or regulatory requirements that are enforceable only by the Commonwealth.]

7. Limitations and conditions in a Virginia regulation or program that has been approved by EPA under subpart E of 40 CFR Part 63 for the purposes of implementing and enforcing § 112 of the federal Clean Air Act.

8. Individual consent agreements that EPA has legal authority to create.

"Fixed capital cost" means the capital needed to provide all the depreciable components of an existing source.

"Fugitive emissions" means those emissions which could not reasonably pass through a stack, chimney, vent, or other functionally equivalent opening.

"Hazardous air pollutant" means any air pollutant listed in § 112(b) of the federal Clean Air Act as amended by 40 CFR 63.60.

"MACT standard" means (i) an emission standard; (ii) an alternative emission standard; or (iii) an alternative emission limitation promulgated in 40 CFR Part 63 that applies to the stationary source, the group of stationary sources, or the portion of a stationary source regulated by such standard or limitation. A MACT standard may include or consist of a design, equipment, work practice, or operational requirement, or other measure, process, method, system, or technique (including prohibition of emissions) that the administrator establishes for new or existing sources to which such standard or limitation applies. Every MACT standard established pursuant to § 112 of the federal Clean Air Act includes subpart A of 40 CFR Part 63 and all applicable appendices of 40 CFR Part 63 or of other parts of Title 40 of the Code of Federal Regulations that are referenced in that standard.

"Major process or production unit" means any process or production unit which in and of itself emits or has the potential to emit 10 tons per year of any hazardous air pollutant or 25 tons per year of any combination of hazardous air pollutants.

"Major source" means any stationary source or group of stationary sources located within a contiguous area and under common control that emits or has the potential to emit considering controls, in the aggregate, 10 tons per year or more of any hazardous air pollutant or 25 tons per year or more of any combination of hazardous air pollutants, unless the board establishes a lesser quantity, or in the case of radionuclides, different criteria from those specified in this definition.

"Maximum achievable control technology (MACT) emission limitation" means the emission limitation which is not less stringent than the emission limitation achieved in practice by the best controlled similar source, and which reflects the maximum degree of reduction in emissions that the board, taking into consideration the cost of achieving such emission reduction and any nonair quality health and environmental impacts and energy requirements, determines is achievable by the constructed or reconstructed major source.

"New source review program" means a program for the preconstruction review and permitting of new stationary sources or expansions to existing ones in accordance with regulations promulgated to implement the requirements of §§ 110 (a)(2)(C), 165 (relating to permits in prevention of significant deterioration areas) and 173 (relating to permits in nonattainment areas) and 112 (relating to permits for hazardous air pollutants) of the federal Clean Air Act.

"Permit" means a document issued pursuant to this article containing all federally enforceable conditions necessary to enforce the application and operation of any maximum achievable control technology or other control technologies such that the MACT emission limitation is met.

"Potential to emit" means the maximum capacity of a stationary source to emit a pollutant under its physical and operational design. Any physical or operational limitation on the capacity of the source to emit a pollutant, including air pollution control equipment, and restrictions on hours of operation or on the type or amount of material combusted, stored, or processed, shall be treated as part of its design only if the limitation or its effect on emissions is state or and federally enforceable. [Fugitive emissions count in determining the potential to emit of a stationary source. Secondary emissions do not count in determining the potential to emit of a stationary source.]

"Presumptive MACT" means a preliminary MACT determination made by EPA, in consultation with states and other stakeholders, after data on a source category's
emissions and controls have been collected and analyzed, but before the MACT standard has been promulgated.

"Process or production unit" means any collection of structures or equipment or both, that processes, assembles, applies, or otherwise uses material inputs to produce or store an intermediate or final product. A single facility may contain more than one process or production unit.

"Public comment period" means a time during which the public shall have the opportunity to comment on the permit application information (exclusive of confidential information), the preliminary review and analysis, and the preliminary decision of the board regarding the permit application.

"Reconstruct a major source" means to replace components at an existing major process or production unit whenever:

1. The fixed capital cost of the new components exceeds 50% of the fixed capital cost that would be required to construct a comparable new process or production unit; and

2. It is technologically and economically feasible for the reconstructed major source to meet the applicable standard for new sources established in a permit.

"Reconstruction" means the replacement of components at an existing major process or production unit whenever:

1. The fixed capital cost of the new components exceeds 50% of the fixed capital cost that would be required to construct a comparable new process or production unit; and

2. It is technologically and economically feasible for the reconstructed process or production unit to meet the applicable standard for new sources established in a permit.

"Research and development activities" means activities conducted at a research or laboratory facility whose primary purpose is to conduct research and development into new processes and products, where such source is operated under the close supervision of technically trained personnel and is not engaged in the manufacture of products for sale or exchange for commercial profit, except in a de minimis manner.

"Secondary emissions" means emissions which occur or would occur as a result of the construction, reconstruction, or operation of a stationary source, but do not come from the stationary source itself. For the purpose of this article, secondary emissions must be specific, well-defined, and quantifiable, and must impact upon the same general areas as the stationary source which causes the secondary emissions. Secondary emissions include emissions from any off-site support facility which would not be constructed or increase its emissions except as a result of the construction or operation of the stationary source. Secondary emissions do not include any emissions which come directly from a mobile source, such as emissions from the tailpipe of a motor vehicle, from a train, or from a vessel.

"Similar source" means a stationary source or process that has comparable emissions and is structurally similar in design and capacity to a constructed or reconstructed major source such that the source could be controlled using the same control technology.

[ "Source category list" means the list and schedule issued pursuant to § 112 (c) and (e) for promulgating MACT standards issued pursuant to § 112 (d) of the federal Clean Air Act and published in the Federal Register at 63 FR 7155, February 12, 1998. ]

"State enforceable" means all limitations and conditions which are enforceable as a practical matter, including those requirements developed pursuant to 9 VAC 5-20-160, requirements within any applicable order or variance, and any permit requirements established pursuant to this chapter.

"Stationary source" means any building, structure, facility or installation which emits or may emit any air pollutant.

"Uncontrolled emission rate" means the emission rate from a source when operating at maximum capacity without air pollution control equipment. Air pollution control equipment is equipment that enables the source to conform to applicable air pollution control laws and regulations and that is not vital to its operation.

9 VAC 5-80-1420. General.

A. No owner or other person shall begin actual construction or reconstruction of any major source of hazardous air pollutants without first obtaining from the board a permit to construct and operate or to reconstruct and operate such source.

B. The board may combine the requirements of and the permits for emissions units within a stationary source subject to the new source review program into one permit. Likewise the board may require that applications for permits for emissions units within a stationary source required by any provision of the new source review program be combined into one application.

C. All provisions contained in the permit shall be federally enforceable upon the effective date of issuance of the permit [ , except for those provisions that are established to address plans, programs, or regulatory requirements that are enforceable only by the Commonwealth ].

D. Nothing in the regulations of the board shall be construed to prevent the board from granting permits for programs of construction or reconstruction in planned incremental phases. In such cases, all net emissions increases from all emissions units covered by the program shall be added together for determining the applicability of this article.

E. [ For permits issued to affected sources, ] The MACT emission [ limitation limitations ] and requirements established [ according to this article ] shall be effective as required by 9 VAC 5-80-1450 I, consistent with the principles established in subsection F of this section, and supported by the information listed in 9 VAC 5-80-1440. The owner shall comply with the requirements in 9 VAC 5-80-1450 J and 9 VAC 5-80-1490,
and with all applicable requirements in Subpart A of 40 CFR Part 63.

F. The following general principles shall govern preparation by the owner of each permit application or other application for [affected stationary] sources requiring a case-by-case MACT determination concerning construction or reconstruction of a major source, and all subsequent review of and actions taken concerning such an application by the board:

1. The MACT emission limitation or MACT requirements recommended by the applicant and approved by the board shall not be less stringent than the emission control which is achieved in practice by the best controlled similar source, as determined by the board.

2. Based upon available information, the MACT emission limitation and control technology (including any requirements under subdivision 3 of this subsection) recommended by the applicant and approved by the board shall achieve the maximum degree of reduction in emissions of hazardous air pollutants which can be achieved by utilizing those control technologies that can be identified from the available information, taking into consideration the costs of achieving such emission reduction and any non-air quality health and environmental impacts and energy requirements associated with the emission reduction.

3. The applicant may recommend a specific design, equipment, work practice, or operational standard, or a combination thereof, and the board may approve such a standard if the board specifically determines that it is not feasible to prescribe or enforce an emission limitation. The phrase "not feasible" means any situation in which the board determines that:

a. A hazardous air pollutant or pollutants cannot be emitted through a conveyance designed and constructed to emit or capture such pollutant, or that any requirement for, or use of, such a conveyance would be inconsistent with the Regulations for the Control and Abatement of Air Pollution.

b. The application of measurement methodology to a particular class of sources is not practicable due to technological and economic limitations.

4. If the administrator has either proposed a MACT emission standard or made a presumptive MACT determination for the source category which includes the constructed or reconstructed major source, the board shall consider the MACT emission limitations and requirements of the proposed standard or presumptive MACT determination in determining the MACT emission limitation applicable to the constructed or reconstructed major source.

H. For sources subject to this article, the provisions of 40 CFR 63.5 shall be implemented through this article. Permits issued under this article shall be the administrative mechanism for issuing approvals of construction or reconstruction under 40 CFR 63.5. In cases where there are differences between the provisions of this article and the provisions of 40 CFR Part 61, the more restrictive provisions shall apply.

4. G. ] The provisions of subsection F of this section shall not apply to new, major process or production units, provided the process or production unit satisfies the criteria in subdivisions 1 through 6 of this subsection:

1. All hazardous air pollutants emitted by the process or production unit that would otherwise be controlled under the requirements of this article will be controlled by emission control equipment which was previously installed at the same site as the process or production unit;

2. a. The board has determined within a period of five years prior to the fabrication, erection, or installation of the process or production unit that the existing emission control equipment represented best available control technology (BACT) or lowest achievable emission rate (LAER), determined in accordance with 9 VAC 5-50-280 (BACT) or 9 VAC 5-50-270 (LAER), for the category of pollutants which includes those hazardous air pollutants to be emitted by the process or production unit; or

b. The board determines that the control of hazardous air pollutant emissions provided by the existing equipment will be equivalent to that level of control currently achieved by other well-controlled similar sources (i.e., equivalent to the level of control that would be provided by a current BACT or LAER determination);

3. The board determines that the percent control efficiency for emissions of hazardous air pollutants from all sources to be controlled by the existing control equipment will be equivalent to the percent control efficiency provided by the control equipment prior to the inclusion of the new process or production unit;

4. The board has provided notice and an opportunity for public comment concerning its determination that criteria in subdivisions 1 through 3 of this subsection apply and concerning the continued adequacy of any prior BACT or LAER determination;

5. If any commenter has asserted that a prior BACT or LAER determination is no longer adequate, the board has determined that the level of control required by that prior determination remains adequate; and

6. Any emission limitations, work practice requirements, or other terms and conditions upon which the above determinations by the board are predicated will be construed by the board as applicable requirements under the federal operating permit program and either have
been incorporated into any existing federal operating permit for the [affected stationary] source or will be incorporated into such permit upon issuance.

9 VAC 5-80-1430. Applications.

A. A single application is required identifying at a minimum each emissions unit subject to the provisions of this article. The application shall be submitted according to procedures approved by the board. However, where several emissions units are included in one project, a single application covering all units in the project may be submitted.

B. A separate application is required for each major source.

C. For projects with phased development, a single application should be submitted covering the entire project.

D. Any application form, report, or compliance certification submitted to the board shall comply with the provisions of 9 VAC 5-20-230.

9 VAC 5-80-1440. Application information required.

A. The board shall furnish application forms to applicants. Completion of these forms serves as initial registration of new and reconstructed sources.

B. Each application for a permit shall include such information as may be required by the board to determine compliance with the [emission standards which are applicable MACT emission limitation established under this article]. The information required shall include, but is not limited to, the following:

1. Company name and address (or plant name and address if different from the company name), owner's name and agent, and telephone number and names of plant site manager or contact or both.

2. A brief description of the major source, including a description of the source's processes and products (by Standard Industrial Classification Code), to be constructed or reconstructed and identification of any listed source category or categories in which it is included.

3. All emissions of hazardous air pollutants.
   a. A permit application shall describe all emissions of hazardous air pollutants emitted from any emissions unit to be covered by the permit.
   b. Emissions shall be calculated as required in the permit application form or instructions.
   c. Fugitive emissions shall be included in the permit application to the extent quantifiable.

4. The hazardous air pollutants emitted by the constructed or reconstructed major source and the estimated emission rate for each such hazardous air pollutant. Emissions rates shall be expressed in tons per year and in such other terms as are necessary to establish compliance consistent with the applicable standard reference test method.

5. The maximum and expected utilization of capacity of the constructed or reconstructed major source and the associated uncontrolled emission rates for that source.

6. The controlled emissions for the constructed or reconstructed major source in tons per year at expected and maximum utilization of capacity.

7. Information needed to determine or regulate emissions as follows: fuels, fuel use, raw materials, production rates, loading rates, and operating schedules.

8. Limitations on source operation affecting emissions or any work practice standards, where applicable, for all hazardous air pollutants at the source.

9. Calculations on which the information in subdivisions 3 through 8 of this subsection is based. Any calculations shall include sufficient detail to permit assessment of the validity of such calculations.

10. Any federally enforceable emission limitations applicable to the constructed or reconstructed major source.

11. The expected commencement date for the construction or reconstruction of the major source.

12. The expected completion date for construction or reconstruction of the major source.

13. The anticipated date of startup for the constructed or reconstructed major source.

14. Any additional information or documentation that the board deems necessary to review and analyze the air pollution aspects of the stationary source [an affected source] or emissions unit.

C. In each instance where [ an affected stationary] source would require additional control technology or a change in control technology to be in compliance with the MACT emission limitation established under this article, the application shall contain the following information:

1. Information described in subsection B of this section.

2. The control technology selected by the owner and compliance monitoring devices or activities that, if properly operated and maintained, will meet the MACT emission limitation or standard as determined according to the principles set forth in 9 VAC 5-80-1420 F.

3. A recommended emission limitation for the constructed or reconstructed major source consistent with the principles set forth in 9 VAC 5-80-1420 F.

4. The selected control technology to meet the recommended MACT emission limitation, including technical information on the design, operation, size, estimated control efficiency of the control technology (and the manufacturer's name, address, telephone number, and relevant specifications and drawings, if requested by the board).

5. Supporting documentation including identification of alternative control technologies considered by the applicant to meet the emission limitation, and analysis of
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cost and non-air quality health and environmental impacts or energy requirements for the selected control technology.

6. Any other relevant information required pursuant to Subpart A of 40 CFR Part 63.

D. In each instance where the owner contends that an affected source will be in compliance, upon startup, with the MACT emission limitation established under this article without a change in control technology, the application shall contain:

1. Information described in subsections B and C of this section; and

2. Documentation of the control technology in place.

E. The above information and analysis shall be determined and presented according to procedures and using methods acceptable to the board.

9 VAC 5-80-1450. Action on permit application.

A. Within 45 days after receipt of an application, the board shall notify the applicant of the status of the application. The notification of the initial determination with regard to the status of the application shall be provided by the board in writing and shall include: (i) a determination as to which provisions of the new source review program are applicable, (ii) the identification of any deficiencies, and (iii) a determination as to whether the application contains sufficient information to begin application review. The determination that the application has sufficient information to begin review is not necessarily a determination that it is complete. Within 30 days after receipt of any additional information, the board shall notify the applicant of any deficiencies in such information. The date of receipt of a complete application for processing under subsection B of this section shall be the date on which the board received all required information and the provisions of §10.1-1321.1 of the Virginia Air Pollution Control Law have been met.

B. Processing time for a permit is normally 180 days following receipt of a complete application. The board may extend this time period if additional information is required. Processing steps may include, but not be limited to:

1. Completion of the application review and analysis in accordance with 9 VAC 5-80-1480 and the preliminary decision of the board;

2. Completion of the emission limitation review (if any);

3. Completion of the public participation requirements in 9 VAC 5-80-1460; and

4. Completion of the final review and analysis and the final decision of the board.

C. At its discretion, the board may undertake the following steps prior to commencing with the public participation requirements of 9 VAC 5-80-1460:

1. The board shall initially approve the recommended emission limitation and other terms set forth in the application, or the board shall notify the owner in writing of its intent to disapprove the application, within 30 calendar days after the owner is notified in writing that the application is complete.

2. The owner may present, in writing, within 60 calendar days after receipt of notice of the board's intent to disapprove the application, additional information or arguments pertaining to, or amendments to, the application for consideration by the board before it decides whether to finally disapprove the application.

3. The board shall either initially approve or issue a final disapproval of the application within 90 days after it notifies the owner of an intent to disapprove or within 30 days after the date additional information is received from the owner, whichever is earlier.

D. The board will normally take action on all applications after expiration of the public comment period (and consideration of comments from that), unless more information is needed. The board shall notify the applicant in writing of its final decision on the application, including its reasons, and shall also specify the applicable emission limitations. These emission limitations are applicable during any emission testing conducted in accordance with 9 VAC 5-80-1490.

E. A final determination by the board to disapprove any application shall be in writing and shall specify the grounds on which the disapproval is based. If any application is finally disapproved, the owner may submit a subsequent application concerning construction or reconstruction of the same major source, provided that the subsequent application has been amended in response to the stated grounds for the prior disapproval.

F. The applicant may appeal the decision pursuant to 9 VAC 5 Chapter 170 (9 VAC 5-170-190 et seq.).

G. Within five days after notification to the applicant pursuant to subsection B of this section, the notification and any comments received pursuant to the public comment period and public hearing shall be made available for public inspection at the same location as was the information in 9 VAC 5-80-1460 H 1.

H. The board shall send a copy of any final permit issued to an affected source to the administrator through the appropriate regional office and to all other state and local air pollution control agencies having jurisdiction in affected states. Within 60 days of the issuance of the final permit, the board shall provide a copy of such permit to the administrator, and shall provide a summary in a compatible electronic format for inclusion in the MACT database.

I. The effective date of a case-by-case MACT determination shall be the date the permit becomes final.

J. On and after the date of startup, a constructed or reconstructed major source which is subject to the requirements of this article shall be in compliance with all applicable requirements specified in the permit.

9 VAC 5-80-1460. Public participation.

A. No later than 15 days after receiving the initial determination notification required under 9 VAC 5-80-1450 A,
the applicant for a permit for a major source of hazardous air pollutants shall notify the public of the proposed source as required in subsection B of this section. The applicant shall also provide an informational briefing about the proposed source for the public as required in subsection C of this section.

B. The public notice required under this section shall be placed by the applicant in at least one newspaper of general circulation in the affected air quality control region. The notice shall be approved by the board and shall include, but not be limited to, the following:

1. The source name, location, and type;
2. The applicable pollutants and the total quantity of each which the applicant estimates will be emitted, and a brief statement of the air quality impact of such pollutants;
3. The control technology proposed to be used at the time of the publication of the notice;
4. The date, time and place of the informational briefing; and
5. The name and telephone number of a contact person employed by the applicant who can answer questions about the proposed source.

C. The informational briefing shall be held in the locality where the source is or will be located and at least 30 days, but no later than 60 days, following the day of the publication of the public notice in the newspaper. The applicant shall inform the public about the operation and potential air quality impact of the source and answer any questions concerning air quality about the proposed source from those in attendance at the briefing. At a minimum, the applicant shall provide information on and answer questions about (i) specific pollutants and the total quantity of each which the applicant estimates will be emitted and (ii) the control technology proposed to be used at the time of the informational briefing. Representatives from the board shall attend and provide information and answer questions on the permit application review process.

D. Upon a determination by the board that it will achieve the desired results in an equally effective manner, an applicant for a permit may implement an alternative plan for notifying the public as required in subsection B of this section and for providing the informational briefing as required in subsection C of this section.

E. Prior to the decision of the board, all permit applications shall be subject to a public comment period of at least 30 days.

F. No sooner than 30 days after the start of the public comment period, a public hearing shall be held in accordance with this section for any application which has the potential for public interest concerning air quality issues as determined by the board on the basis of the following criteria:

1. Whether the project is opposed by any person;
2. Whether the project has resulted in adverse publicity;
3. Whether the project has generated adverse comment through any public participation or governmental review process initiated by any other governmental agency; and
4. Whether the project has generated adverse comment by a local official, governing body or advisory board.

G. When a public comment period and public hearing are required, the board shall notify the public by advertisement in at least one newspaper of general circulation in the area affected of the opportunity for the public comment and the public hearing on the information available for public inspection under the provisions of subdivision 1 of this subsection. The notification shall be published at least 30 days prior to the day of the public hearing.

1. Information on the permit application (exclusive of confidential information under 9 VAC 5-170-60), as well as the preliminary review and analysis and preliminary decision of the board, shall be available for public inspection during the entire public comment period in at least one location in the affected area.
2. A copy of the notice shall be sent to all local air pollution control agencies having jurisdiction in the affected air quality control region, all states sharing the affected air quality control region, and to the regional EPA administrator.

3. Notices of public hearings published under this section shall meet the requirements of § 10.1-1307.01 of the Virginia Air Pollution Control Law.

H. In order to facilitate the efficient issuance of permits under Articles 1 and 3 of this chapter, upon request of the applicant the board shall process the permit application under this article using public participation procedures meeting the requirements of this section and 9 VAC 5-80-270 or 9 VAC 5-80-670, as applicable.

9 VAC 5-80-1470. Standards and conditions for granting permits.

A. No permit shall be granted pursuant to this article unless it is shown to the satisfaction of the board that the source will be designed, built and equipped to operate without causing a violation of the applicable provisions of the regulations of the board and that the following standards have been met:

1. The source shall be designed, built and equipped to comply with applicable emission standards and other requirements prescribed under 9 VAC 5 Chapter 60 (9 VAC 5-60-10 et seq.).
2. [ For affected sources. ] The source shall be designed, built and equipped to comply with the MACT emission limitation and other requirements prescribed in the permit.
3. [ For sources subject to permits issued in accordance with 9 VAC 5-80-1420 G, the source shall be designed, built, and equipped to comply with the applicable emission standard and other requirements prescribed in 40 CFR Part 61.
4. For sources subject to permits issued in accordance with 9 VAC 5-80-1420 H, the source shall be designed, built, and equipped to comply with the applicable MACT standard and other requirements prescribed in 40 CFR Part 63.

5. 3. The source shall be designed, built and equipped to operate without causing a violation of the applicable provisions of regulations of the board.

B. Permits granted pursuant to this article for affected sources shall:

1. Contain a MACT emission limitation (or a MACT work practice standard if the board determines it is not feasible to prescribe or enforce an emission limitation) to control the emissions of hazardous air pollutants which is determined by the board and conforms to the principles set forth in 9 VAC 5-80-1420 F.

2. Specify any notification, operation and maintenance, performance testing, monitoring, reporting and recordkeeping requirements.

3. Include the following:
   a. In addition to the MACT emission limitation or MACT work practice standard established under this article, additional emission limits, production limits, operational limits or other terms and conditions necessary to ensure federal enforceability of the MACT emission limitation.
   b. Compliance certifications, testing, monitoring, reporting and recordkeeping requirements that are consistent with the requirements of 9 VAC 5-80-110 K.
   c. Monitoring capable of demonstrating continuous compliance during the applicable reporting period. Such monitoring data shall be of sufficient quality to be used as a basis for enforcing all applicable requirements established under this article, including emission limitations.
   d. A statement requiring the owner to comply with all applicable requirements contained in this article.

C. Permits granted pursuant to this article shall contain emission standards as necessary to implement the provisions of this article. The following criteria shall be met in establishing emission standards to the extent necessary to assure that emission levels are enforceable as a practical matter:

1. Standards may include the level, quantity, rate, or concentration or any combination of them for each affected pollutant.

2. In no case shall a standard result in emissions which would exceed the emissions rate based on the potential to emit of the emissions unit.

3. Standards shall only include limitations that are determined by the board to be achievable through application of production processes or available methods, systems, and techniques, including, but not limited to, any of the following: emissions control equipment, fuel cleaning or treatment, fuel combustion techniques, or substitution of less toxic or nontoxic materials.

4. The standard may prescribe, as an alternative to or a supplement to an emission limitation, an equipment, work practice, fuels specification, process materials, maintenance, or operational standard, or any combination of them.

D. Permits issued under this article shall contain, but not be limited to, any of the following elements as necessary to ensure that the permits are enforceable as a practical matter:

1. Emission standards.

2. Conditions necessary to enforce emission standards. Conditions may include, but not be limited to, any of the following:
   [a. ] Limit on fuel sulfur content.
   [b. ] Limit on production rates with time frames as appropriate to support the emission standards.
   [c. ] Limit on raw material usage rate.
   [d. ] Limits on the minimum required capture, removal and overall control efficiency for any air pollution control equipment.

3. Specifications for permitted equipment, identified as thoroughly as possible. The identification shall include, but not be limited to, type, rate, capacity, and size.

4. Specifications for air pollution control equipment installed or to be installed and the circumstances under which such equipment shall be operated.

5. Specifications for air pollution control equipment operating parameters, where necessary to ensure that the required overall control efficiency is achieved. The operating parameters may include, but not be limited to, any of the following:
   a. Pressure indicators and required pressure drop.
   b. Temperature indicators and required temperature.
   c. pH indicators and required pH.
   d. Flow indicators and required flow.

6. Requirements for proper operation and maintenance of any pollution control equipment, and appropriate spare parts inventory.

7. Stack test requirements.

8. Reporting or recordkeeping requirements, or both.

9. Continuous emission or air quality monitoring requirements, or both.

10. Other requirements as may be necessary to ensure compliance with the applicable regulations.

9 VAC 5-80-1480. Application review and analysis.

A. No permit shall be granted pursuant to this article unless compliance with the standards in 9 VAC 5-80-1470 is demonstrated to the satisfaction of the board by a review and
analysis of the application performed on a source-by-source basis.

B. Applications for stationary sources of hazardous air pollutants shall be subject to a control technology review to determine if such source will be designed, built and equipped to comply with all applicable emission standards prescribed under 9 VAC 5-80-1470.

9 VAC 5-80-1490. Compliance determination and verification by performance testing.

A. An owner of a constructed or reconstructed major source shall comply with all requirements in the final permit issued pursuant to this article, including but not limited to any emission limitation or work practice standard, and any notification, operation and maintenance, performance testing, monitoring, reporting, and recordkeeping requirements.

B. An owner of a constructed or reconstructed major source which has obtained a permit shall be deemed to be in compliance with the Virginia Air Pollution Control Law only to the extent that the constructed or reconstructed major source is in compliance with all requirements set forth in the permit issued pursuant to this article. Any violation of such requirements by the owner or any other person shall be deemed by the board to be a violation of the prohibition on enforcement action under the Virginia Air Pollution Control Law.

C. Compliance with emission standards shall be determined in accordance with the provisions of 9 VAC 5-60-20 and shall be verified by emission tests in accordance with the provisions of 9 VAC 5-60-30.

D. Testing required by this section shall be conducted by the owner within 60 days after achieving the maximum production rate at which the new or reconstructed source will be operated, but not later than 180 days after initial startup of the source; and 60 days thereafter the board shall be provided by the owner with two or, upon request, more copies of a written report of the results of the tests.

E. For sources subject to the provisions of 9 VAC 5-60-10 et seq., the requirements of subsections C and D of this section shall be met in all cases where specified in the emission standard listed under 9 VAC 5-60-70 or 9 VAC 5-60-100.

F. For sources other than those specified in subsection E of this section the requirements of subsections C and D of this section shall be met unless the board:

1. Specifies or approves, in specific cases, the use of a reference method with minor changes in methodology;
2. Approves the use of an equivalent method;
3. Approves the use of an alternative method, the results of which the board has determined to be adequate for indicating whether a specific source is in compliance;
4. Waives the requirement for testing because, based upon a technical evaluation of the past performance of similar source types, using similar control methods, the board reasonably expects the new or reconstructed source to perform in compliance with applicable standards; or
5. Waives the requirement for testing because the owner of the source has demonstrated by other means to the board's satisfaction that the source is in compliance with the applicable standard.

[ G. F. ] The provisions for the granting of waivers under subsection [ F. E. ] of this section are intended for use in determining the initial compliance status of a source, and the granting of a waiver does not obligate the board to do so for determining compliance once the source has been in operation for more than one year beyond the initial startup date.

9 VAC 5-80-1500. Permit invalidation, rescission, revocation and enforcement.

A. A permit granted pursuant to this article shall become invalid if a program of continuous construction or reconstruction is not commenced within the latest of the following time frames:

1. Eighteen months from the date the permit is granted;
2. Nine months from the date of the issuance of the last permit or other authorization (other than permits granted pursuant to this article) from any governmental entity; or
3. Nine months from the date of the last resolution of any litigation concerning any such permits or authorizations (including permits granted pursuant to this article).

B. A permit granted pursuant to this article shall become invalid if a program of construction or reconstruction is discontinued for a period of 18 months or more, or if a program of construction or reconstruction is not completed within a reasonable time. This provision does not apply to the period between construction of the approved phases of a phased construction project; each phase must commence construction within 18 months of the projected and approved commencement date.

C. The board may extend the periods prescribed in subsections A and B of this section, by no more than 12 months, upon a satisfactory demonstration that an extension is justified. Provided there is no substantive change to the application information, the review and analysis, and the decision of the board, such extensions may be granted without being subject to the requirements of 9 VAC 5-80-1460.

D. Any owner who constructs or operates a new or reconstructed source not in accordance with the terms and conditions of any permit to construct or operate, or any owner of a new or reconstructed source subject to this article who commences construction or operation without receiving a permit hereunder, shall be subject to appropriate enforcement action including, but not limited to, any specified in this section.

E. Permits issued under this article shall be subject to such terms and conditions set forth in the permit as the board may
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1. The board may revoke any permit if the permittee:
   1. Knowingly makes material misstatements in the permit application or any amendments to it;
   2. Fails to comply with the terms or conditions of the permit;
   3. Fails to comply with any emission standards applicable to an emissions unit included in the permit;
   4. Fails to comply with the applicable provisions of this article.

G. The board may suspend, under such conditions and for such period of time as the board may prescribe, any permit for any of the grounds for revocation contained in subsection F of this section or for any other violations of the regulations of the board.

H. The permittee shall comply with all terms and conditions of the permit. A permit noncompliance constitutes a violation of the Virginia Air Pollution Control Law and may be grounds for (i) enforcement action or (ii) termination or revocation.

I. Violation of the regulations of the board shall be grounds for revocation of permits issued under this article and are subject to the civil charges, penalties and all other relief contained in 9 VAC 5 Chapter 170, Part V (9 VAC 5-170-120 et seq.) and the Virginia Air Pollution Control Law.

J. The board shall notify the applicant in writing of its decision, with its reasons, to change, suspend or revoke a permit, or to render a permit invalid.

K. Nothing in the regulations of the board shall be construed to prevent the board and the owner from making a mutual determination that a permit is invalid or revoked prior to any final decision rendered under subsection J of this section.

L. Nothing in the regulations of the board shall be construed to prevent the board and the owner from making a mutual determination that a permit is rescinded because all of the statutory or regulatory requirements (i) upon which the permit is based or (ii) that necessitated issuance of the permit are no longer applicable.

9 VAC 5-80-1510. Existence of permit no defense.

The existence of a permit under this article shall not constitute defense to a violation of the Virginia Air Pollution Control Law or the regulations of the board and shall not relieve any owner of the responsibility to comply with any applicable regulations, laws, ordinances and orders of the governmental entities having jurisdiction.

9 VAC 5-80-1520. Compliance with local zoning requirements.

No provision of this part or any permit issued thereunder shall relieve any owner from the responsibility to comply in all respects with any existing zoning ordinances and regulations in the locality in which the source is located or proposes to be located.

9 VAC 5-80-1530. Transfer of permits.

A. No persons shall transfer a permit from one location to another or from one piece of equipment to another.

B. In the case of a transfer of ownership of a stationary source, the new owner shall abide by any current permit issued to the previous owner. The new owner shall notify the board of the change in ownership within 30 days of the transfer.

C. In the case of a name change of a stationary source, the owner shall abide by any current permit issued under the previous source name. The owner shall notify the board of the change in source name within 30 days of the name change.

9 VAC 5-80-1540. Changes to permits.

A. The general requirements for making changes to permits are as follows:

1. Changes to a permit issued under this article shall be made as specified under subsections B and C of this section and 9 VAC 5-80-1550 through 9 VAC 5-80-1580 of this article.

2. Changes to a permit issued under this article may be initiated by the permittee as specified in subsection B of this section or by the board as specified in subsection C of this section.

3. Changes to a permit issued under this article and incorporated into a permit issued under Article 1 (9 VAC 5-80-50 et seq.) of this part shall be made as specified in Article 1 (9 VAC 5-80-50 et seq.) of this part.

4. This section shall not be applicable to general permits.

B. The requirements for changes initiated by the permittee are as follows:

1. The permittee may initiate a change to a permit by submitting a written request to the board for an administrative permit amendment, a minor permit amendment or a significant permit amendment. The requirements for these permit revisions can be found in 9 VAC 5-80-1550 through 9 VAC 5-80-1570.

2. A request for a change by a permittee shall include a statement of the reason for the proposed change.

C. The board may initiate a change to a permit through the use of permit reopenings as specified in 9 VAC 5-80-1580.

9 VAC 5-80-1550. Administrative permit amendments.

A. Administrative permit amendments shall be required for and limited to the following:

1. Correction of typographical or any other error, defect or irregularity which does not substantially affect the permit.

2. Identification of a change in the name, address, or phone number of any person identified in the permit, or of a similar minor administrative change at the source.

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3. Change in ownership or operational control of a source where the board determines that no other change in the permit is necessary, provided that a written agreement containing a specific date for transfer of permit responsibility, coverage, and liability between the current and new permittee has been submitted to the board and the requirements of 9 VAC 5-80-1420 have been fulfilled.

4. The combining of permits under the new source review program as provided in 9 VAC 5-80-1420 B.

B. The administrative permit amendment procedures are as follows:

1. The board will normally take final action on a request for an administrative permit amendment no more than 60 days from receipt of the request.

2. The board shall incorporate the changes without providing notice to the public under 9 VAC 5-80-1460. However, any such permit revisions shall be designated in the permit amendment as having been made pursuant to this section.

3. The owner may implement the changes addressed in the request for an administrative amendment immediately upon submittal of the request.

9 VAC 5-80-1560. Minor permit amendments.

A. Minor permit amendment procedures shall be used only for those permit amendments that:

1. Do not violate any applicable requirement;

2. Do not involve significant changes to existing monitoring, reporting, or recordkeeping requirements that would make the permit requirements less stringent, such as a change to the method of monitoring to be used, a change to the method of demonstrating compliance or a relaxation of reporting or recordkeeping requirements;

3. Do not require or change a case-by-case determination of an emission limitation or other standard;

4. Do not seek to establish or change a permit term or condition (i) for which there is no corresponding underlying applicable regulatory requirement and (ii) that the source has assumed to avoid an applicable regulatory requirement to which the source would otherwise be subject. Such terms and conditions include:
   a. An emissions cap assumed to avoid classification as a modification [under subject to] the new source review program or § 112 of the federal Clean Air Act; and
   b. An alternative emissions limit approved pursuant to regulations promulgated under § 112(ii)(5) of the federal Clean Air Act;

5. Are not [a result of] modifications [under subject to] the new source review program; and

6. Are not required to be processed as a significant amendment under 9 VAC 5-80-1570; or as an administrative permit amendment under 9 VAC 5-80-1550.

B. Notwithstanding subsection A of this section, minor permit amendment procedures may be used for permit amendments involving the use of economic incentives, emissions trading, and other similar approaches, to the extent that such minor permit amendment procedures are explicitly provided for in a regulation of the board or a federally-approved program. Minor permit amendment procedures may also be used to require more frequent monitoring or reporting by the permittee.

C. Notwithstanding subsection A of this section, minor permit amendment procedures may be used for permit amendments involving the rescission of a provision of a permit if the board and the owner make a mutual determination that the provision is rescinded because all of the statutory or regulatory requirements (i) upon which the provision is based or (ii) that necessitated inclusion of the provision are no longer applicable.

D. A request for the use of minor permit amendment procedures shall include all of the following:

   1. A description of the change, the emissions resulting from the change, and any new applicable regulatory requirements that will apply if the change occurs.

   2. A request that such procedures be used.

E. The public participation requirements of 9 VAC 5-80-1460 shall not extend to minor permit amendments.

F. Normally within 90 days of receipt by the board of a complete request under minor permit amendment procedures, the board shall do one of the following:

   1. Issue the permit amendment as proposed.

   2. Deny the permit amendment request.

   3. Determine that the requested amendment does not meet the minor permit amendment criteria and should be reviewed under the significant amendment procedures.

G. The requirements for making changes are as follow:

   1. The owner may make the change proposed in the minor permit amendment request immediately after the request is filed.

   2. After the change under subdivision 1 of this subsection is made, and until the board takes any of the actions specified in subsection F of this section, the source shall comply with both the applicable regulatory requirements governing the change and the proposed permit terms and conditions.

   3. During the time period specified in subdivision 2 of this subsection, the owner need not comply with the existing permit terms and conditions that the owner seeks to modify. However, if the owner fails to comply with the proposed permit terms and conditions during this time period, the existing permit terms and conditions that the owner seeks to modify may be enforced against the owner.
9 VAC 5-80-1570. Significant amendment procedures.

A. The criteria for use of significant amendment procedures are as follows:

1. Significant amendment procedures shall be used for requesting permit amendments that do not qualify as minor permit amendments under 9 VAC 5-80-1560 or as administrative amendments under 9 VAC 5-80-1550.

2. Significant amendment procedures shall be used for those permit amendments that:

   a. Involve significant changes to existing monitoring, reporting, or recordkeeping requirements that would make the permit requirements less stringent, such as a change to the method of monitoring to be used, a change to the method of demonstrating compliance or a relaxation of reporting or recordkeeping requirements.

   b. Require or change a case-by-case determination of an emission limitation or other standard.

   c. Seek to establish or change a permit term or condition (i) for which there is no corresponding underlying applicable regulatory requirement and (ii) that the source has assumed to avoid an applicable regulatory requirement to which the source would otherwise be subject. Such terms and conditions include:

      (1) An emissions cap assumed to avoid classification as a modification [under subject to] the new source review program or § 112 of the federal Clean Air Act.

      (2) An alternative emissions limit approved pursuant to regulations promulgated under § 112(i)(9) of the federal Clean Air Act.

      [d. Result from modifications subject to the new source review program.]

B. A request for a significant permit amendment shall include a description of the change, the emissions resulting from the change, and any new applicable regulatory requirements that will apply if the change occurs. The applicant may, at the applicant’s discretion, include a suggested draft permit amendment.

C. The provisions of 9 VAC 5-80-1460 shall apply to requests made under this section.

D. The board will normally take final action on significant permit amendments within 90 days after receipt of a complete request.

E. The owner shall not make the change applied for in the significant amendment request until the amendment is approved by the board under subsection D of this section.

9 VAC 5-80-1580. Reopening for cause.

A. A permit may be reopened and amended under any of the following situations:

1. Additional regulatory requirements become applicable to the emission units covered by the permit after a permit is issued but prior to commencement of construction.

2. The board determines that the permit contains a material mistake or that inaccurate statements were made in establishing the emissions standards or other terms or conditions of the permit.

3. The board determines that the permit must be amended to assure compliance with the applicable regulatory requirements or that the conditions of the permit are not sufficient to meet all of the standards and requirements contained in this article.

4. A new emission standard prescribed under Article 1 (9 VAC 5-60-60 et seq.) of Part II of 9 VAC 5 Chapter 60, becomes applicable after a permit is issued but prior to initial startup.

B. Proceedings to reopen and reissue a permit shall follow the same procedures as apply to initial permit issuance and shall affect only those parts of the permit for which cause to reopen exists. Such reopening shall be made as expeditiously as practicable.

C. Reopenings shall not be initiated before a notice of such intent is provided to the source by the board at least 30 days in advance of the date that the permit is to be reopened, except that the board may provide a shorter time period in the case of an emergency.

9 VAC 5-80-1590. Requirements for constructed or reconstructed major sources subject to a subsequently promulgated MACT standard or MACT requirements.

A. If the administrator promulgates a MACT standard under § 112(d) or § 112(h) of the federal Clean Air Act that is applicable to a stationary source, group of stationary sources, or portion of a stationary source which would be deemed to be a constructed or reconstructed major source under this article before the date the owner has obtained a final and legally effective permit pursuant to this article, [the permit issued pursuant to this article shall contain the promulgated standard rather than any case-by-case MACT determination, and] the owner shall comply with the promulgated standard by the compliance date in the promulgated standard.

B. If the administrator promulgates a MACT standard under § 112(d) or § 112(h) of the federal Clean Air Act that is applicable to a stationary source, group of stationary sources, or portion of a stationary source which was deemed to be a constructed or reconstructed major source under this article and has been subject to a prior case-by-case MACT determination pursuant to this article, and the owner obtained a final and legally effective case-by-case MACT determination prior to the promulgation date of the MACT standard, the board shall (if the initial federal operating permit has not yet been issued) amend the permit issued pursuant to this article in accordance with the reopening procedures of 9 VAC 5-80-1580 to incorporate the emission standard, or shall (if the initial federal operating permit has been issued) revise the federal operating permit according to the reopening procedures in 9 VAC 5-80-240 to incorporate the MACT standard.
1. The MACT standard established pursuant to § 112(d) or § 112(h) of the federal Clean Air Act may specify a compliance date for those sources which have obtained a final and legally effective case-by-case MACT determination under this article. In that event, the board shall reopen the source's federal operating permit in accordance with the procedures in 9 VAC 5-80-240 to incorporate the applicable compliance date.

2. If no compliance date is specified in the MACT standard established pursuant to § 112(d) or § 112(h) of the federal Clean Air Act for those sources which have obtained a final and legally effective case-by-case MACT determination under this article, the board shall establish a compliance date that assures the owner will comply with a promulgated MACT standard as expeditiously as practicable, but no longer than eight years after the standard is promulgated, and shall reopen the source's federal operating permit in accordance with procedures in 9 VAC 5-80-240 to incorporate that compliance date.

C. Notwithstanding the requirements of subsections A and B of this section, if the administrator promulgates a MACT standard under § 112(d) or § 112(h) of the federal Clean Air Act that is applicable to a stationary source, group of stationary sources, or portion of a stationary source which was deemed to be a constructed or reconstructed major source under this article and which is the subject of a prior case-by-case MACT determination pursuant to this article, and the level of control required by the MACT standard issued under § 112(d) or § 112(h) is less stringent than the level of control required by any emission limitation or standard in the prior case-by-case MACT determination, the board is not required to incorporate any less stringent terms of the promulgated standard in the source's federal operating permit and may, in its discretion, consider any more stringent provisions of the prior case-by-case MACT determination to be applicable legal requirements when issuing or revising the federal operating permit.

VA.R. Doc. No. R97-556; Filed December 1, 1999, 8:47 a.m.

### TITLE 12. HEALTH

#### STATE BOARD OF HEALTH

**Title of Regulation:** 12 VAC 5-408-10 et seq. Regulation for the Certification of Managed Care Health Insurance Plan Licensees.

**Statutory Authority:** § 32.1-137.3 of the Code of Virginia.

**Effective Date:** January 20, 2000.

**Summary:**

Senate Bill 712 (1998) established a quality assurance certification program for managed care health insurance plan (MCHIP) licensees. All MCHIP licensees will have to obtain certification and remain certified by the State Health Commissioner to confirm the quality of health care services they deliver. The regulation defines the expectations relating to quality upon which certification will be based.

The regulation is amended to more easily accommodate the unique characteristics of PPOs and accept national accreditation of the MCHIP in lieu of a comprehensive on-site examination by the department.

**Summary of Public Comments and Agency's Response:** A summary of comments made by the public and the agency’s response may be obtained from the promulgating agency or viewed at the office of the Registrar of Regulations.

**Agency Contact:** Copies of the regulation may be obtained from Carrie Eddy, Department of Health, 3600 West Broad Street, Suite 216, Richmond, VA 23230, telephone (804) 367-2102.

#### CHAPTER 408.

**CERTIFICATE OF QUALITY ASSURANCE OF MANAGED CARE HEALTH INSURANCE PLAN LICENSEES.**

**PART I. DEFINITIONS AND GENERAL INFORMATION.**

**12 VAC 5-408-10. Definitions.**

The following words and terms when used in this chapter shall have the following meanings unless the context clearly indicates otherwise:

“Adverse decision” means a utilization review decision by the utilization review entity that a health service rendered or proposed to be rendered was not or is not medically necessary, when such determination may result in noncoverage of the health service or health services decision made by a health insurer or its designated utilization review organization that a request for an admission, continued stay or other health care service has been reviewed and, based upon the information provided (i) does not meet the insurer’s requirements for medical necessity, (ii) is not a covered service, or (iii) exceeds the benefit limits of a covered service. As a result of the adverse decision, the request service is denied coverage, or is approved, but at a lesser level than was requested.

“Appeal” means a formal request by an enrollee or a provider on behalf of an enrollee for reconsideration of a decision, such as a utilization review recommendation, a benefit payment, an administrative action, or a quality-of-care or service issue.

“Basic health care services” means those health care services [ , as applicable to the type of managed care health insurance plan, ] described in § 38.2-5800 of the Code of Virginia which are required to be provided, arranged, [ paid for ], or reimbursed by the managed care health insurance plan licensee for its covered persons.

“Board” means the Board of Health.

“Bureau of Insurance” means the State Corporation Commission acting pursuant to Title 38.2 of the Code of Virginia.
“Center” means the Center for Quality Health Care Services and Consumer Protection of the Virginia Department of Health.

“Complaint” means a written [ or oral expression of dissatisfaction received from an enrollee or provider on behalf of an enrollee communication from a covered person primarily expressing a grievance. A complaint may pertain to the availability, delivery, or quality of health care services including adverse decisions, claims payments, the handling or reimbursement for such services, or any other matter pertaining to the covered person’s contractual relationship with the MCHIP. A complaint pertaining to a covered person’s request that the health plan reconsider a denial of coverage for, or reimbursement of, a service is considered an appeal.

“Department” means the Virginia Department of Health.

“Disease management program” means an integrated population based system approach to deliver health care services. Disease management programs use information based processes to improve the entire continuum of care, from prevention and patient education, to diagnosis and treatment, to follow-up and ongoing maintenance, with the intention of producing the best clinical outcomes. A disease management program performs the following functions: (i) classifying patients by disease state; (ii) identifying patients with specific chronic diseases in a covered population, (iii) encouraging intervention at the most beneficial medical junctures, (iv) offering long-range strategies to prevent and control each disease, (v) providing feedback on outcome to physicians, and (vi) emphasizing preventive care and patient education.

“Emergency services” means those health care services that are rendered by affiliated or nonaffiliated providers after the sudden onset of a medical condition that manifests itself by symptoms of sufficient severity, including severe pain, that the absence of immediate medical attention could reasonably be expected by a prudent layperson who possesses an average knowledge of health and medicine to result in (i) serious jeopardy to the mental or physical health of the individual, (ii) danger of serious impairment of the individual’s bodily functions, (iii) serious dysfunction of any of the individual’s bodily organs, or (iv) in the case of a pregnant woman, serious jeopardy to the health of the fetus. Emergency services provided within an MCHIP’s service area shall include covered health services from nonaffiliated providers only when delay in receiving care from a provider affiliated with the MCHIP could reasonably be expected to cause the enrollee’s condition to worsen if left unattended.

“Enrollee” means [ an individual residing in the Commonwealth, whether a policyholder, subscriber, covered person, or member of a managed care health insurance plan, who is entitled to health care services or benefits provided, arranged for, paid for or reimbursed pursuant to a managed care health insurance plan under Title 38.2 of the Code of Virginia a subscriber, policyholder, member, covered person, or dependent, as the case may be, under a policy or contract issued or issued for delivery in Virginia by a managed care health insurance plan licensee, insurer, health services plan, or preferred provider organization ].

“Evidence of coverage” means any certificate, individual or group agreement or contract, or identification card or related document issued in conjunction with the certificate, agreement or contract, issued to an enrollee setting out the coverage and other rights to which an enrollee is entitled.

“Final adverse decision” means a utilization review determination made by a physician advisor or peer of the treating health care provider in a reconsideration of an adverse decision, and upon which a provider or patient may base an appeal.

“[ Fully accredited ]" Full accreditation] “ means the highest

“Grievance” means a process available to enrollees to request a second reconsideration of an adverse decision in order to resolve an disagreement about the MCHIP’s responsibilities and obligations.

“Health care data reporting system” means the state contracted integrated system for the collection and analysis of data used by consumers, employers, providers, and purchasers of health care to continuously assess and improve the quality of health care in the Commonwealth.

“Managed care health insurance plan” or “MCHIP” means an arrangement for the delivery of health care in which a health carrier as defined in § 38.2-5800 of the Code of Virginia undertakes to provide, arrange for, pay for, or reimburse any of the costs of health care services for a covered person on a prepaid or insured basis which (i) contains one or more incentive arrangements, including any credentialing requirements intended to influence the cost or level of health care services between the health carrier and one or more providers with respect to the delivery of health care services and (ii) requires or creates benefit payment differential incentives for covered persons to use providers that are directly or indirectly managed, owned, under contract with or employed by the health carrier. Any health maintenance organization as defined in § 38.2-4300 of the Code of Virginia or health carrier that offers preferred provider contracts or policies as defined in § 38.2-3407 of the Code of Virginia or preferred provider subscription contracts as defined in § 38.2-4209 of the Code of Virginia shall be deemed to be offering one or more managed care health insurance plans. For the purposes of this definition, the prohibition of balance billing by a provider shall not be deemed a benefit payment differential incentive for covered persons to use providers who are directly or indirectly managed, owned, under contract with or employed by the health carrier. A single managed care health insurance plan may encompass multiple products and multiple types of benefit payment differentials; however, a single managed care health insurance plan shall encompass only one provider network or set of provider networks.

“Managed care health insurance plan licensee” or “licensee” means a health carrier subject to licensure by the Bureau of Insurance [ and to quality assurance certification by the department ] under Title 38.2 of the Code of Virginia who is responsible for a managed care health insurance plan in
accordance with Chapter 58 (§ 38.2-5800 et seq.) of Title 38.2 of the Code of Virginia.

"Medical necessity" or "medically necessary" means appropriate and necessary health care services which are rendered for any condition which, according to generally accepted principles of good medical practice, requires the diagnosis or direct care and treatment of an illness, injury, or pregnancy-related condition, and are not provided only as a convenience.

"Person" means any individual, aggregate of individuals, association, business, company, corporation, joint-stock company, Lloyds type of organization, other organization, partnership, receiver, reciprocal or inter-insurance exchange, trustee or society.

"Plan of correction" means a MCHIP'S written plan [ approved by the department ] that outlines the action the MCHIP will take to address compliance issues identified during an administrative review or on-site examination conducted by the department.

"Preferred provider organization" [ or "PPO" ] means a managed care health insurance plan that does not require covered medical services to be coordinated or managed through a primary care physician. A managed care health insurance plan licensee that is responsible for a managed care health insurance plan, commonly recognized as a "preferred provider organization," may delegate by contract to provide all or some of the preferred provider [ system components ] components, which include the provider network, utilization review, credentialing, and claims administration, while retaining direct contact with the enrollee regarding the coordination of benefits.

"Service area" means a geographic area as defined in § 38.2-5800 of the Code of Virginia.

"Timely" means the provision of services so as not to impair or jeopardize the integrity of the enrollees' diagnosis or outcomes of illness.

"Treating health care provider" or "provider" means a licensed health care provider who renders or proposes to render health care services to an enrollee.

"Utilization review" means a system for reviewing the necessity, appropriateness, and efficiency of hospital, medical or other health care services rendered or proposed to be rendered to a patient or group of patients for the purpose of determining whether such services should be covered or provided by an insurer, health services plan, managed care health insurance plan licensee, or other entity or person. For purposes of this chapter, "utilization review" shall include, but not be limited to, preadmission, concurrent and retrospective medical necessity determination, and review related to the appropriateness of the site at which services were or are to be delivered. "Utilization review" shall not include (i) review of issues concerning insurance contract coverage or contractual restrictions on facilities to be used for the provision of services, (ii) any review of patient information by an employee of or consultant to any licensed hospital for patients of such hospital, or (iii) any determination by an insurer as to the reasonableness and necessity of services for the treatment and care of an injury suffered by an insured for which reimbursement is claimed under a contract of insurance covering any classes of insurance defined in §§ 38.2-117 through 38.2-119, 38.2-124 through 38.2-126, 38.2-130 through 38.2-132 and 38.2-134 of the Code of Virginia.

"Utilization review entity" or "entity" means a person or entity performing utilization review.

"Utilization review plan" or "plan" means a written procedure for performing a utilization review.

12 VAC 5-408-20. Responsibility of the department.

A. The Code of Virginia allows the Board of Health to adopt regulations for the certification of quality assurance for managed care health insurance plans licensees. The Department of Health is charged with the responsibility for examining the quality of health care services provided by managed care health insurance plan licensees according to regulations adopted by the board and any additional requirements that may be specified by the Code of Virginia. The Center for Quality Health Care Services and Consumer Protection acts as agent for the department for certifying managed care health insurance plans, which includes investigating complaints made against a MCHIP licensee.

B. In developing or revising these regulations, the department adheres to the requirements of the Administrative Process Act (§ 9.6-14:1 et seq. of the Code of Virginia) and the public participation process. The department solicits input from MCHIPs, associations of MCHIPs, providers, experts in related fields, advocacy organizations, consumers and the general public in the development or revision of this chapter through informal and formal comment periods and public hearings.

C. The department shall coordinate its activities with the Bureau of Insurance to ensure an appropriate level of regulatory oversight and to avoid undue duplication of effort or regulation.

D. The department will be guided by its own interpretive guidelines when determining compliance with this regulation.


A. A certificate for quality assurance shall be issued [ to ] managed care health insurance plan licensees. The department shall issue or renew a certificate of quality assurance if the MCHIP licensee is in compliance with the applicable law and this chapter.

B. No certificate of quality assurance may be transferred or assigned without approval of the department.

C. Every certified MCHIP licensee shall file for its certificate of quality assurance with the department biennially, subject to payment of a fee and receipt of all material required by law and this chapter.

D. Upon request, the center will provide an application form for a certificate of quality assurance. The center shall consider the application complete when all the information requested and the application fee are submitted [ with the required form ]. If the center finds the application incomplete,
the applicant will be notified in writing of receipt of the incomplete application.

E. The department shall send an application for renewal of a certificate to the licensee at least 60 days prior to the expiration date of the current certificate.

F. The department shall examine or review each applicant for an initial certificate of quality assurance and periodically for renewal thereof.

G. Upon the issuance or renewal of a certificate, the department shall provide a certificate of quality assurance to the MCHIP licensee and a copy to the Bureau of Insurance.

H. Upon determining to deny or refuse to renew a certificate, the department shall notify the applicant in writing stating the reasons for the denial of the certificate. A copy of the notification of denial shall be provided to the Bureau of Insurance.

I. Appeals from a notification of denial shall be brought by a certificate applicant pursuant to the process set forth in 12 VAC 5-408-140.

12 VAC 5-408-40. Fees.

A. The center shall collect a fee for each initial application and each renewal application. Fees shall accompany the application and are not refundable.

B. Fees shall be sufficient to cover reasonable costs for the administration of the quality assurance program.

C. Fees shall be based upon a percentage, not to exceed 1/10 of 1.0%, of the proportion of direct gross premium income on business done in this Commonwealth attributable to the operation of managed care health insurance plans in the preceding biennium not to exceed $10,000 per licensee.

After July 2000, new applicants proposing to offer MCHIP plans in the Commonwealth shall be assessed a flat fee of $5,000 for the initial application.

12 VAC 5-408-50. Preferred provider [organization exemption organizations].

A. Managed care health insurance plan licensees [when operating that operate] a preferred provider organization as defined in this chapter [as ] must comply with [all of the provisions of this chapter with the exception of ] the following [sections]:

1. [12 VAC 5-408-220 Parts I (12 VAC 5-408-10 et seq.) and II (12 VAC 5-408-160 et seq.) of this chapter];

2. [12 VAC 5-408-250 and 12 VAC 5-408-290; and Part III (12 VAC 5-408-220 et seq.) of this chapter];

3. [Part V (12 VAC 5-408-300 et seq.) 12 VAC 5-408-260 through 12 VAC 5-408-280] of this chapter [as ; and ]

4. [Parts VI (12 VAC 5-408-320 et seq.) and VII (12 VAC 5-408-370 et seq.) of this chapter.]

B. In lieu of compliance with [the regulations noted in subsection A subdivisions A 2 through 4] of this section, the licensee shall demonstrate that the preferred provider organization [is in compliance with operates in conformity with the standards of ] one of the following:

1. The Health Networks Standards, Version 3.0 [or the Health Plan Standards (Version 3.0 whichever is applicable to the type of PPO ), of the American Accreditation HealthCare Commission/URAC (for Health Networks)];

2. The Joint Commission on Accreditation of Healthcare Organizations’ Accreditation Standards for Preferred Provider Organizations (1997); or

3. [Other nationally recognized accreditation standards for preferred provider organizations accepted by the department accreditation standards specifically governing health quality improvement processes for PPOs issued by other nationally recognized organizations accepted by the department].

C. [If the licensee can demonstrate that, by complying with the above accreditation standards, it meets or exceeds other MCHIP quality assurance regulations than are noted in subsection A of this section, it may offer evidence of that compliance for consideration by the department. Accreditation is not required to meet the requirements of subsection B unless the MCHIP licensee operates a PPO and desires its PPO to be exempt from the comprehensive onsite examination described in 12 VAC 5-408-90. The licensee must follow the provisions of 12 VAC 5-408-100 to be eligible for exemption from examination.]

12 VAC 5-408-60. General examination process.

A. MCHIP licensees shall be examined or reviewed by the department according to Article 1.1 (§ 32.1-137.1 et seq.) of Chapter 5 of Title 32.1 of the Code of Virginia to:

1. Verify that a MCHIP qualifies for an initial or renewal certificate of quality assurance;

2. Investigate a complaint filed against a MCHIP [licensee];

3. Determine compliance with this chapter and applicable law; and

4. Determine if the MCHIP [licensee ] has successfully implemented corrective action following an examination, or as a result of disciplinary action or sanction.

B. Examinations shall be conducted onsite at a [MCHIP’s headquarters MCHIP licensee’s office] and at the site of any contractors. At its discretion, the department may choose to conduct an administrative review to evaluate the MCHIP for compliance with applicable law and this chapter. The MCHIP’s examination may also include contractors with whom the licensee has agreements, contracts, or other arrangements to provide health care services for the MCHIP.

C. Any examiner authorized by the department shall, so far as necessary for the purposes of the examination or review, have access during regular business hours to the premises and to any books, records, files, or property of the licensee as
far as they directly relate to the quality of care provided by the MCHIP [ licensee ].

All material copied, recorded, or received by the department from the MCHIP [ licensee ] shall be privileged and confidential and shall not be subject to subpoena.

D. The MCHIP licensee shall be responsible for ensuring that all examination materials are submitted to the department at the time specified for submission and that they are complete. Failure to submit all of the examination materials as required may delay processing or result in the denial of the issuance or renewal of the quality assurance certificate.

E. A summary report of a MCHIP licensee’s examination shall become part of the department’s public file on the MCHIP. A copy of the summary report shall be provided to the Bureau of Insurance.

F. The department shall consider a MCHIP licensee’s initial examination for a certificate of quality assurance as a baseline evaluation of the MCHIP’s quality improvement program in order to determine if it has the structure, organization, and policies and procedures in place to provide and support quality improvement activities. If the MCHIP [ licensee ] has been operating outside the geographic boundaries of Virginia, it shall demonstrate that it has a record of successfully implementing its quality improvement program to the benefit of the enrollees that it serves.

G. Information provided during any examination conducted regarding compliance with this chapter shall be accurate and truthful. The MCHIP [ licensee ] shall not provide the department with falsified information during any aspect of the examination process. The department shall construe any effort to provide falsified information as violation of the statute, and the MCHIP [ licensee ] shall be subject to disciplinary action. Falsification is defined for the purpose of this chapter as fabrication, in whole or in part, of any information provided by the MCHIP or the MCHIP licensee [ to include, but not be limited to, any redrafting, reformatting, or content deletion of documents ].

H. The refusal of any licensee, by its officers, directors, employees or agents, to submit to examination or review or to comply with any reasonable written request of the examiners shall be grounds for suspension, revocation, denial, or nonrenewal of a certificate of quality assurance held by the licensee.

12 VAC 5-408-70. Administrative review.

A. [ In most instances, ] The initial examination shall be an administrative review of the application for certificate of quality assurance and supporting documentation that includes:

1. The items listed in [ subsections F, G, H, and I of ] 12 VAC 5-408-160 [ E ];

2. A copy of the most recent accreditation report [ , as applicable ] issued to the MCHIP or to the MCHIP’s licensee from a nationally recognized accreditation organization that evaluates the quality of health care services provided by health care plans. The written corrective action response, if any, shall also be submitted;

3. A copy of the most recent report of an examination of [ the quality of health care provided by ] the MCHIP under similar laws and regulations [ governing managed care plans ] of another state [ or states ], and a copy of the written corrective action response, if any; and

4. The most recent report of any examination of the quality of health care provided by the MCHIP issued by a federal regulatory agency [ with similar laws and regulations ]. The written corrective action plan, if any, shall also be submitted.

The department shall also consider any information that the Bureau of Insurance, in its review of the MCHIP licensee’s application for [ insurance ] licensure, determines is pertinent to the department’s examination for issuance of a certificate of quality assurance. The department shall coordinate with the Bureau of Insurance to obtain information [ necessary to complete that may assist ] its review.

B. The administrative review examination shall be conducted within 45 business days of the receipt of [ all ] the documentation required by the department. The MCHIP licensee shall be notified in writing if additional information is needed to clarify the information submitted and the specific time period in which to submit the materials.

C. The MCHIP licensee shall be notified of the results of the administrative review examination within 60 business days from the receipt by the department of all of the required documents [ and related information ].

[ The department, at its discretion, may extend, for up to an additional 30 days, the period of time within which to approve or disapprove the information submitted. Licensees shall be notified in writing of any such extension. ]

D. The department, at its discretion, may conduct an onsite examination of the [ MCHIP’s MCHIP licensee’s ] quality improvement program or aspects integral to the quality improvement program if, during its conduct of the administrative review examination, the department determines that an onsite examination is warranted in order to determine the [ MCHIP’s MCHIP licensee’s ] compliance with applicable laws or this chapter.

E. Licensees with MCHIPs that successfully complete the examination shall be issued a certificate of quality assurance. Licensees with MCHIPs that do not successfully complete the examination shall be denied a certificate of quality assurance.

12 VAC 5-408-80. Renewal application.

A. Every MCHIP licensee shall request renewal of its certificate of quality assurance biennially with the department. The purpose of the renewal examination shall be to determine if the MCHIP has maintained compliance with applicable laws and regulations since the last certificate of quality assurance was issued or renewed, and whether the MCHIP is making substantive progress in meeting its quality improvement [ expectations ] goals as set forth in its quality improvement plan.

Failure of the MCHIP licensee to adequately document that [ its quality improvement program is dynamic rather than static and that it responds to the health care needs of its
enrollees the MCHIP’s quality improvement program has measurably improved the quality of care received by its enrollees over time, as assessed through generally-accepted statistical indicators of clinical quality will be a factor in the renewal of the certificate of quality assurance.

B. The renewal examination shall include an administrative review of the renewal application and supporting documentation that includes:

1. The items listed in subsections F, G, H, and I of 12 VAC 5-408-160; 
2. The annual complaint reports; 
3. The MCHIP’s formal written evaluations of its quality improvement program expectations for the time period since the MCHIP’s last application for a certificate of quality assurance; 
4. A copy of the most recent accreditation report issued to the MCHIP or to the licensee from a nationally recognized accreditation organization that evaluates the quality of health care services provided by health care plans if the report was issued after the issuance of the current certificate from the department. The written corrective action plan in response to the report, if applicable, shall also be submitted; 
5. A copy of the most recent report of an examination of the MCHIP under similar laws or regulations governing managed care plans of another state or state regulatory agency in which the MCHIP is domiciled that was issued since the certificate of quality assurance was last issued or renewed; and 
6. A copy of the report of any examination of the MCHIP by a federal regulatory body issued since the certificate of quality assurance was last issued or renewed.

C. In addition, the department shall consider the following in its renewal examination:

1. The report of any comprehensive onsite examination of the MCHIP if one was conducted during the renewal period; 
2. Any disciplinary actions or sanctions issued by the department pursuant to § 32.1-137.5 of the Code of Virginia or this chapter, or by the Bureau of Insurance in keeping with § 32.1-137.2 E of the Code of Virginia; and 
3. A summary report of the analysis of any data provided to the Health Care Data Reporting System.

12 VAC 5-408-90. Comprehensive onsite examination.

A. The comprehensive onsite examination represents a periodic quality improvement evaluation process designed to validate that not only does the MCHIP have appropriate systems in place to ensure quality of health care, but that the systems are successfully implemented and result in the improvement of enrollees’ health outcomes and the delivery of their care.

B. A comprehensive onsite examination shall be conducted at least once every two years with the exception of MCHIPs that meet the quality improvement acknowledgment criteria specified in 12 VAC 5-408-100. The comprehensive onsite examination shall be conducted every four years for plans that meet the quality improvement acknowledgment criteria triennially except for MCHIPs that meet the criteria specified in 12 VAC 5-408-100 pertaining to nationally recognized accreditation.

[ Recognition of compliance with the quality improvement acknowledgment criteria shall not prevent onsite examinations for complaints, monitoring, certificate examinations, enforcement activities, or other onsite examinations that the department determines are necessary to verify compliance with applicable law and this chapter. ]

C. The comprehensive onsite examination may shall take place:

1. In conjunction with a Bureau of Insurance market conduct examination of the company;
2. At the request of the MCHIP licensee and in conjunction with a full accreditation survey of the MCHIP conducted by a nationally recognized accreditation organization that examines health care plans for quality of health care; 
3. At the request of the MCHIP licensee following the completion of the initial administrative review and receipt of the examination results in order to document the corrective action taken in response to the examination results; 
4. When the department, at its discretion, participates in a coordinated survey in conjunction with the Bureau of Insurance or a nationally recognized accreditation organization; or 
5. At the department’s discretion, in response to complaints against the MCHIP or other MCHIP activities in order to determine continued compliance with applicable laws and regulations.

1. At a time established by the department with 60 days advance notification to the MCHIP; 
2. In conjunction with a Bureau of Insurance market conduct examination of the licensee; or 
3. At the request of the MCHIP licensee in agreement with the department following the completion of an initial administrative review examination for certification in order to document any corrective action taken in response to the initial examination.

At the department’s discretion and in response to complaints against the MCHIP licensee or the MCHIP, the department may expand a complaint investigation to a comprehensive examination to determine compliance with the MCHIP laws and regulations if it appears that enrollees’ health and safety may be jeopardized.

D. The MCHIP licensee shall be notified in writing at least 60 days in advance of the comprehensive onsite examination and shall be provided with information regarding the parameters of the examination.
The final determination of when a comprehensive onsite examination shall be conducted rests with the department. However, the department may, in consideration of mitigating circumstances, accept a triennial examination of a MCHIP licensee approved by the department in lieu of the triennial examination by virtue of their accreditation but are not exempt from compliance with this chapter.

1. The MCHIP is fully accredited by a nationally recognized accreditation organization that evaluates the quality of health care provided by managed care plans and the accreditation organization is accepted by the department. [ One year conditional or provisional accreditation shall not be considered acceptable for meeting the requirements of this chapter; MCHIP licensees or MCHIPs that are denied accreditation shall be subject to examination by the department unless full accreditation is achieved. MCHIP licensees whose plans are fully accredited are considered exempt only from the triennial examination by virtue of their accreditation but are not exempt from compliance with this chapter. ]

2. The MCHIP generates few complaints and utilization review appeals relative to its enrollee population and the complaints and appeals it receives are resolved in compliance with this chapter.

3. There has been no change in ownership, merger, or consolidation of the plan since its last examination.

4. There has been a stable executive administration of the plan with no frequent changes in administration in excess of normal turnover rates.

5. Reports from other state regulatory agencies or federal regulatory agencies that evaluate the plan’s quality of care demonstrate that the MCHIP is in substantial compliance with those agencies’ regulations and that substantial compliance is consistent.

6. The MCHIP licensee is in substantial compliance with the applicable licensure requirements of the Bureau of Insurance.

7. The MCHIP is able to demonstrate through clinical studies—the evaluation of its quality improvement program, and from input from providers and enrollees—that its performance expectations are being met and patient outcomes are being achieved. There is no evidence of recurring areas of noncompliance by the MCHIP with its own quality improvement program expectations as noted by the MCHIP’s internal evaluation process or by external reviewers.

8. The MCHIP successfully completes its requirements for initial and renewal examination and complaint examinations.

9. The MCHIP demonstrates how it successfully integrates its program activities with public and community health goals.

10. The MCHIP provides a summary of its quality improvement program in its marketing materials and makes the findings of its quality improvement program available to its providers and enrollees.

2. The MCHIP licensee shall release to the department any and all reports, letters and memoranda issued by the accrediting organization to the licensee regarding the MCHIP concerning the organization’s evaluation of the MCHIP’s compliance with accreditation standards. Any written materials generated by the licensee or its plan regarding corrective or remedial action to be taken by the...
licensee or the plan to be in compliance with the accreditation standards shall also be released to the department. The licensee shall forward copies of its written accreditation reports to the department within 10 days of receipt by the licensee and of its response regarding corrective, remedial or improvement actions at the same time the accreditation organization is notified.

3. The MCHIP licensee or its plan notifies the department of the date of its accreditation examination at least 90 days prior to the examination.

4. The MCHIP licensee permits the department to observe all or part, at the department’s discretion, of the accreditation organization’s examination and communicates such agreement to the accrediting organization.

The department reserves the right to conduct a comprehensive examination of a fully accredited MCHIP when it appears that the health and safety of the enrollees may be jeopardized.

B. [ It shall be the responsibility of the MCHIP licensee that wishes to qualify for the option to submit the necessary documentation to support its compliance. Accreditation by a nationally recognized accreditation organization for health quality improvement will not be accepted in lieu of the comprehensive onsite examination unless:

1. The accreditation standards are equivalent to or more stringent than the department’s certification of quality assurance regulations; and
2. The accreditation standards are appropriate for the type of plan seeking exemption from the department’s comprehensive onsite examination.]

12 VAC 5-408-110. Corrective action procedures.

A. [ At the conclusion of an examination, or ] Within 30 business days [ thereafter of the conclusion of the examination ], the department shall provide the MCHIP licensee with a written summary of violations of the regulations or laws and any factual findings used as a basis to determine that a violation has occurred.

B. The department [ may shall ] require the MCHIP licensee to submit a written plan of correction specifying how each violation will be corrected along with the time frames for completion of each corrective action. A single plan of correction [ may shall ] address all events associated with a given violation. The plan of correction, when required, shall be submitted by the MCHIP licensee within 20 business days of receipt of the notice of violation, or sooner, if the department determines that the violations jeopardize the safety of enrollees.

C. The plan of correction shall be approved when the MCHIP demonstrates to the satisfaction of the department that compliance will be achieved. If the plan of correction is not approved, the department may request that an amended plan of correction be submitted within 10 business days, or sooner, if the department determines that the violations jeopardize the safety of enrollees.

D. The summary of violations and the plan of correction shall not be released as public information until the department has [ received approved ] the plan of correction or, in the event no plan of correction is required, after 20 business days of receipt of the summary of violations by the MCHIP, whichever is sooner.

E. Unless otherwise documented, the department will presume receipt of the summary of violations by the MCHIP licensee by the seventh business day [ if sent by regular mail when mailed return receipt requested ].

F. Failure of the MCHIP to successfully implement the written plan of correction within a specified time period may result in an administrative sanction.

12 VAC 5-408-120. Changes to geographic service areas.

A. Any changes to a MCHIP’s geographic service areas shall be submitted in writing to the department [ at least ] 45 days prior to the proposed effective date of the changes.

B. The request for a change in a geographic service area shall include [ at least ]:

1. A description of the current geographic service area including a map of the current service area, a list of current primary care and specialty physicians and other providers, and the number of enrollees by service area.
2. An explanation as to whether the MCHIP is requesting an expansion or a reduction in its service area.
3. Notification that the MCHIP licensee has inquired of the Bureau of Insurance as to whether or not the service area request constitutes a material change and the bureau’s determination, if available.
4. If a service area expansion is proposed, then the following is required:
   a. A description of the proposed area that includes a map of the proposed geographic area expansion, projections of new enrollment, a listing of new primary care and specialty providers and other providers and their locations, and physician capacity to accept the anticipated enrollment;
   b. Information necessary to determine if the MCHIP [ licensee ] will be capable of conforming to the access, availability, and travel requirements of 12 VAC 5-408-260 and 12 VAC 5-408-270; and
   c. The methodology used to determine that the current health care system in the proposed service area can support the expansion.
5. If a MCHIP is reducing or eliminating a service area, the following information is required:
   a. A description of the service area being reduced or eliminated;
   b. The reason for the reduction or elimination of the service area and the effective date on which health care services will no longer be available through the MCHIP; and
c. Any information required by the department to determine that MCHIP enrollees are ensured continuity of care during the transition.

C. If the department fails to act on a request within 30 business days of receipt of all requested information, the proposed changes shall be deemed approved. The department, at its discretion, may extend the period of time within which to approve or disapprove the proposed changes for up to an additional 30 days. Licensees shall be notified in writing of any such extensions.

12 VAC 5-408-130. Complaint system, complaint examination and investigation.

A. Each MCHIP licensee shall establish and maintain for each of its MCHIPs a complaint system approved by the department and the Bureau of Insurance to provide reasonable procedures for the resolution of complaints.

B. The department, in cooperation with the Bureau of Insurance, shall examine the complaint system for compliance of the system with applicable statutes and regulations and shall require corrections or modifications as necessary. The effectiveness of the complaint system in allowing enrollees, or their duly authorized representatives, to have issues regarding quality assurance appropriately resolved shall be assessed by the department.

C. The department has the responsibility to investigate complaints regarding alleged quality of care violations filed by or on behalf of enrollees.

D. Every person from whom information is sought in an investigation of a complaint against a MCHIP licensee shall cooperate in producing, or allowing reasonable access during regular business hours to, the books, records, files, accounts, papers, documents, and any or all computer or other recordings of the licensee being examined or those of any person delivering health care services under contract, affiliation, delegation or other arrangement directly relevant to the investigation. Information shall be limited to that which is relevant to the investigation in question.

E. Deficiencies found during a complaint investigation shall be corrected as required in 12 VAC 5-408-110.

F. When the investigation is complete, the MCHIP and the complainant will be notified of the findings of the investigation.

12 VAC 5-408-140. Administrative sanctions.

A. Nothing in this part shall prohibit the department from exercising its responsibility and authority to enforce applicable law and this chapter including proceeding directly to imposition of administrative sanctions.

B. The department, in consultation with the Bureau of Insurance, may impose such administrative sanctions or take such actions as are appropriate for violation of any of the regulations or laws. Such sanctions include:

1. Imposing civil monetary penalties, which shall not exceed $1,000 per incident of noncompliance, to a maximum of $10,000 for a series of related incidents of noncompliance;

2. Placing a certificate holder on probation;

3. Temporarily suspending a certificate of quality assurance;

4. Temporarily restricting or prohibiting new enrollments into a MCHIP with the concurrence of the Bureau of Insurance;

5. Revoking or not renewing a certificate of quality assurance and certifying to the Bureau of Insurance that a MCHIP licensee or its managed care health insurance plan is unable to fulfill its obligations to furnish quality health care services; or

6. Other remedies as provided by state or federal law.

C. The MCHIP licensee shall receive a written notice describing the reasons for the imposition of sanctions and a report specifying the findings of noncompliance. Upon receipt of the notice to impose a sanction, the MCHIP shall have the right and the opportunity to appeal the sanction according to § 32.1-137.5 of the Code of Virginia. A copy of the department’s notice shall be provided to the Bureau of Insurance.

12 VAC 5-408-150. Surrender of certificate.

A. Upon revocation or suspension of a certificate or loss of license, the MCHIP licensee must surrender its certificate to a representative of the center.

B. In the event a MCHIP licensee voluntarily ceases operation, it shall provide at least 90 business days advance written notice to all enrollees, employers, providers, the department, and the Bureau of Insurance. The notice shall identify the storage location of business and medical records, where applicable, and procedures for obtaining copies of such records.

PART II.
ADMINISTRATIVE SERVICES.

12 VAC 5-408-160. Management and administration.

A. No person shall establish or operate a managed care health insurance plan in Virginia without first obtaining a license from the Bureau of Insurance and a certificate of quality assurance from the department.

B. The licensee must comply with:

1. This chapter (12 VAC 5-408 et seq.);

2. Other applicable federal, state or local laws and regulations; and

3. The licensee’s own policies and procedures.

C. The licensee shall submit or make available reports and information as described in § 32.1-137.4 of the Code of Virginia necessary to establish compliance with these standards and applicable laws.

D. The licensee shall permit representatives from the center to conduct examinations or reviews to:

1. Verify application information;

2. Determine compliance with these standards;
3. Review necessary records, including contracts for delegated services and capitated rate information; and

E. The licensee shall notify the center and providers in writing 30 days prior to implementing any changes affecting the plan, including:
   1. Mailing address;
   2. Ownership;
   3. Health care services provided, including any delegated services;
   4. Medical director;
   5. MCHIP or licensee name;
   6. Significant provider network changes; and
   7. Any systematic changes in the quality assurance plan, complaint process, or utilization review process.

If more advanced notice of a specific change is required by law for notices to providers or enrollees, notice given to the department under this section shall be no less than notice given to enrollees under the law.

F. All applications, including those for renewal, shall require:
   1. A description of the geographic area to be served with a map clearly delineating the boundaries of the service area or areas;
   2. A description of the complaint system required under [ 12 ] § 32.1-137.6 of the Code of Virginia and 12 VAC 5-408-130;
   3. A description of the procedures and programs established by the licensee to ensure both availability and accessibility of adequate personnel and facilities and to assess the quality of health care services provided; and
   4. A list of the licensee’s managed care health insurance plans.

G. In addition, applications shall include [ the following, as applicable to the type of MCHIP ]:
   1. A description of the MCHIP’s disease management program;
   2. [ The MCHIP’s drug formulary ] A detailed description of the plan’s prescription drug benefit program;[
   3. A description of the quality improvement plan;
   4. The utilization review plan including a description of the criteria, clinical and therapeutic guidelines, and their derivation or source;
   5. [ A description of ] the [ plan’s ] credentialing process;
   6. The current provider directory identifying providers by specialty and by service area, including those providers who are not currently accepting new patients;
   7. A copy of the evidence of coverage or insurance plan coverage limitations and exclusions and other information provided to enrollees;
   8. A description of all types of payment arrangements that the licensee uses to compensate providers for health care services rendered to enrollees, including, but not limited to, withholds, bonus payments, capitation, processing fees, and fee-for-service discounts; and
   9. A list of clinical [ outcome ] studies with abstracts of study design, objectives and, if available, results [ as applicable to the type of MCHIP ].

H. The [ basic health care services, as required by law, that the ] licensee [ shall provide or arrange for access to basic health care services which provides, arranges, pays for, or reimburses ] shall be appropriately integrated throughout the MCHIP’s service area. Services shall be based upon prevailing nationally recognized standards of medical practice.

I. The licensee shall have a written policy stating the MCHIP’s commitment to treating enrollees in a manner that respects their rights as well as its expectations of provider and enrollee responsibilities. The services shall be accessible to all enrollees, including those with diverse cultural and ethnic backgrounds, and those with physical and mental disabilities.

12 VAC 5-408-170. Provider credentialing and recredentialing.

A. The licensee shall establish and maintain a comprehensive credentialing verification program to ensure its providers meet the minimum standards of professional licensure or certification. Written supporting documentation shall include, but is not limited to:
   1. Current valid license and history of licensure or certification;
   2. Status of hospital privileges, if applicable;
   3. Valid DEA certificate, as applicable;
   4. Information from the National Practitioner Data Bank as available;
   5. Education and training, including post graduate training, if applicable;
   6. Specialty board certification status, if applicable;
   7. Practice or work history covering at least the past five years; and
   8. Current, adequate malpractice insurance and malpractice history of at least the past five years.

B. Policies for credentialing and recredentialing shall include, but are not limited to the:
   1. Criteria used to credential and recredential;
   2. Process used to make credentialing and recredentialing decisions;
The policies shall be made available to participating providers and applicants upon written request.

C. The credentialing process shall be completed before the provider:
   1. Begins seeing enrollees;
   2. Enters into the employment or contractual relationship with the MCHIP; and
   3. Is included in the listing of health care providers as a participating provider in any marketing and enrollee materials.

D. The providers shall be recredentialed at least every two years. Recredentialing documentation shall include:
   1. Current valid license or certification;
   2. Status of hospital privileges, if applicable;
   3. Current valid DEA registration, if applicable;
   4. Specialty board eligibility or certification status, if applicable;
   5. Data from enrollee complaints and the results of quality reviews, utilization management reviews and enrollee satisfaction surveys, as applicable; and
   6. Current, adequate malpractice insurance and history of malpractice claims and professional liability claims resulting in settlements or judgments.

E. All information obtained in the credentialing process shall be subject to review and correction of any erroneous information by the health care provider whose credentials are being reviewed.

F. Providers shall be required by the MCHIP to notify the MCHIP of any changes in the status of any credentialing criteria.

G. The licensee shall not refuse to initially credential or refuse to reverify the credentials of a health care provider solely because the provider treats a substantial number of patients who require expensive or uncompensated care.

H. The licensee shall have policies and procedures for altering the conditions of the provider's participation with the MCHIP. The policies shall include a range of actions to be taken to improve performance prior to termination and an appeals process for instances when the MCHIP chooses to alter the condition of provider participation based on issues of quality of care or service, except in circumstances where an enrollee's health has been jeopardized. Providers shall have complete and timely access to all data and information used by the licensee to identify or determine the need for altering the conditions of participation.

I. The licensee shall retain the right to approve new providers and sites based on quality issues, and to terminate or suspend individual providers. Termination or suspension of individual providers shall be supported by documented records of noncompliance with specific plan expectations and requirements for providers. The provider shall have a prescribed system of appeal of this decision available to them as prescribed in the MCHIP contract with the provider.

J. Providers shall be informed of the appeals process. Providers shall be included in reviewing appeals and making recommendations for action.

K. The MCHIP shall notify appropriate authorities when a provider's application or contract is suspended or terminated because of quality deficiencies by the health care provider whose credentials are being reviewed.

L. There shall be an organized system to manage and protect the confidentiality of personnel files and records. Records and documents relating to a provider's credentialing application shall be retained for at least seven years.

12 VAC 5-408-180. Complaint system.

A. Every MCHIP shall establish and maintain a system for the resolution of complaints brought by enrollees, or by providers acting on behalf of an enrollee and with the enrollee's consent, regarding any aspect of an MCHIP's health care services including, but not limited to, complaints regarding quality of care, choice and accessibility of providers, and network adequacy.

The system shall include, but is not limited to:

1. Written notification to all enrollees of the procedures, including telephone numbers and addresses, for contacting the MCHIP with a complaint and telephone numbers and addresses of advocate programs, the complaint unit of the center and the Office of the Managed Care Ombudsman, to help with complaints or appeals;

2. A description of the process used to investigate and resolve complaints, including specific time lines for each step in the complaint process; and

3. A description of the process used to document and track the status of all complaints and compile the complaint information required to be reported to the department under § 32.1-137.6 C of the Code of Virginia.

B. Time lines for responding to complaints shall accommodate clinical urgency and shall not exceed 30 days from receipt of the complaint. Resolution of complaints shall not exceed 60 days from date of receipt of the complaint.

C. The MCHIP shall keep records of complaints filed including, but not limited to:
1. Complaint identifier, using a unique identification code assigned consistently to the enrollee;
2. Date complaint received;
3. A general description of the reason for the complaint;
4. Date of each review and hearing, if any;
5. The number of days to gather the information necessary to resolve the complaint;
6. Date closed;
7. Resolution of the complaint;
8. Record of internal actions necessary as a result of the complaint resolution, as applicable; and
9. Notification to the enrollee of the resolution.

D. No enrollee who exercises the right to file a complaint or a grievance shall be subject to disenrollment or otherwise penalized due to the filing of a complaint or a grievance.

E. Complaint records shall be maintained from the date of the licensee’s last examination and for no less than five years.

F. A description of the systems for filing complaints, grievances, and appeals shall be provided to enrollees at the time of enrollment and upon request thereafter.

12 VAC 5-408-190. Enrollee education and communication.
A. The MCHIP shall make available to each enrollee at the time of enrollment or at the time the contract or evidence of coverage is issued, as required by law and upon request thereafter, policies and procedures applicable to the enrollee including, but not limited to:
1. A statement of enrollee’s rights and responsibilities;
2. Procedures for obtaining care including:
   a. Referral and authorization requirements;
   b. Primary care services;
   c. Specialty care and hospital services;
   d. Behavioral services, when the complexity of the enrollee’s condition requires the knowledge base and expertise beyond those of the primary care provider;
   e. Emergency services and after-hours coverage, including access to emergency care, and any requirements for prior authorization and payment for out-of-service areas;
   f. Care and coverage when out of the service area;
   g. Out of network services; and
   h. Pharmacy services;
3. Procedures for appealing decisions adversely affecting enrollee coverage benefits;
4. Procedures for changing primary care and specialty care providers including any restrictions on changing providers;
5. All necessary mailing addresses and telephone numbers for seeking information or authorization;
6. The toll-free number for the complaint unit of the center; and
7. Notice of the right to obtain information on types of provider payment arrangements used to compensate providers for health care services rendered to enrollees, including, but not limited to, withholds, bonus payments, capitation, processing fees, and fee-for-service discounts.

B. Lists of all network providers by specialty and by location and indicating which providers are accepting new patients shall be available to all enrollees on request.

C. There shall be a mechanism for providing enrollee information in plain language that is clearly understood and in the languages of the major population groups served.

D. Enrollees shall be provided an opportunity for input into matters of policy and operation through the establishment of advisory panels, the use of advisory referenda on major policy decisions, or by other mechanisms.

E. There shall be a mechanism for assisting enrollees affected by changes in the MCHIP’s service areas or network providers.

12 VAC 5-408-200. Data management.
A. The information system shall collect data on enrollees and provider characteristics and on services furnished to enrollees, as needed, to guide the selection of the quality assurance activities and to meet the data collection requirements of quality assurance projects.

B. The data management system, which includes medical records, shall be safeguarded against loss, destruction, tampering, and unauthorized access or use.

12 VAC 5-408-210. Medical records.
A. The licensee shall maintain or require to be maintained, an organized medical record system assuring the availability of information required for effective and continuous enrollee care and for quality review. Written policies and procedures based on accepted standards of practice shall specify retention, reproduction, access, storage, content, and completion of each record.

B. Medical records shall be confidential. Only authorized personnel shall have access as specified in § 32.1-127.1:03 of the Code of Virginia. Written procedures shall govern the use and removal of medical records and the conditions for release of information. The enrollee’s written consent shall be required for release of information as required by law.
PART III.
QUALITY IMPROVEMENT PROGRAM.

12 VAC 5-408-220. Purpose.

A. The MCHIP shall have a comprehensive, systematic, and organized quality improvement program for the purpose of:

1. Improving enrollees’ health outcomes;
2. Enhancing the quality of the clinical care and services provided to enrollees;
3. Increasing enrollee satisfaction;
4. Maximizing opportunities for MCHIP improvements and minimizing opportunities for errors;
5. Monitoring and evaluating quality of care issues; and
6. Reporting incidences to the appropriate entities.

B. The quality improvement program shall ensure that the MCHIP provides health services that, at a minimum and organized quality improvement program for the purpose of:

1. [ Are Be ] (i) consistent with prevailing nationally recognized medical standards of care, (ii) adequately available, (iii) accessible, (iv) appropriate for enrollees’ clinical conditions, and (v) guided by a combination of utilization review guidelines, treatment protocols, accepted practice guidelines, and clinical case data that ensures balanced clinical decision making;
2. [ Target Identify and treat ] acute and chronic illnesses;
3. [ Promote prevention Allow for preventive services ];
4. Provide for the treatment of enrollees with similar medical conditions while recognizing individual case differences;
5. Allow for a variety of treatment options that are commensurate with the MCHIP’s benefit coverage;
6. Offer enrollee guidance for treatment out of network if treatment is not available through the MCHIP;
7. Recognize identified public health goals;
8. Allow for the evaluation and use of new technology or the new application of existing technology; and
9. Provide for a multidisciplinary treatment approach that addresses the physical and psychological function and functional status of the MCHIP’s enrollees.

12 VAC 5-408-230. Program [ structure requirements ].

A. The MCHIP shall [ have an operational unit be structured operationally ] to administer the quality improvement program. [ The quality improvement operations shall include, but not be limited to: ]

B. The operational unit shall have the primary responsibility for all aspects of the MCHIP’s quality improvement program including, but not limited to:

1. Establishing performance [ expectations goals ] designed to improve the quality of health care services provided by the MCHIP;
2. Developing a quality improvement plan to implement the [ expectations goals ];
3. Measuring and assessing the MCHIP’s performance in meeting the [ expectations goals ];
4. Implementing activities based upon the assessments to improve and maintain performance;
5. Integrating the quality improvement activities of all other organizational units, providers, delegated health service providers, and the governing body into the quality improvement program and providing feedback to those entities;
6. Enlisting enrollee input through sources such as satisfaction surveys, reviews of complaints, appeals, and requests to change providers, and utilizing enrollee and provider participation in the program;
7. Identifying the resources necessary for the MCHIP to successfully pursue improvement priorities;
8. Maintaining and documenting the plan’s compliance with state and federal laws, as well as private accreditation requirements, if applicable, that govern the MCHIP’s quality improvement program; and
9. Ensuring that the MCHIP’s quality improvement [ expectations goals ] are communicated to all organizational units of the plan, enrollees, providers and delegated health service providers.

C. The quality improvement program shall be managed by professional personnel qualified by training and experience to implement the MCHIP’s program [ expectations goals ]. The organizational relationship and responsibilities for quality improvement shall be clearly defined.

D. The quality improvement program shall be structured to include, but is not limited to:

1. A quality improvement [ program operational unit operations ] accountable for the quality improvement program;
2. A quality improvement program advisory committee whose members include enrollees and representatives from the [ operational units operations ] responsible for quality improvement, utilization management, provider affairs, credentialing, complaints and grievances, customer service, medical records, and data management;
3. A medical director of the MCHIP;
4. Committees established accountable to the quality improvement program [ operational unit operations ] that meet to address specific ongoing aspects of the quality improvement program; and
5. Committees established to provide the quality improvement program [ unit ] with periodic input
regarding the quality improvement program from Virginia providers active in the plan and enrollees.

[ E. D. ] The MCHIP shall designate a board-certified physician to serve as medical director.

[ E. E. ] The medical director shall provide supervision and oversight of the quality improvement program including, but not limited to:

1. Defining the responsibilities and interrelationships for professional services;
2. Coordinating, supervising and overseeing the functioning of professional services;
3. Input into the medical performance of providers;
4. Overseeing the continuing in-service education of the MCHIP’s professional staff;
5. Providing clinical direction and leadership to the continuous quality improvement program;
6. Establishing policies and procedures covering all health care services provided to enrollees; and
7. Ensuring review of provider credentials including, but not limited to:
   a. Delineating qualifications for participating in the MCHIP;
   b. Establishing a system for verification of providers’ credentials, recredentialing, performance reviews; and
   c. Obtaining information about any disciplinary action against the provider.

[ G. F. ] The quality improvement program advisory committee shall:

1. Recommend policies for quality improvement;
2. Review and approve the quality improvement program;
3. Evaluate the results of the quality improvement program;
4. Initiate quality improvement activities; and
5. Ensure implementation of the quality improvement program.

[ H. G. ] All determinations and actions made by the committee shall be recorded in minutes that are dated, approved and current.

[ H. H. ] The quality improvement program [ operational unit operations ] shall maintain written descriptions of the responsibilities of each of the operational units of the licensee and the governing body in the planning, development, implementation and evaluation of the plan’s quality improvement program. The descriptions shall clearly delineate the responsibilities of each unit, to whom the responsibilities are delegated, and the organizational relationship that each operational unit has with another to provide quality health care.

[ J. I. ] The director of the quality improvement program [ operational unit ] shall report directly to the executive management of the MCHIP.

[ K. J. ] A written report shall be issued annually by [ the ] quality improvement [ operational unit operations ] to the MCHIP’s executive management and to the governing body. The purpose of the report shall be to evaluate the MCHIP’s quality improvement program activities including, at a minimum:

1. The [ MCHIP’s MCHIP licensee’s ] achievements in meeting its quality improvement expectations;
2. Those areas where expectations were not met or where improvements are still needed;
3. The impact [ on enrolled health services and the MCHIP as a result of meeting and needing to continue improving upon expectations of the MCHIP’s quality improvement program, including specific programmatic initiatives, on the quality of care received by enrollees as assessed using generally-accepted clinical indicators ];
4. New areas identified through the quality improvement assessment process that will be incorporated in the next annual quality improvement program plan; and
5. Resources identified as necessary to assist in meeting the MCHIP’s quality improvement expectations.

[ L. K. ] The governing body shall retain the ultimate authority for the [ MCHIP’s MCHIP licensee’s ] quality improvement program. Documentation shall be maintained by the MCHIP that the governing body has reviewed the annual quality improvement program report and has provided direction to the program and, as necessary, other operational units in response to the report.

[ M. L. ] A summary of the program shall be provided to appropriate managers, providers and staff members of the MCHIP, and shall be available to enrollees of the MCHIP upon request. The program shall be made available to all other managers, providers, and staff upon request.

[ N. M. ] There shall be a mechanism in place to inform enrollees, providers, and employers of the [ MCHIP’s MCHIP licensee’s ] annual performance results each year, upon request.

12 VAC 5-408-240. Program plan.

A. Each MCHIP [ licensee ] shall have a written quality improvement plan. The plan shall include:

1. The quality improvement performance expectations for the MCHIP for the year and an explanation as to the rationale for targeting these expectations;
2. Delineation of the expected outcomes for the performance expectations;
3. The performance activities to implement the plan and the specific lines of authority and accountability for implementation;
4. The data collection and analysis methodologies to be used to evaluate the quality of health care services;
5. Clinical studies [ , applicable to the type of MCHIP, ] that target clinical diagnosis and treatments with the requirement that those diagnoses focused upon are pertinent to a substantial number of its enrollees or have been identified as major public health risks. The plan shall also include studies that are pertinent to the enrollees of the product lines that the MCHIP manages or that address major public health risks.

6. Strategies to evaluate provider performance and systems, direct corrective action, and act when corrective action has not been taken;

7. Methods to assess enrollee and provider satisfaction and respond to enrollee and provider satisfaction results regarding the provision of the quality of the health care services;

8. Evaluations of the actual outcomes of care provided to selected groups of enrollees with an analysis of variations in care;

9. Amendment of treatment protocols and clinical practice guidelines, as necessary, to make them current and the development of new protocols and clinical practice guidelines, as necessary, to address clinical conditions;

10. Examination of the overutilization and underutilization of services and interventions when either are identified;

11. Strategies to evaluate the coordination and continuity of care that enrollees receive;

12. Analysis of the accessibility of enrollee services including emergency services and after-hour care; and


PART IV.
COORDINATION AND CONTINUITY OF CARE.

12 VAC 5-408-250. Continuity of care.

A. The MCHIP shall [ coordinate provide, arrange, pay for, or reimburse ] the health care services it provides in such a way that:

1. Enrollees’ individual needs are assessed on an ongoing basis through their physician or staff and matched with the appropriate level of medical, psychological, or medical social services care. The MCHIP shall monitor the continuity and coordination of care an enrollee receives with other facets of care;

2. Enrollees’ transitions through the health care delivery system are facilitated by the MCHIP and its components;

3. The MCHIP provides for enrollees’ involvement in determining care and treatment [ and facilitates the family’s involvement in treatment decisions when the enrollee is unable to do so ];

4. Information necessary to support the provision of care from one plan component to another is provided in a timely manner to enrollees and providers to support the continuity of the enrollee’s care;

5. [ Providers follow plan procedures to address The MCHIP addresses ] enrollees’ need to know specific information about their illness, condition or treatment in order for the enrollee to follow their plan of care and receive follow-up care when needed; and

6. Enrollees affected by a change or termination of benefits, services or providers are assisted in understanding how such developments impact them and the options available for dealing with them.

B. [ If a utilization management decision results in denial of authorization for care, enrollees and providers shall be notified in a timely manner. ] The MCHIP shall assist with denial of care issues by providing adequate information for enrollee and provider decisions regarding ongoing care, or if appropriate, discharge.

12 VAC 5-408-260. Network adequacy.

A. The MCHIP shall provide a sufficient number and mix of services, specialists, and practice sites to meet enrollees’ health care needs, including providers serving high risk populations or those specializing in the treatment of costly conditions, and its contractual obligations with reasonable promptness.

B. The MCHIP shall ensure telephone access 24 hours a day, 7 days a week, to responsible and knowledgeable health care practitioners capable of assessing the enrollees’ conditions and, as necessary, arranging for appropriate services.

C. The MCHIP shall incorporate strategies into their access procedures to facilitate utilization of the MCHIP’s health care services by enrollees with physical, mental, language or cultural barriers.

D. When a MCHIP does not have a health care provider with the appropriate training and experience within its network capable of meeting the particular health care needs of an enrollee, the MCHIP shall ensure that the enrollee is referred, consistent with the evidence of coverage, to a health care provider outside of the MCHIP’s network. The enrollee shall not be responsible for any additional costs incurred by the MCHIP as a result of this referral, consistent with the evidence of coverage, other than any applicable copayment, coinsurance or deductible.

E. The MCHIP shall make provisions for affected enrollees to be notified about the termination of a [ health care delivery site provider ] as soon as it becomes aware of the termination [ but at least 30 days before the termination or closing date ]. The MCHIP shall inform the affected enrollees of other participating providers available to assume their care and facilitate the enrollees’ transition from a terminating provider to another provider so that the enrollee’s continuity of care is not interrupted. Enrollees undergoing an active course of treatment shall have continued access to care during the transition period.
12 VAC 5-408-270. Travel and appointment waiting times.

A. The travel time for the enrollee to the nearest primary care delivery site or to the nearest institutional service site shall not exceed 30 minutes normal driving time from the enrollee’s residence or place of business for at least 90% of the enrolled population within each approved service area. Pharmacy services shall also be available within this time frame. The department may waive this requirement for rural or urban areas if the plan can successfully demonstrate that the 30-minute driving time is not feasible.

B. The travel time for the enrollee to the nearest specialty care shall not exceed 60 minutes normal driving time from the enrollee’s residence or place of business for at least 90% of the enrolled population within each approved service area. The department may waive this requirement for rural or urban areas if the plan can successfully demonstrate that the 60-minute driving time is not feasible.

C. The travel time for the enrollee to each of the nearest health care delivery sites listed in this subsection shall not exceed 60 minutes normal driving time from the enrollee’s residence or place of business for at least 90% of the enrolled population within each approved service area:

1. A hospital providing specialty level or above neonatal services;
2. A hospital providing tertiary pediatric services;
3. A residential substance abuse treatment center;
4. Hospital-based diagnostic cardiac services;
5. Hospital inpatient medical rehabilitation services; and
6. Laboratory, x-ray, Magnetic Resonance Imaging services.

The department may waive this requirement for rural or urban areas if the plan can successfully demonstrate that the 60-minute driving time is not feasible.

D. The travel time for the enrollee to each of the nearest health care delivery sites listed in this subsection shall not exceed 90 minutes normal driving time from the enrollee’s residence or place of business for at least 90% of the enrolled population within each approved service area:

1. A hospital providing kidney and other organ transplantation services;
2. A hospital providing major trauma treatment and open-heart surgery services; and
3. Other specialty hospital services including major burn care and oncology services.

The department may waive this requirement for rural or urban areas if the plan can successfully demonstrate that the 90-minute driving time is not feasible.

Nothing in this section shall prohibit or restrict a plan from offering such services at designated “centers of excellence” inside or outside of the geographic boundaries of Virginia.

E. Routine appointments for nonemergency or nonurgent care shall be available within two weeks of the enrollee’s request.

F. Preventive care appointments, including routine physical examinations, shall be available with 60 days of the enrollee’s request.

G. Consultations for specialty services shall be [ available as requested by the primary care provider at least as required in § 38.2-3407.11:1 of the Code of Virginia ].

12 VAC 5-408-280. Urgent care and emergency services.

A. The MCHIP shall have a system in place to provide to its enrollees, on a 24-hour basis, (i) access to medical care or (ii) access by telephone to a physician or licensed health care professional with appropriate medical training who can refer or direct an enrollee for prompt medical care in cases where there is a need for urgent care or emergency services.

B. The MCHIP shall comply with the requirements of the Federal Emergency Medical Treatment and Active Labor Act (42 USC § 1395 dd).

C. The MCHIP shall provide clear and understandable explanations to enrollees and providers of:

1. What constitutes emergency and urgent care;
2. The process for accessing emergency and urgent care;
3. The responsibility of the enrollee for payment for nonemergency services rendered in a hospital emergency facility; and
4. Coverage for out of network emergency medical care when a enrollee cannot reasonably access network services.

D. The MCHIP shall require its providers to clearly notify enrollees of provisions for urgent care or emergency services when the physician is not available after hours.

E. The MCHIP shall recognize primary care practitioners’ authority to facilitate and authorize emergency services for enrollees.

F. Coverage of costs for emergency services shall be consistent with the evidence of coverage and shall not interfere with enrollee access to care.

G. Enrollees shall be allowed immediate access to emergency services and access within no more than 24 hours for urgent care. Urgent care access may be provided sooner with appropriate authorization.

H. The MCHIP shall monitor usage of urgent care and emergency service to determine if the services are
understood and appropriately used by enrollees and providers.

12 VAC 5-408-290. Health promotion [and disease management].

A. Annually, the MCHIP shall develop and implement at least two health guidelines for the prevention and early detection of illness and disease. Each written guideline shall:

1. Be available to enrollees upon request;
2. Describe the prevention or early detection intervention and the recommended frequency and condition under which the intervention is required; and
3. Document the scientific basis or authority upon which the guideline is based.

Guidelines may be specific to a defined population segment.

B. The MCHIP shall distribute any preventive health guideline it develops and any updates to its providers as soon as practicable after development of the guideline.

C. The MCHIP shall regularly communicate with its enrollees to encourage the use of preventive health services.

D. At least annually, the MCHIP shall measure enrollee and provider compliance with the current preventive care guidelines. The MCHIP may measure compliance by population segment if the guideline is specific to a population segment.

E. Providers who have appropriate knowledge shall be consulted in the adoption of the preventive health guidelines.

PART V. CLINICAL PERFORMANCE EVALUATION.

12 VAC 5-408-300. Clinical performance evaluation systems.

A. The MCHIP shall have a system for the evaluation of the outcomes and processes of clinical care services delivered to the MCHIP's enrollees.

B. The MCHIP shall adopt a nationally recognized clinical performance evaluation system, such as HEDIS, that analyzes data based upon selected performance factors or shall establish a clinical performance evaluation system that uses data collection, quantitative measures, and analysis to monitor quality improvement activities.

C. The MCHIP shall notify the department regarding its adoption of a nationally recognized clinical performance evaluation system, such as HEDIS, or that it has chosen to establish its own performance measurement system.

MCHIPs that choose not to adopt a nationally recognized system shall provide justification to the department of their choice of performance measurement selections for the department’s approval.

D. The MCHIP shall annually evaluate its performance in at least three of the areas of clinical care shown below:

1. Primary care services;
2. High volume specialty services;
3. Behavioral health services; and
4. Institutional health services including inpatient hospital care, home health services, skilled nursing facility services and ambulatory surgery.

If HEDIS is used to assess clinical performance, the plan shall substitute the HEDIS “Effectiveness of Care” measures for those areas listed in subdivisions 1 through 4 of this subsection.

E. The performance measurement indicators chosen by the plan shall:

1. Be objective and quantifiable;
2. Be based upon current and reliable scientific information;
3. Have an established goal or benchmark;
4. Effectively measure performance indicators; and
5. Have priority areas for measuring outcomes of clinical care and be reflective of industry-wide performance measurement goals.

F. The plan shall implement ways to improve its performance based on an analysis of its clinical performance measurements.

12 VAC 5-408-310. Data collection and submission.

A. Data collected and analyzed for clinical service evaluation shall be:

1. Collected using processes that are methodologically sound;
2. Valid, reliable, complete and timely;
3. Analyzed quantitatively by personnel qualified to evaluate the data for clinical quality improvement; and
4. Protected for confidentiality, easily retrievable, and transmitted for appropriate release to external parties.

In addition, the data shall allow for intra and intersystem comparisons for the purpose of improving patient health outcomes and improving clinical health delivery systems.

B. The [plan shall MCHIP may ] permit any organization with which it contracts to collect and analyze clinical data for performance evaluation to release that data to the department or its designee.
12 VAC 5-408-320. Delegated services.

A. If the licensee contracts for any of the following services, it shall retain accountability for the oversight of those services:
   1. Quality assurance activities;
   2. Credentialing and recredentialing;
   3. Enrollee education, communication and satisfaction;
   4. Utilization management;
   5. Health promotion;
   6. Records management;
   7. Data management, to include the collection of clinical trial and the audit of all clinical trial data;
   8. Providers and provider networks;
   9. Claims administration; or

B. The MCHIP shall establish and implement written procedures to evaluate the effectiveness of any delegated service.

C. Documentation that the delegated service complies with this chapter, its agreement with the MCHIP to provide services, and any applicable state and federal laws required of the MCHIP to provide the service shall be maintained by the MCHIP licensee.

D. Data and information exchanged between the delegated service and the plan shall be accomplished in a manner that is timely, efficient, and effective.

E. The MCHIP shall ensure that data held by the delegated service that is required to be shared with the state’s Health Care Data Reporting System is transmitted according to collection requirements.

F. The MCHIP shall require the delegated service to provide for timely and efficient access by state examiners to data, records, and personnel necessary to determine compliance with this chapter.

12 VAC 5-408-330. Written agreement.

A. There shall be a written agreement signed by the MCHIP and the delegated service that describes the:
   1. Delegated service or services;
   2. Responsibilities of the MCHIP and the delegated service and the remedies available to the MCHIP if the delegated service does not fulfill its obligations; and
   3. Frequency of reporting to the MCHIP and the process by which the MCHIP will evaluate the delegated service's performance.

B. The MCHIP shall ensure that the enrollees' continuity of care is not disrupted because of changes made in the written agreement between the MCHIP and the delegated service or because the relationship, as provided for in the agreement, is terminated.


A. The MCHIP shall inform its enrollees and providers which services they may need are delegated and how those services are accessed.

B. If the delegated services are health care services, then the contractor [or the MCHIP] shall also inform the plan's enrollees of at least the following:
   1. The procedures for filing complaints [and grievances];
   2. The utilization management decision process;
   3. The process for appealing claims denials;
   4. How to access emergency and urgent care;
   5. How to obtain services not covered in the delegated health services' benefit package;
   6. The process for changing from one practitioner to another;
   7. Orientation process for new enrollees;
   8. Enrollee participation opportunities; and
   9. Participating practitioners and providers.

C. The delegated health services [or the MCHIP licensee] shall also inform the MCHIP's providers of at least the following:
   1. Opportunities for provider involvement;
   2. Quality improvement program expectations;
   3. Provider credentialing process;
   4. Procedures for complaints [and grievances];
   5. Process for utilization management decisions; and
   6. How to access emergency and urgent care.

12 VAC 5-408-350. Quality improvement integration.

A. As it pertains to the enrollees, the MCHIP [licensee] shall integrate monitoring of the delegated health services within its quality improvement program:
   1. Quality improvement program activities;
   2. Quality improvement outcomes; and
   3. Complaint [and grievance] and appeals processes.

B. At least annually, the MCHIP shall evaluate the delegated health service's quality improvement program, and complaint [and grievance] and appeals processes, and provide the delegated health service with a report of its evaluation.

C. When the MCHIP's expectations have not been met, the MCHIP shall require the delegated health service to provide:
1. A corrective action plan that addresses areas where performance expectations have not been met; and

2. Evidence that corrective action was taken in keeping with corrective action plans.

PART VII.
UTILIZATION REVIEW AND MANAGEMENT.

12 VAC 5-408-370. Utilization review and management.

A. The MCHIP shall have a utilization review and management process that complies with the requirements of §§ 32.1-137.7 through 32.1-137.16 of the Code of Virginia and this chapter. The process shall be managed by a licensed physician.

B. In developing its utilization review program, the MCHIP shall utilize [one of the following:

1. The Health Utilization Management Standards (Version 3.0) of the American Accreditation Health Care Commission/URAC; or

2. The ] "Standards for Utilization Management" and the "Standards for the Delegation of Utilization Management" [ of the National Committee for Quality Assurance's "Standards for the Accreditation of Managed Care Organizations," effective July 1, 1999, which [ are ] incorporated by reference as the criteria for determining compliance with the utilization management and review requirements of this section except in those instances in which state requirements in law or regulation are more stringent.

C. The purpose of the utilization review process shall be to monitor access to and utilization of health care services with the process ensuring that the conduct of utilization review is:

1. Impartial, timely, consistent and based upon supportive medical evidence;

2. Performed by [ appropriately ] qualified [ health ] personnel;

3. Comprehensive in assuring that good faith efforts to obtain all information necessary to make utilization review decisions are made;

4. Evaluated routinely so that program changes that determine the necessity, appropriateness, efficiency and efficacy of health care services provided by the plan can be made as a result of the evaluation; and

5. Reported annually to the MCHIP's governing body.

D. In addition, the utilization review process shall:

1. Allow for flexibility, taking into account individual cases when appropriate;

2. Provide avenues for provider input into the establishment of clinical guidelines and protocols;

3. Afford opportunity for reconsideration and appeal of adverse determinations in a manner that is easily understood and accessed by enrollees and providers; and

4. Be coordinated with other components of the MCHIP that use or could benefit from utilization review data.

E. The utilization review process shall be based upon a written plan that is reviewed annually and that shall contain, at a minimum:

1. A description of the scope of the utilization review process, both internal and external;

2. A description of the organizational responsibilities for utilization review including the qualifications of utilization review personnel;

3. The clinical review guidelines, standards, and protocols which are applied in utilization review determinations;

4. Mechanisms to evaluate uniform application of guidelines and to determine the necessity for case-by-case decision making;

5. Procedures for soliciting and implementing provider input in the development of guidelines as well as evaluating provider usage of the guidelines;

6. The process for monitoring over utilization and under utilization;

7. Provisions for notice to enrollees and providers regarding any need for precertification, concurrent certification, or retrospective review as a prerequisite for approval of payment or access to service;

8. Procedures for reconsideration of adverse decisions and appeals including expedited appeals;

9. Guidelines for the delegation of utilization review to external entities and the expectations for that delegation;

10. Guidelines for the notification in clear and understandable terms of the reasons for denial of services or payments to providers and subscribers;

11. Mechanisms for review and implementation of experimental treatments and new technology;

12. Mechanisms for soliciting and evaluating provider and enrollee satisfaction with utilization review determinations and the MCHIP's appeal process and implementing mechanisms to address areas of dissatisfaction; and

13. Procedures for the maintenance of records required under § 32.1-137.16 of the Code of Virginia.

DOCUMENTS INCORPORATED BY REFERENCE

Health Network Standards, Version 3.0, American Accreditation HealthCare Commission/URAC.


Standards for the Accreditation of Managed Care Organizations, effective July 1, 1999, National Committee for Quality Assurance.
NOTICE: The forms used in administering 12 VAC 5-408-10 et seq., Regulation for the Certification of Managed Care Health Insurance Plan Licenses, are listed and published below.

FORMS
Application for Certificate of Quality Assurance - Managed Care Health Insurance Plan Licensee [ , 12/99].
VIRGINIA DEPARTMENT OF HEALTH
CENTER FOR QUALITY HEALTH CARE SERVICES AND CONSUMER PROTECTION

APPLICATION FOR CERTIFICATE OF QUALITY ASSURANCE
MANAGED CARE HEALTH INSURANCE PLAN LICENSEE

In accordance with provisions in the Code of Virginia, 1950, as amended, Section 32.1 - 137.2 A, each Managed Care Health Insurance Plan (MCHIP) Licensee must apply for a Certificate of Quality Assurance and submit the following information to the Virginia Department of Health. The application must be accompanied by a money order, bank or teller check, or certified check in the amount of the application fee payable to the Virginia Department of Health Center for Quality Health Care Services and Consumer Protection.

ANY CHANGES DURING THE YEAR WHICH WOULD AFFECT THE ACCURACY OF THE FOLLOWING INFORMATION MUST BE REPORTED PROMPTLY, IN WRITING, TO THE VIRGINIA DEPARTMENT OF HEALTH CENTER FOR QUALITY HEALTH CARE SERVICES AND CONSUMER PROTECTION.

NAME OF MANAGED CARE HEALTH INSURANCE PLAN LICENSEE:

____________________________________________________________

EFFECTIVE DATE OF LICENSE: _______________ EXPIRATION DATE: _______________

TYPE OF LICENSE: ________________________________

NAIC NUMBER: ________________________________

FEIN, IRS Identification Number, or Social Security Number: ________________________________

ADDRESS
NUMBER AND STREET: ________________________________________________________________

CITY OR TOWN: ___________________________________ STATE: ___________________________

ZIP CODE: __________________ TELEPHONE NUMBER: _________________________________

FACSIMILE NUMBER: ________________________________

MAILING ADDRESS: ________________________________________________________________
(If different)

NAME OF CONTACT PERSON: _________________________________________________________

TITLE OF CONTACT PERSON: _______________________________________________________

I hereby certify that the information contained in the Application for Certificate of Quality Assurance is, to the best of my knowledge, accurate and true.

____________________________________________________________ (SIGNATURE OF AUTHORIZED REPRESENTATIVE)

____________________________________________________________ (DATE OF COMPLETION)

For Office Use Only:
Date Received: ____________________________
Date Processed: __________________________
Date Approved / Disapproved (circle): ____________________
Final Regulations

MHIP Application

1. State any assumed or trade name under which the MHIP operates (if different from legal name).

________________________________________

a. List of the licensee’s Managed Care Health Insurance Plans.

________________________________________

________________________________________

________________________________________

2. If the applicant is wholly or partly owned by another organization, provide the names and addresses of all organizations owning all or part of the applicant.

________________________________________

________________________________________

3. What type of business entity (for example, corporation, general partnership, limited partnership, and sole proprietorship) is the applicant?

________________________________________

4. Service Area by Cities and Counties:

________________________________________

________________________________________

________________________________________

Include a description of the geographic area to be served, with a map clearly delineating the boundaries of the service area(s).

5. Health Care Services provided, including any delegated services:

________________________________________

________________________________________
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MCHIP Application

6. Name of Chief Medical Officer:

7. Medical Director(s):

8. State the national accreditation organization(s), the dates of accreditation, and the accreditation status.

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Attach the following items:

1. The most recent accreditation report from a nationally recognized accreditation organization and if applicable, the written corrective action response.

2. A copy of the most recent report of an examination of the MCHIP under similar laws and regulations governing managed care plans of another state or states and if applicable, a copy of the written corrective action response.

3. The most recent report of any examination of the quality of health care provided by the MCHIP issued by a federal regulatory agency and if applicable, a copy of the written corrective action plan.

4. A description of the geographic area to be served, with a map clearly delineating the boundaries of the service area or areas.

5. The Policies and Procedures established by the licensee to assure both availability and accessibility of adequate personnel and facilities and to assess the quality of health care services provided.

6. The plan’s drug formulary.

7. The Policies and Procedures for Credentialing and Recredentialing process to satisfy compliance with 12 VAC 5-408-160.
Final Regulations

8. The contracts for all types of payment arrangements that the licensee uses to compensate providers for health care services rendered to enrollees, including, but not limited to, withhold, bonus payments, capitation, and fee-for-service discounts.


10. A copy of the evidence of coverage, coverage limitations, exclusions, and other information provided to enrollees under 12 VAC 5-408-180. The written policy stating the MCHIP's commitment to treating enrollees in a manner that respects their rights as well as its expectations of provider and enrollee responsibilities.

11. The current provider directory identifying providers by specialty and by service area, including those providers who are not currently accepting new patients.

12. The Policies and Procedures for Medical Records to satisfy compliance with 12 VAC 5-408-200.

13. The Policies and Procedures for the Quality Improvement plan to satisfy compliance with 12 VAC 5-408-210, 12 VAC 5-408-220, and 12 VAC 5-408-230.

14. The Policies and Procedures for the Continuum of Care to satisfy compliance with 12 VAC 5-408-240.

15. The Policies and Procedures for Network Adequacy to satisfy compliance with 12 VAC 5-408-250.


17. The Policies and Procedures for Emergency and Urgent Care Services to satisfy compliance with 12 VAC 5-408-270.

18. The Policies and Procedures to satisfy compliance with 12 VAC 5-408-280 Health Promotion and Disease Management. A description of the plan's disease management program(s).

19. The Policies and Procedures for Clinical Performance Evaluation Systems to satisfy compliance with 12 VAC 5-408-290 and 12 VAC 5-408-300. A list of clinical outcome studies with abstracts of study design, objectives, and results. State the nationally recognized clinical performance evaluation system used.

20. The Policies and Procedures for Delegated Services to satisfy compliance with 12 VAC 5-408-310, 12 VAC 5-408-320, 12 VAC 5-408-330, and 12 VAC 5-408-340. Include a sample written agreement. List of contracted activities that provide medical care and/or services. Identify names of contractors and type of medical care and/or service provided.


VA.R. Doc. No. R99-16; Filed December 1, 1999, 9:29 a.m.
Extension of Public Comment Period

Title of Regulation: 12 VAC 5-610-10 et seq. Sewage Handling and Disposal Regulations.

The Department of Health suspended the regulatory process on 12 VAC 5-610-10 et seq. Sewage Handling and Disposal Regulations, in 16:2 VA.R. 202 October 11, 1999. Due to the suspension, the amendments as published in the August 16th issue of the Virginia Register did not become effective on October 1, 1999.

In conjunction with the suspension, the department solicited additional public comments until November 10, 1999. The Department of Health has received letters from individuals requesting the department to extend the comment period for the regulations. Therefore, the department will receive additional public comments until the close of business on January 19, 2000.

Agency Contact: Public comments may be submitted until January 19, 2000, to Don Alexander, Director, Virginia Department of Health, Division of Onsite Sewage and Water Services, PO Box 2448, Room 115, Richmond, VA 23218, telephone (804) 786-1750.

VA.R. Doc. No. R96-337; Filed December 1, 1999, 1:54 p.m.

TITLE 16. LABOR AND EMPLOYMENT

DEPARTMENT OF LABOR AND INDUSTRY

Safety and Health Codes Board

REGISTRAR’S NOTICE: The following regulations are exempt from the Administrative Process Act in accordance with § 9-6.14:4.1 C 4 (c) of the Code of Virginia, which excludes regulations that 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 Safety and Health Codes Board will receive, consider and respond to petitions by any interested person at any time with respect to reconsideration or revision.

16 VAC 25-130-1918 et seq. Federal Identical Longshoring Standards (amending 16 VAC 25-130-1918.1)

Statutory Authority: § 40.1-22(5) of the Code of Virginia.
Effective Date: January 20, 2000.

Summary:

The federal Occupational Safety and Health Administration (OSHA) stayed the compliance date for the new Powered Industrial Truck Operator Training Standard as it applies to employers in 29 CFR Part 1917 (Marine Terminal) and in 29 CFR Part 1918 (Longshoring) from December 1, 1999, until March 1, 2000. The compliance date of the standard for employers in General Industry, Shipyards and Construction remains December 1, 1999.

Until operators are trained and evaluated pursuant to the new standard, employers in the marine terminal and longshoring industries must remain in compliance with the preexisting powered industrial truck operator training requirements of 29 CFR 1917.27 (1998) for marine terminals (public sector only); and of 29 CFR 1918.98 (1998) for longshoring.

The new standard is made applicable to marine terminals by cross reference from 29 CFR 1917.1(a)(2)(xiv) and to longshoring by 29 CFR 1918.1(b)(10). These two paragraphs will be followed by a notice of the stay.

Agency Contact: Copies of the regulation may be obtained from Bonnie R. Hopkins, Department of Labor and Industry, 13 South 13th Street, Richmond, VA 23219, telephone (804) 371-2631.

Note on Incorporation by Reference

Pursuant to § 9-6.18 of the Code of Virginia, 29 CFR Parts 1917 and 1918 are declared documents generally available to the public and appropriate for incorporation by reference. For this reason the documents will not be printed in the Virginia Register of Regulations. Copies of the documents are available for inspection at the Department of Labor and Industry, 13 South 13th Street, Richmond, Virginia 23219, and in the office of the Registrar of Regulations, General Assembly Building, 9th and Broad Streets, Richmond, Virginia 23219.

On November 15, 1999, the Safety and Health Codes Board adopted an identical version of federal OSHA’s stay of compliance dates for the final rules for Powered Industrial Trucks Operator Training, which was published in 64 FR 46846 on August 27, 1999. The stay of compliance date is for the Marine Terminals Standard, Public Sector Only, 29 CFR 1917.1, and for Scope and Application, Longshoring, 29 CFR 1918.1. The date by which powered industrial truck operators must be trained was stayed from December 1, 1999, until March 1, 2000.

When the regulations, as set forth in the stay of compliance dates for the final rule for Powered Industrial Truck Operator Training, 29 CFR Parts 1917 and 1918, are applied to the Commissioner of the Department of Labor and Industry or to Virginia employers, the following federal terms shall be considered to read as follows:

Federal Terms VOSH Equivalent
29 CFR VOSH Standard
Assistant Secretary Commissioner of Labor and Industry
Final Regulations

Agency Department
August 27, 1999 January 20, 2000

Implementation Schedule for Marine Terminals and Longshoring Industries
March 1, 2000 March 1, 2000
November 30, 1999

Ms. Suzanne K. Lowman, Chairman
Virginia Safety and Health Codes Board
Department of Labor and Industry
13 South Thirteenth Street
Richmond, VA 23219

Attention: Bonnie R. Hopkins, Regulatory Coordinator

Dear Ms. Lowman:

This office has received the Powered Industrial Truck Operator Training, Final Rule, 29 CFR Parts 1917 and 1918, stay of compliance dates, submitted by the Department of Labor and Industry on November 18, 1999.

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,

Jane D. Chaffin
Registrar of Regulations

VA.R. Doc. No. R00-49 Filed November 18, 1999, 9:43 a.m.
Governing the Practice of Dentistry and Dental Hygiene (amending 18 VAC 60-20-20 and 18 VAC 60-20-30).


Effective Date: January 19, 2000.

Summary:

The amendments establish application and renewal fees for dentists and dental hygienists who hold a restricted volunteer license under the provisions of §§ 54.1-2712.1 and 54.1-2726.1 of the Code of Virginia. Amendments comply with statutory provisions of House Bill 1023 (Chapter 326 of the 1998 Acts of Assembly). House Bill 1023 had an enactment clause requiring the Board of Dentistry to promulgate emergency regulations; this regulation replaces the emergency regulations.

Summary of Public Comments and Agency’s Response: No public comments were received by the promulgating agency.

Agency Contact: Copies of the regulation may be obtained from Marcia J. Miller, Department of Health Professions, 6606 West Broad Street, 4th Floor, Richmond, VA 23230-1717, telephone (804) 662-9906.

18 VAC 60-20-20. License renewal and reinstatement.

A. Renewal fees. Every person holding an active or inactive license or a full-time faculty license, or a restricted volunteer license to practice dentistry or dental hygiene shall, on or before March 31, renew his license. Every person holding a teacher’s license or a temporary permit to practice dentistry or dental hygiene shall, on or before June 30, renew his license.

1. The fee for renewal of an active license or permit shall be $100 for dentists and $40 for dental hygienists.
2. The fee for renewal of an inactive license shall be $65 for dentists and $25 for dental hygienists.
3. The fee for renewal of a restricted volunteer license shall be $15.

B. Penalty fees. Any person who does not return the completed form and fee by the deadline required in subsection A of this section shall be required to pay an additional penalty fee of $50 for dentists and $35 for dental hygienists. The board shall renew a license if the renewal form, renewal fee, and penalty fee are received within 30 days of the deadline required in subsection A of this section.

C. Reinstatement fees and procedures. The license of any person who does not return the completed renewal form and fees within 30 days of the deadline required in subsection A of this section shall automatically expire and become invalid and his practice of dentistry/dental hygiene shall be illegal. Upon such expiration, the board shall immediately notify the affected person of the expiration and the reinstatement procedures.

1. Any person whose license has expired who wishes to reinstate such license shall submit to the board a reinstatement application, the renewal fee and the penalty fee of $50 for dentists and $35 for dental hygienists per month for each month or part of a month the license has been expired for a maximum amount of $600 for dentists and $420 for dental hygienists.
2. Practicing in Virginia with an expired license may subject the licensee to disciplinary action and additional fines by the board.
3. The executive director shall reinstate such expired license provided that the applicant can demonstrate continuing competence, that no grounds exist pursuant to § 54.1-2706 of the Code of Virginia and 18 VAC 60-20-170 to deny said reinstatement, and that the applicant has paid all unpaid renewal fees and assessments.

D. Reinstatement of a license previously revoked or indefinitely suspended. Any person whose license has been revoked shall submit to the board for its approval a reinstatement application and fee of $750 for dentists and $500 for dental hygienists. Any person whose license has been indefinitely suspended shall submit to the board for its approval a reinstatement application and fee of $350 for dentists and $250 for dental hygienists.

18 VAC 60-20-30. Other fees.

A. Dental licensure application fees. The application fee for a dental license, a license to teach dentistry, or a temporary permit as a dentist shall be $225.

B. Dental hygiene licensure application fees. The application fee for a dental hygiene license by examination, a license to teach dental hygiene, or a temporary permit as a dental hygienist shall be $160.

C. Duplicate wall certificate. Licensees desiring a duplicate wall certificate shall submit a request in writing stating the necessity for such duplicate wall certificate, accompanied by a fee of $15.

D. Duplicate license. Licensees desiring a duplicate license shall submit a request in writing stating the necessity for such duplicate license, accompanied by a fee of $10. If a licensee maintains more than one office, a notarized photocopy of a license may be used.

E. Licensure certification. Licensees requesting endorsement or certification by this board shall pay a fee of $25 for each endorsement or certification.

F. Restricted license. Restricted license issued in accordance with § 54.1-2714 of the Code of Virginia shall be at a fee of $100.

G. Examination. Each examination administered by the board shall be at a fee of $25.
H. Endorsement license. License by endorsement issued in accordance with 18 VAC 60-20-80 for dental hygienists shall be at a fee of $225.

I. Restricted volunteer license. The application fee for licensure as a restricted volunteer dentist or dental hygienist issued in accordance with § 54.1-2712.1 or § 54.1-2726.1 of the Code of Virginia shall be $25.

NOTICE: The forms used in administering 18 VAC 60-20-10 et seq., Regulations Governing the Practice of Dentistry and Dental Hygiene, are listed below. Any amended or added forms are reflected in the listing and are published following the listing.

FORMS

Outline and Explanation of Documentation Required for Dental Licensure by Exam, Teacher's License, Restricted License, Full Time Faculty License, and Temporary Permit (eff. 11/98).

Application for Licensure to Practice Dentistry (eff. 3/98).

Application for Restricted Volunteer Licensure to Practice Dentistry and Dental Hygiene (eff. 7/7/98).

Form A, Certification of Dental/Dental Hygiene School (rev. 3/98).

Form AA, Sponsor Certification for Dental/Dental Hygiene Volunteer License (eff. 7/98).

Form B, Chronology (rev. 3/98).

Form C, Certification of Dental/Dental Hygiene Boards (rev. 3/98).

Outline and Explanation of Documentation Required for Dental Hygiene Licensure by Exam, Teacher's License, Dental Hygiene by Endorsement, and Dental Hygiene Temporary Permit (rev. 11/98).

Application for Licensure to Practice Dental Hygiene (rev. 3/98).

Reinstatement Application for Dental/Dental Hygiene Licensure (rev. 3/98).

Expiration letter to licensee (rev. 7/98).

Radiology Information for Dental Assistants (rev. 7/97).

Application for Radiology Exam for Dental Assistants (rev. 7/97).

Renewal Notice and Application (rev. 9/97).
APPLICATION FOR RESTRICTED VOLUNTEER LICENSURE TO PRACTICE
DENTISTRY AND DENTAL HYGIENE

[ ] DENTISTRY RESTRICTED VOLUNTEER LICENSE
[ ] DENTAL HYGIENIST RESTRICTED VOLUNTEER LICENSE

INSTRUCTIONS: Use typewriter or print clearly. If the space provided for any answer is insufficient, the applicant must continue the answer on a separate page, signed by himself, specifying the number of the question to which it relates and enclose the page with this application. OMISSIONS OR INACCURACIES ARE GROUNDS FOR REJECTION.

I. APPLICANT PROFILE DATA

<table>
<thead>
<tr>
<th>Name (Last, First, M.I., Spouse, Maiden Name)*</th>
<th>Social Security Number or D.M.V. Number</th>
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<tr>
<td>Date of Birth</td>
<td>Place of Birth</td>
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<tr>
<td>Mailing Address (Street and/or Box Number, City, State, Zip Code)**</td>
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<tr>
<th>Graduation Date (M.D.V.)</th>
<th>Degree</th>
<th>Professional School City/State</th>
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Area Code and Home Telephone Number

FOR OFFICE USE ONLY

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<tr>
<th>Date Received</th>
<th>Certification (License from other states) (Form C or valid from states)</th>
<th>Number</th>
<th>Pending</th>
<th>License</th>
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July 7, 1993

Page 1
Final Regulations
FORM AA

COMMONWEALTH OF VIRGINIA
Virginia Board of Dentistry
Department of Health Professions
6606 West Broad Street, 4th Floor
Richmond, Virginia 23230-7717
(804) 662-9906

SPONSOR CERTIFICATION FOR DENTAL/DENTAL HYGIENE VOLUNTEER LICENSE

APPLICANT: THIS FORM IS TO BE COMPLETED BY THE LICENSED VIRGINIA DENTIST WHO WILL SPONSOR/SUPERVISE.

SPONSOR CERTIFICATION FOR: DENTAL VOLUNTEER LICENSE ____________________________

DENTAL HYGIENE VOLUNTEER LICENSE ____________________________

SPONSOR - Please complete and return to the Board Office.

PRINT CLEARLY OR TYPE:

1. ____________________________ hereby certify that I will:

   (Name of Sponsor)

   1. Sponsor/Supervisor ____________________________ to practice in a public health or community free clinic ____________________________ on only those persons who have been screened by ____________________________ the approved clinic and are eligible for treatment.

   (Name of Volunteer)

   (Name of Clinic)

2. Review the quality of care rendered by ____________________________ at least every 30 days.

   (Name of Volunteer Dentist)

   ____________________________

   Signature of Sponsor/Supervisor

   ____________________________

   Virginia License Number
BOARD OF FUNERAL DIRECTORS AND EMBALMERS

Title of Regulation: 18 VAC 65-20-10 et seq., Regulations of the Board of Funeral Directors and Embalmers (amending 18 VAC 65-20-70, 18 VAC 65-20-120, and 18 VAC 65-20-130; adding 18 VAC 65-20-435).


Effective Date: January 19, 2000.

Summary:
The amendments establish a registration program for crematories, which includes application and renewal fees and a registration schedule. The regulations also specify that a crematory providing services directly to the public must be additionally licensed as a funeral service establishment or as a branch of an establishment. An amendment was made to the proposed regulation giving the board the authority to take disciplinary action against a crematory in violation of law or regulation.

Summary of Public Comments and Agency’s Response: A summary of public comments and the agency’s response may be obtained from the promulgating agency or viewed at the office of the Registrar of Regulations.

Agency Contact: Elizabeth Young Tisdale, Department of Health Professions, 6606 West Broad Street, 4th Floor, Richmond, VA 23220-1717, telephone (804) 662-9111.

18 VAC 65-20-70. Required fees.

A. The following fees shall apply for initial licensure or registration and for renewal of licensure or registration:

1. License to practice funeral service or as a funeral director or an embalmer $150;
2. Funeral service establishment license $225;
3. Surface transportation and removal service registration $250;
4. Courtesy card $100;
5. Crematory $100

B. Other fees.

1. Reinstatement fee for each year of licensure or registration expiration $50 per year;
2. Change of manager or establishment name $50;
3. Verification of license or registration to another state $50;
4. Duplicate license, registration, or courtesy card $25;
5. Duplicate wall certificates $50;
6. Change of ownership $100

7. Reinspection for change of location or ownership $100

18 VAC 65-20-120. Expiration dates.

A. A funeral service establishment license, crematory registration, or surface transportation and removal service registration shall expire on January 31 of each calendar year.

B. The funeral service license, funeral director license, or embalmer license shall expire on March 31 of each calendar year.

C. Courtesy cards expire on December 31 of each calendar year.

18 VAC 65-20-130. Renewal of license; registration.

A. A person, establishment, crematory, courtesy card holder or surface transportation and removal service that desires to renew its license or registration for the next year shall, not later than the expiration date as provided in 18 VAC 65-20-120, submit the renewal application and applicable fee.

B. A person who or establishment entity which fails to renew a license, registration, or courtesy card by the expiration dates prescribed in 18 VAC 65-20-120 shall be deemed to have an invalid license, registration, or courtesy card and continued practice may subject the licensee to disciplinary action by the board.

PART IV.
REGISTRATION.

18 VAC 65-20-435. Registration of crematories.

A. At least 30 days prior to opening a crematory, any person intending to own or operate a crematory shall apply for registration with the board by submitting a completed application and fee as prescribed in 18 VAC 65-20-70.

B. A crematory providing cremation services directly to the public shall also be licensed as a funeral service establishment or shall be a branch of a licensed establishment.

[ C. The board may take disciplinary action against a crematory registration for a violation of § 54.1-2818.1 of the Code of Virginia or for the inappropriate handling of dead human bodies or cremains. ]

NOTICE: The forms used in administering 18 VAC 65-20-10 et seq., Regulations of the Board of Funeral Directors and Embalmers, are listed below. Any amended or added forms are reflected in the listing and are published following the listing.

FORMS

Application for Funeral Service Licensure (rev. 7/1/98).
Application for Courtesy Card (rev. 7/1/98).
Application for Establishment Licensure/Change of Address (rev. 7/1/98).
Application for Waiver of Full-time Manager Requirements (rev. 7/1/98).
Final Regulations

Application for Cremator Registration (rev. 2/4/99).
Renewal Application for Waiver of Full-time Manager Requirements (rev. 12/1/98).
Licensure Verification Form (rev. 7/97).
Application for Surface Transportation and Removal Service Registration (rev. 7/1/98).
Renewal Notice and Application, C-45128 (rev. 7/97).
Appendix I: General Price List (rev. 11/17/98).
Appendix IV: Embalming Record (rev. 11/17/98).
**Application for Cremona Registration**

**Commonwealth of Virginia**
**Department of Health Professions**
**Board of Funeral Directors and Embalmers**
6606 W. Broad Street, 4th Floor
Richmond, Virginia 23230-1717

**Application for Cremona Registration**

---

**Disclosure of Social Security or Virginia BMV Control Number.** In accordance with § 54.1-116 of the Code of Virginia, you are required to submit your Social Security Number or your control number issued by the Virginia Department of Motor Vehicles. If you fail to do so, the processing of your application will be suspended and fees will not be refunded. This number will be used by the Department of Health Professions for identification and will not be disclosed for other purposes except as provided for by law. Federal and state law requires that this number be shared with other agencies for child support enforcement activities. NO LICENSE, CERTIFICATION OR REGISTRATION WILL BE ISSUED TO ANY INDIVIDUAL WHO HAS FAILED TO DISCLOSE ONE OF THESE NUMBERS. In order to obtain a Virginia driver’s license control number, it is necessary to appear in person at an office of the Department of Motor Vehicles in Virginia. A fee and disclosure of your Social Security Number will be required.

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### Relevant Information

**Name of Applicant**

<table>
<thead>
<tr>
<th>Name of Applicant</th>
<th>Address</th>
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<td>First</td>
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**Name of Other than Business Entity**

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<th>Name of Other than Business Entity</th>
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**Primary Address Information**

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**Secondary Address Information**

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<thead>
<tr>
<th>Owner</th>
<th>Address</th>
</tr>
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<tbody>
<tr>
<td>First</td>
<td>Last</td>
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</table>

**Business Information**

1. Is this business licensed as a funeral establishment? Yes No
   
   Give name and license number of funeral establishment:

2. Will this business arrange and/or conduct funerals? Yes No

3. Will this business offer to or provide for the care or preparation including embalming of dead human bodies? Yes No

4. Will this business sell or provide funeral-related goods and services? Yes No

5. Will this business have personnel licensed by the Board of Funeral Directors and Embalmers as staff members? Yes No If yes, what are the names:

---

**Notary Public**

Signature of Applicant

Signature of Co-Applicant

Signature of Manager

Date of Certification expires

Seal

Revised: 02/04/99

Final Regulations

BOARD OF MEDICINE

Title of Regulation: 18 VAC 85-20-10 et seq. Regulations Governing the Practice of Medicine, Osteopathy, Podiatry, Chiropractic, and Physician Acupuncture (adding 18 VAC 85-20-280, 18 VAC 85-20-290, and 18 VAC 85-20-300).


Effective Date: January 19, 2000.

Summary:

The amendments establish a physician/podiatrist profile system by which information on the education, practice and disciplinary actions of physicians will be available to the public. The regulations specify the information which a physician or podiatrist is required to report and provide that failure to comply with a request for information may subject the licensee to a disciplinary action. Willfully providing false information will subject a physician or podiatrist to disciplinary action and may jeopardize his license to practice.

Changes to the proposed regulatory action include: (i) adding podiatrists to the requirements for reporting certain information; (ii) specifying that the reporting physician or podiatrist should also indicate whether he is accepting new patients for the insurance plans, health maintenance organizations or Virginia Medicaid Program in which he participates; and (iii) specifying that the board will make information on disciplinary actions available in the profile.

Summary of Public Comments and Agency's Response: A summary of comments made by the public and the agency's response may be obtained from the promulgating agency or viewed at the office of the Registrar of Regulations.

Agency Contact: Copies of the regulation may be obtained from Warren W. Koontz M.D., Department of Health Professions, 6606 West Broad Street, 4th Floor, Richmond, VA 23230-1717, telephone (804) 662-9908.

PART VII.
PRACTITIONER PROFILE SYSTEM.


A. In compliance with requirements of § 54.1-2910.1 of the Code of Virginia, a doctor of medicine or osteopathy [or a doctor of podiatry] licensed by the board shall provide, upon initial request, the following information within 30 days:

1. The address of the primary practice setting and all secondary practice settings with the percentage of time spent at each location;
2. Names of medical [or osteopathic] [or podiatry] schools and graduate medical [or podiatric] education programs attended with dates of graduation or completion of training;
3. Names and dates of specialty board certification, if any, as approved by the American Board of Medical Specialties [or,] the American Board of Osteopathic Medical Specialties [or,] or the American Board of Podiatric Surgery;
4. Number of years in active, clinical practice in the United States or Canada following completion of medical [or podiatric] training and the number of years, if any, in active, clinical practice outside the United States or Canada;
5. The specialty [or] in which the physician [or podiatrist] practices;
6. Names of insurance plans accepted or managed care plans in which the physician [or podiatrist] participates [and whether he is accepting new patients under such plans];
7. Names of hospitals with which the physician [or podiatrist] is affiliated;
8. Appointments within the past 10 years to medical [or podiatry] school faculties with the years of service and academic rank;
9. Publications, not to exceed 10 in number, in peer-reviewed literature within the most recent five-year period [and];
10. Whether there is access to translating services for non-English speaking patients at the primary practice setting [and] and which, if any, foreign languages are spoken in the practice; and
11. Whether the physician [or podiatrist] participates in the Virginia Medicaid Program [and whether he is accepting new Medicaid patients].

B. The physician [or podiatrist] may provide additional information on hours of continuing education earned, subspecialties obtained, and honors or awards received.

C. After the initial request for information, the licensee shall provide to the board within 30 days, current information in any of the above categories. Whenever there is a change in the information on record with the physician profile system [or,] the practitioner shall provide current information in any of the categories in subsection A of this section within 30 days of such change.

18 VAC 85-20-290. Reporting of malpractice paid claims [and board actions].

A. All malpractice paid claims reported to the Board of Medicine within the 10 years immediately preceding the report shall be used to calculate the level of significance as required by § 54.1-2910.1 of the Code of Virginia. Each report of an award or settlement shall indicate:
1. The number of years the physician [or podiatrist] has been licensed in Virginia.
2. The specialty in which the physician [or podiatrist] practices.
3. The relative frequency of paid claims described in terms of the number of physicians [or podiatrists] in each specialty and the percentage who have made malpractice payments within the 10-year period.

4. The date of the paid claim.

5. The relative amount of the paid claim described as average, below average or above average, which shall be defined as follows:

   a. “Average” if the amount of the award is within one standard deviation above or below the mean for the amount of all reported claims for physicians [or podiatrists] who share the same specialty as the subject of the report;

   b. “Below average” if the amount of the award is below one standard deviation from the mean for the amount of all reported claims for physicians [or podiatrists] who share the same specialty as the subject of the report; and

   c. “Above average” if the amount of the award is above one standard deviation from the mean for the amount of all reported claims for physicians [or podiatrists] who share the same specialty as the subject of the report.

[B. The board shall make available as part of the profile information regarding disciplinary notices and orders as provided in § 54.1-2400.2 D of the Code of Virginia.]

18 VAC 85-20-300. Noncompliance or falsification of profile.

A. The failure to provide the information required by subsection A of 18 VAC 85-20-280 within 30 days of the request for information by the board may constitute unprofessional conduct and may subject the licensee to disciplinary action by the board.

B. Intentionally providing false information to the board for the physician profile system shall constitute unprofessional conduct and shall subject the licensee to disciplinary action by the board.

NOTICE: The forms used in administering 18 VAC 85-20-10 et seq., Regulations Governing the Practice of Medicine, Osteopathy, Podiatry, Chiropractic, and Physician Acupuncture, are listed below. Any amended or added forms are reflected in the listing and are published following the listing.

FORMS

Instructions for Completing FLEX or USMLE Endorsement Application; American Graduates--revised May, 1997.

Instructions for Completing FLEX or USMLE Endorsement Application; Non-American Graduates--revised June, 1997.

Instructions for Completing PMLEXIS Examination Application--revised May, 1997.

Instructions for Completing Chiropractic Endorsement Application--revised May, 1997.

Instructions for Completing Podiatry Endorsement application--revised May, 1997.

Instructions for Completing LMCC Endorsement Application; Canadian/American Graduates--revised May, 1997.

Instructions for Completing LMCC Endorsement Application; Non-American Graduates--revised June, 1997.


Instructions for Completing Other Boards Endorsement Application; American Graduates--revised May, 1997.

Instructions for Completing Other Boards Endorsement Application; Non-American Graduates--revised June, 1997.

Form #A, Claims History Sheet--revised June, 1997.

Form #B, Activity Questionnaire--revised June, 1997.

Form #C, Clearance from Other State Boards--revised June, 1997.

Form #D, Virginia Request for Physician Profile--revised June, 1997.


Form #H, Certification of Grades Attained on the Podiatric Medical Licensing Examination for States (PMLEXIS)--revised June, 1997.

Form #I, National Board of Podiatric Medical Examiners Request for Scores on Part I and II--revised June, 1997.

Intern/Resident Form #A, Memorandum from Associate Dean of Graduate Medical Education--revised July, 1997.


Instructions for Completing an Application for a Limited License to Practice Medicine as a Full-time Faculty Member or as a Full-time Fellow--revised January, 1998.

Form DHP-030-056, Application for a Limited License to Practice Medicine as a Full-time Faculty Member or as a Full-time Fellow--revised January, 1998.


Instructions for Licensure to Practice as a Physician Acupuncturist--revised March, 1997.


Final Regulations

Virginia Physician Profile--revised [July, 1999 November, 1999].

[Virginia Podiatrist Profile - revised November, 1999.]
**VIRGINIA PHYSICIAN PROFILE**

| Licensure Name: |
| Licensure Status: Active (See disciplinary action) |
| License #: Medical Doctor 0101, Osteopathic Doctor 0202 |

* Primary Practice Address: Street, City, State, Zip Approximate % Time at Location: Variable

* Secondary Practice Address: Street, City, State, Zip Approximate % Time at each location:
  1. 
  2. 
  3. 
  4. 
  5. 
  6. 

☐ Please confirm current office hours.

Original License Date: Month Day Year

License Expiration Date: Month Day Year

Education:
- Medical (osteopathic) school Degree Year Obtained

* Graduate Medical Education
  - Years of graduate medical education Specialty Residency Fellowship

* Board Certification (ABMS or ABOMS approved)
  - Name of Board Date originally certified None

* Number of Years in Active Clinical Practice
  - (Post-training in the United States or Canada)

* Specialty area in which the physician practices
- Allergy and immunology
- Anesthesiology
- Colon and rectal surgery
- Dermatology
- Emergency medicine
- Family practice
- General medicine
- Internal medicine
- Medical genetics
- Neurological surgery
- Neurology
- Nuclear medicine
- Obstetrics and gynecology
- Gynecology only
- Ophthalmology

* Insurance or Managed Care Plans Accepted
  - Name(s)
  1. Accepting new patients under the plan? YES ☐ NO ☐
  2. YES ☐ NO ☐
  3. YES ☐ NO ☐
  4. YES ☐ NO ☐
  5. YES ☐ NO ☐
  6. YES ☐ NO ☐
  7. YES ☐ NO ☐
  8. YES ☐ NO ☐
  9. YES ☐ NO ☐
  10. YES ☐ NO ☐

* Hospital Affiliations
  1. 
  2. 
  3. 

* Medical School Faculty Appointment(s)
  - Years
  - Academic Rank
  - Institution

* Publications in last five years (up to 10)
  - Author(s)
  - Title
  - Publication Volume Page Year

* Publications (HTML Links)
**Virginia Podiatrist Profile**

Licensure Name: 

Licensure Status: Active (See disciplinary action)

License #: Pediatric Doctor 0103

* Primary Practice Address: Street, City, State, Zip
  Approximate % Time at Location
  Variable

* Secondary Practice Address: Street, City, State, Zip
  Approximate % Time at each location
  1. 
  2. 
  3. 
  4. 
  5. 
  6. 

☐ Please confirm current office hours.

Original License Date: Month Day Year

License Expiration Date: Month Day Year

Education
  Pediatric school
  Degree
  Year Obtained

* Graduate Podiatric Education
  Years of graduate podiatric education
  Specialty
  Residency
  Fellowship

*Board Certification (American Board of Podiatric Surgery)
  Yes ☐
  Date originally certified _____________ No ☐

* Number of Years in Active Clinical Practice
  (Post-training in the United States or Canada) _____________
  (Post-training outside the United States or Canada) _____________

* These items have been self-reported by the practitioner and can be changed by the practitioner.

* Access to Translating Services
  YES ☐ NO ☐
  Call office for details ☐ Foreign language (s) spoken in the practice

* Virginia Medicaid Accepted
  YES ☐ NO ☐ Call office for details ☐
  Physician is accepting new Medicaid patients

Practice Information (last 10 years)

<table>
<thead>
<tr>
<th>Amount</th>
<th>Date</th>
<th>Final Disciplinary Action:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Paid</td>
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<tr>
<td>Judgment</td>
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<tr>
<td>Settlement</td>
<td>2.</td>
<td></td>
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<tr>
<td>Average</td>
<td></td>
<td></td>
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<tr>
<td>Below Average</td>
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</table>

Number of practitioners with the same specialty intact:

% with paid claims:

Final Disciplinary Action:

<table>
<thead>
<tr>
<th>Event Taking action</th>
<th>Date</th>
<th>Final Action</th>
</tr>
</thead>
<tbody>
<tr>
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<td></td>
<td></td>
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<tr>
<td>2.</td>
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</table>

* Additional Information on Practitioner Competence

Continuing Education
Subspecialties
Honors
Awards

rev. 11/99
<table>
<thead>
<tr>
<th>Paid</th>
<th>Judgment</th>
<th>Settlement</th>
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<th>Amount</th>
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<tr>
<td>Above</td>
</tr>
<tr>
<td>Average</td>
</tr>
<tr>
<td>Below</td>
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</tbody>
</table>

| Number of practitioners with this same specialty in state:
| % with paid claims: |

<p>| Final Disciplinary Action: |</p>
<table>
<thead>
<tr>
<th>Entity Taking action</th>
<th>Date</th>
<th>Final Action</th>
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</tbody>
</table>

* Additional Information on Practitioner Competence
  - Continuing Education
  - Subspecialties
  - Honors
  - Awards

* These items have been self-reported by the practitioner and can be changed by the practitioner.

---

* Specialty area in which the podiatrist practices (please list)

1.  
2.  

* Insurance or Managed Care Plans Accepted

<table>
<thead>
<tr>
<th>Name(s)</th>
<th>Accepting new patients under the plan?</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>YES NO</td>
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<tr>
<td>2.</td>
<td>YES NO</td>
</tr>
<tr>
<td>3.</td>
<td>YES NO</td>
</tr>
<tr>
<td>4.</td>
<td>YES NO</td>
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<tr>
<td>5.</td>
<td>YES NO</td>
</tr>
<tr>
<td>6.</td>
<td>YES NO</td>
</tr>
<tr>
<td>7.</td>
<td>YES NO</td>
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<td>8.</td>
<td>YES NO</td>
</tr>
<tr>
<td>9.</td>
<td>YES NO</td>
</tr>
<tr>
<td>10.</td>
<td>YES NO</td>
</tr>
</tbody>
</table>

None

* Hospital Affiliations

1.  
2.  
3.  
4.  

* Pediatric School Faculty Appointment(s)
  - Years
  - Academic Rank
  - Institution

* Publications in last five years (up to 10)

<table>
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<tr>
<th>Author(s)</th>
<th>Title</th>
<th>Publication</th>
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<tr>
<th>Volume</th>
<th>Page</th>
<th>Year</th>
</tr>
</thead>
</table>

* Access to Translating Services

Call office for details

Foreign language spoken in practice

* Virginia Medicaid Accepted

Call office for details

Podiatrist is accepting new Medicaid patients

Malpractice Information (last 10 years)

rev. 1/99

Statutory Authority: § 54.1-2400 and Chapter 29 (§ 54.1-2900 et seq.) of Title 54.1 of the Code of Virginia.

Effective Date: January 19, 2000.

Summary:
Chapter 557 of the 1998 Acts of Assembly requires the board to promulgate regulations for the licensure of respiratory care practitioners. These amendments replace the emergency regulations that are currently in effect. The amendments (i) reorganize the application, education, and examination requirements; (ii) require an active practice for licensure renewal; (iii) clarify the requirements for reinstating a lapsed license; (iv) increase the penalty fee for late renewals from $10 to $25; and (v) add fees of $500 for reinstatement of a revoked license, $10 for a duplicate license, and $25 for a duplicate wall certificate.

Summary of Public Comments and Agency’s Response: A summary of comments made by the public and the agency’s response may be obtained from the promulgating agency or viewed at the office of the Registrar of Regulations.

Agency Contact: Warren W. Koontz, M.D., Department of Health Professions, 6606 West Broad Street, 4th Floor, Richmond, VA 23230-1717, telephone (804) 662-9908.

A. The following words and terms when used in this chapter shall have the meanings ascribed to them in § 54.1-2900 of the Code of Virginia:

Board
Qualified medical direction

B. The following words and terms when used in this chapter shall have the following meanings, unless the context clearly indicates otherwise:

“Accredited educational program” means a program accredited by the Committee on Accreditation for Respiratory Care or any other agency approved by the NBRC for its entry level certification examination.

“Active practice” means a minimum of 160 hours of professional practice as a respiratory care practitioner within the 24-month period immediately preceding renewal or application for licensure if previously licensed or certified in another jurisdiction. The active practice of respiratory care may include supervisory, administrative, educational or consultative activities or responsibilities for the delivery of such services.

“Advisory board” means the Advisory Board on Respiratory Care to the Board of Medicine as specified in § 54.1-2956 of the Code of Virginia.

“NBRC” means the National Board for Respiratory Care, Inc.

“Respiratory care practitioner” means a person as specified in § 54.1-2954 of the Code of Virginia.

18 VAC 85-40-25. Current name and address.
Each licensee shall furnish the board his current name and address. All notices required by law or by this chapter to be given by the board to any such licensee shall be validly given when mailed to the latest address provided or served to the licensee. Any change of name or address shall be furnished to the board within 30 days of such change.

PART II.
REQUIREMENTS FOR PRACTICE LICENSURE AS A LICENSED RESPIRATORY CARE PRACTITIONER.

18 VAC 85-40-40. General Application requirements.
A. No person shall practice as a licensed respiratory care practitioner in the Commonwealth except as provided in this chapter.

B. All services rendered by a licensed respiratory care practitioner shall be performed only upon written or verbal orders from a qualified practitioner and under qualified medical direction.

An applicant for licensure shall submit the following on forms provided by the board:

1. A completed application and a fee as prescribed in 18 VAC 85-40-80.

2. Verification of professional education in respiratory care as required in 18 VAC 85-40-45.

3. Verification of practice as required on the application form.


5. If licensed or certified in any other jurisdiction, documentation of active practice as a respiratory care practitioner and verification that there has been no disciplinary action taken or pending in that jurisdiction.

18 VAC 85-40-45. Educational requirements.
An applicant for licensure shall:

1. Be a graduate of an accredited educational program for respiratory care practitioners; or

2. Hold current credentialing as [ a Certified Respiratory Therapy Technician (CRTT), ] a Certified Respiratory Therapist (CRT) or a Registered Respiratory Therapist (RRT) from the NBRC.

18 VAC 85-40-50. Licensure Examination requirements.
An applicant for a license to practice as a licensed respiratory care practitioner shall—submit to the board
written evidence, verified by affidavit, that the applicant has passed the NBRC entry level examination for respiratory care, or its equivalent; as approved by the board.

2. Make application on forms supplied by the board and completed in every detail; and
3. Pay the application fee prescribed in 18 VAC 85-40-80 at the time the application is filed.

PART III.
RENEWAL AND REINSTATEMENT.

18 VAC 85-40-60. Renewal of license.

A. Every licensed respiratory care practitioner intending to continue his licensure shall biennially in each odd-numbered year in his birth month:

1. Register with the board for renewal of his license; and
2. Pay the prescribed renewal fee at the time he files for renewal; and
3. Engage in active practice as defined in 18 VAC 85-40-10.

B. A respiratory care practitioner whose licensure has not been renewed by the first day of the month following the month in which renewal is required shall pay a late fee as prescribed in 18 VAC 85-40-80.


A. In order to reinstate a license which has been lapsed for more than two years, a respiratory care practitioner shall file an application for reinstatement, pay the fee for reinstatement of his licensure as prescribed in 18 VAC 85-40-80, and submit to the board evidence of competency to practice. The board may specify additional requirements for reinstatement of a license so lapsed to include education, experience or reexamination.

B. A respiratory care practitioner whose licensure has been revoked by the board and who wishes to be reinstated shall make a new application to the board and payment of the fee for reinstatement of his licensure as prescribed in 18 VAC 85-40-80 pursuant to § 54.1-2921 of the Code of Virginia.

PART IV.
SCOPE OF PRACTICE.

PART V.
FEES.

18 VAC 85-40-80. Fees.

The following fees are required:

1. The application fee, payable at the time the application is filed, shall be $100.
2. The biennial fee for renewal of licensure shall be $50, payable in each odd-numbered year in the license holder's birth month.
3. An additional fee to cover administrative costs for processing a late application may be imposed by the board. The additional fee for late renewal of licensure shall be $40 $25 for each renewal cycle.

4. Lapsed license. The fee for reinstatement of a license issued by the Board of Medicine pursuant to § 54.1-2904 of the Code of Virginia, which has expired for a period of two years or more, shall be $100 and must be submitted with an application for licensure reinstatement.

5. The fee for reinstatement of a revoked license shall be $500.

6. The fee for a duplicate license shall be $10, and the fee for a duplicate wall certificate shall be $25.

NOTICE: The forms used in administering 18 VAC 85-40-10 et seq., Regulations Governing the Practice of Respiratory Care Practitioners, are listed below. Any amended or added forms are reflected in the listing and are published following the listing.

FORMS

Instructions for Completing a Respiratory Care Practitioner Application (rev. 7/98 2/99).

Application for a License to Practice as a Respiratory Care Practitioner (rev. 7/98 2/99).

Application for Reinstatement as a Respiratory Care Practitioner (eff. 7/98).

Form #A, Claims History Sheet (rev. 7/98).

Form #B, Activity Questionnaire (rev. 7/98).

Form #C, Clearance from Other State Boards (rev. 7/98).

Form #L, Certificate of Professional Education (rev. 2/99).

Verification of Certification Request Form (NBRTC) (rev. 7/98).

Renewal Notice and Application (rev. 7/97).
INSTRUCTIONS FOR COMPLETING A RESPIRATORY CARE PRACTITIONER APPLICATION
(This form has been designed to be used as a checklist for submitted required documentation.)

☐ 1. The licensure application: Follow the instructions provided on the application. The application may not be copied. Any portion submitted in other than its original form will be considered void and will hold up the application processing time.

☐ 2. Licensure fee: A check or money order for $100.00, made payable to the Treasurer of Virginia should be attached to the application. Applications received without a fee and fees submitted without an application attached will be returned to the sender. NO EXCEPTIONS.

☐ 3. Proof of Professional Education - (Form #L) This form must be completed by your professional school as directed.

☐ 4. Form A: If you answered yes to question #14 on page three of the application, either have your attorney submit a letter regarding the malpractice suits or complete one of these forms for each case you have been involved in.

☐ 5. Form B: Forward form #1B (Employment Questionnaire) to all places of employment listed on the chronological page of your application for the last 5 years. This form may be copied as necessary.

☐ 6. Form C: Forward form #1C (State Clearance) to all states in which you have been licensed, certified or registered. This form may be copied as necessary. Please contact the applicable states to inquire about processing fees.

☐ 7. Certification of Credentials from NBRC: Certification should be requested from:

   National Board of Respiratory Care, Inc.
   8310 Nieman Road
   Lenexa, Kansas 66214
   (913) 590-4200

Also, please note the following:

- Fixed information is not acceptable.
- All documents must be original or hard copies.
- Applications not completed within a six month time period will be purged.
- Application fees are non-refundable.
- Address changes must be furnished to the board in writing.

---

<table>
<thead>
<tr>
<th>COMMONWEALTH OF VIRGINIA</th>
</tr>
</thead>
<tbody>
<tr>
<td>Board of Medicine</td>
</tr>
</tbody>
</table>

Application for a License to Practice as a Respiratory Care Practitioner

To the Board of Medicine of Virginia:

I hereby make application for a license to practice Respiratory Care in the Commonwealth of Virginia and submit the following statement:

1. Name in Full (Please Print or Type):

<table>
<thead>
<tr>
<th>Last</th>
<th>First</th>
<th>Middle</th>
</tr>
</thead>
</table>

Street
City
State
ZIP Code

Date of Birth
Place of Birth
Social Security No. or VA Control No.*

<table>
<thead>
<tr>
<th>Sex</th>
<th>Graduation Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>M</td>
<td>#/##/##</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>School Degree</th>
<th>School, City, State</th>
</tr>
</thead>
</table>

| MAIDEN NAME | |
|-------------| |

Please submit address changes in writing immediately.

Please attach check or money order. Application will not be processed without the fee. It will be returned. Do not submit fee without an application. IT WILL BE RETURNED.

APPROVED BY

<table>
<thead>
<tr>
<th>CLASS</th>
<th>LICENSE NUMBER</th>
<th>SUFFIX</th>
<th>SCHOOL CODE</th>
<th>FEE</th>
<th>HTQ REG.</th>
<th>BASE STATE</th>
</tr>
</thead>
</table>

*In accordance with 18.1-711.1, Code of Virginia, you are required to submit your Social Security Number or your control number** issued by the Virginia Department of Motor Vehicles. If you fail to do so, the processing of your application will be suspended and fees will not be refunded. This number will be used by the Department of Motor Vehicles for identification and will not be disclosed for other purposes except as provided by law. Federal and state laws require that this number be shared with other state agencies for state support enforcement activities. NO LICENSE WILL BE ISSUED TO ANY INDIVIDUAL WHO HAS FAILED TO DISCLOSE ONE OF THESE NUMBERS.

**In order to obtain a Virginia driver's license control number, it is essential to appear in person at an office of the Department of Motor Vehicles in Virginia. A fee and documentation of 20% of your Social Security Number will be required to release this number.
2. I hereby certify that I studied respiratory care and received the degree of _______________ (type of degree) on ___________ state ___________ school.

4. Are you about to engage in the active practice of respiratory care in the Commonwealth of Virginia? Yes No

5. Specify type of practice: Hospital Home Care Education Research Other, specify ____________________________

6. List all jurisdictions in which you have been issued a certificate/license to practice Respiratory Therapy: active, inactive or expired, indicate number and date issued. ____________________________

7. Have you ever been denied the privilege of taking a Respiratory Therapy examination? Yes No

8. Have you ever taken an RBRC exam? If so, what professional credentials do you presently hold with the RBRC, Inc.? ____________________________

9. Have you ever been denied a certificate/license or the privilege of taking an examination before any state, territorial or federal body? ____________________________

10. Have you ever been convicted of a violation of any federal, state or local statute, regulation or ordinance, or arrested into any other discipline involving a penalty or retribution? (excluding traffic violations, except convictions for driving under the influence.) ____________________________

11. Have you ever voluntarily surrendered your clinical privileges while under investigation, been censured or warned, or requested to withdraw from the staff of any professional school, internship, hospital, nursing home, or other health care facility, or health care provider? ____________________________

12. Have you ever had any of the following disciplinary actions taken against your certificate/license to practice Respiratory Therapy or any such actions pending? a) suspension/special probation b) probation c) revocation/revocation and cease d) had your practice revoked ____________________________

13. Have you ever had any membership in a state or local professional society revoked, suspended, or sanctioned? ____________________________

14. Have you had any malpractice suits brought against you in the last ten years? If so, how many? ____________________________

15. Have you been physically or emotionally dependent upon the use of alcoholics or treated by, consulted with, or been under the care of a professional for any substance abuse within the last two years? If so, please provide a letter from your treating professional. ____________________________

16. Do you have a physical disease, mental disorder, or any condition which you think would affect your performance of professional duties? If so, provide a letter from your treating professional to include diagnosis, treatment, prognosis and fitness to practice. ____________________________
INSTRUCTIONS FOR COMPLETING REINSTATEMENT OF RESPIRATORY THERAPY LICENSURE

A completed application must be returned to this office along with the reinstatement fee of $150.00. APPLICATIONS WILL NOT BE PROCESSED UNLESS THE FEE IS ATTACHED. Checks or money orders should be made payable to the Treasurer of Virginia.

INFORMATION REQUIRED TO COMPLETE YOUR APPLICATION

☐ 1. Two original letters of testimony - Please have two therapists of your choice, in your field of practice, who have known you for six months or longer and are licensed in the United States or Canada, submit current letters of recommendation directly to the Board office.

☐ 2. Forward Activity questionnaires (Form B) to all hospitals, clinics, etc., where you have practiced since your license in Virginia lapsed. If over five years ago, only go back five years.

☐ 3. Forward State questionnaires (Form C) to all states where you have ever been licensed. Call state offices first as they may require a fee.

ACTIVITY AND STATE QUESTIONNAIRES MAY BE COPIED SO THAT YOU WILL HAVE AS MANY AS YOU NEED.

☐ 4. If you have been discharged from the U.S. Military service within the past ten years, submit a photocopy notarized copy of your discharge papers.

Applications for reinstatement require approximately six to eight weeks to process. Any application not completed after six months will automatically become void. Should the applicant wish to continue after that time, he may be required to resubmit any or all documentation.

ADDITIONAL INFORMATION MAY BE REQUESTED.
REINSTATEMENT FEES ARE NOT REFUNDABLE.
FAXED INFORMATION and COPIES ARE NOT ACCEPTABLE.
Application for REINSTATEMENT as a Respiratory Care Practitioner

To the Board of Medicine of Virginia:
I hereby make application for certification as a Respiratory Therapy Practitioner in the Commonwealth of Virginia and submit the following statements:

1. Name (Full, Given Middle):

   Last: 
   First: 
   Middle: 

2. Legal Address:
   Street: 
   City: 
   State: 
   Zip Code: 

3. Place of Birth: 
   Date: 
   Sex: 

4. Graduation Date: 
   School of School Degree: 
   School, City, State: 

5. Parent's Name:
   Father: 
   Mother: 

---

APPLICANTS DO NOT USE SPACES BELOW THIS LINE - FOR OFFICE USE ONLY

CLASS: 
LICENSE NUMBER: 
FEE: $00.00 
EXPIRATION DATE: 
REINSTATEMENT DATE: 

---

Please provide a telephone number where you can be reached during the day. This information is not mandatory and will not be used for any purpose other than to contact if additional questions arise about your application.

--

[Signature]
[Date]

---

Please provide a telephone number where you can be reached during the day. This information is not mandatory and will not be used for any purpose other than to contact if additional questions arise about your application.

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[Signature]
[Date]
Final Regulations

Virginia Register of Regulations

[Document content]

17. AFFIDAVIT OF APPLICANT

I hereby declare under penalty of perjury that the information on this application is true, correct, and complete to the best of my knowledge and belief. I understand that by furnishing the information in this application, I hereby authorize the investigation of all information which is material in this application.

City/County of
State

[Signature]

My Commission expires

[Signature]

NOTARY SEAL
COMMONWEALTH OF VIRGINIA
Board of Medicine

Department of Health Professions
6606 West Broad Street, 4th Floor
Richmond, Virginia 23230-1717

(804) 662-7764

Submit this form to your medical school for completion
and instruct them to return the completed form directly to the Virginia
Board of Medicine.

CERTIFICATE OF PROFESSIONAL EDUCATION
(For graduates of approved programs only)

It is hereby certified that ________________________________ (Name of Applicant)

matriculated in ________________________________________ (Course of Study) on ____________ (Date)

and received a diploma from ____________________________ (Name of Institution)

conferring the degree of ________________________________ (Degree) on ____________ (Date)

_____________________________ (President, Secretary or Dean)

SCHOOL SEAL

Completed form must be mailed to: Virginia Board of Medicine
6606 West Broad Street, 4th Floor
Richmond, Virginia 23230-1717
Attn: Ms. Cookie Ergens

VA.R. Doc. No. R99-81; Filed November 23, 1999, 10:57 a.m.

**Statutory Authority:** § 54.1-2400 and Chapter 29 (§ 54.1-2900 et seq.) of the Code of Virginia.

**Effective Date:** January 19, 2000.

**Summary:**

Amendments to the regulations are adopted pursuant to changes in the Code of Virginia made by Chapter 593 of the 1998 Acts of the Assembly, which require the board to promulgate regulations for the licensure of occupational therapists. The board promulgated emergency regulations, which became effective on January 29, 1999. These regulations replace the emergency regulation.

The amendments (i) reorganize the application, education, and examination sections; (ii) modify the initial and reinstatement application requirements; and (iii) add an active practice requirement for licensure renewal.

**Summary of Public Comments and Agency's Response:** No public comments were received by the promulgating agency.

**Agency Contact:** Copies of the regulation may be obtained from Warren W. Koontz, M.D., Executive Director, Board of Medicine, 6606 West Broad Street, 4th Floor, Richmond, VA 23230-1717, telephone (804) 662-9908.

**CHAPTER 80.**

**REGULATIONS [ FOR GOVERNING THE ] LICENSURE OF OCCUPATIONAL THERAPISTS.**

**18 VAC 85-80-10. Definitions.**

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

- "Advisory board" means the Advisory Board of Occupational Therapy.
- "AOTA" means the American Occupational Therapy Association, Inc.
- "ACOTE" means the Accreditation Council for Occupational Therapy Education.
- "Active practice" means a minimum of 160 hours of professional practice as an occupational therapist within the 24-month period immediately preceding renewal or application for licensure, if previously licensed or certified in another jurisdiction. The active practice of occupational therapy may include supervisory, administrative, educational or consultative activities or responsibilities for the delivery of such services.
B. An applicant who has received his professional education outside the United States, its possessions or territories, shall successfully complete all academic and clinical fieldwork requirements of a program approved by a member association of the World Federation of Occupational Therapists as verified by the candidate's occupational therapy program director and approved as required by the NBCOT and submit proof of proficiency in the English language by passing the Test of English as a Foreign Language (TOEFL) with a grade of not less than 560 score acceptable to the board. TOEFL may be waived upon evidence of English proficiency.

C. An applicant who does not meet the educational requirements as prescribed in subsection A or B of this section but who holds certification by the NBCOT as an occupational therapist shall be eligible for licensure in Virginia and shall provide the board verification of his education, training and work experience acceptable to the board.

18 VAC 85-80-50. Examination requirements.

A. An applicant for licensure to practice as an occupational therapist shall submit evidence to the board that he holds current and valid has passed the certification examination for an occupational therapist and any other examination required for initial certification from the NBCOT.

B. An applicant must submit the application, credentials and prescribed fees as required by the board for licensure.

C. An applicant who has received a degree from a duly accredited educational program in occupational therapy shall be allowed to practice as an occupational therapist for one year from the date of graduation or until he has taken and received a passing grade of the certification examination, whichever occurs sooner.

D. An applicant who fails to successfully pass the examination within one year after graduation may practice occupational therapy under the supervision of a licensed occupational therapist until successful completion of the certification examination and the filing of the required application, credentials and fee.

E. An applicant who does not qualify by education for the NBCOT Certification Examination and who does not hold a valid certificate from the NBCOT but who is currently practicing occupational therapy may submit, for review and recommendation of the advisory board and the approval by the board, evidence of his education, training, and experience along with a request to take the examination for licensure as an occupational therapist in Virginia. A person who does not take the certification examination may continue to practice occupational therapy under the supervision of an occupational therapist.

18 VAC 85-80-60. Practice requirements.

[ An applicant who has ] met educational and examination requirements but who has not practiced occupational therapy for a period of six years shall serve a board-approved practice of 160 hours which is to be completed in two consecutive months been practicing occupational therapy in another jurisdiction and has met the requirements for licensure in Virginia shall provide evidence that he has engaged in the active practice of occupational therapy as defined in 18 VAC 85-80-10 for a period of two years immediately preceding submission of his application. If the applicant has not engaged in active practice as defined in 18 VAC 85-80-10, he shall serve a board-approved practice of 160 hours, which is to be completed within 60 consecutive days, under the supervision of a licensed occupational therapist.

18 VAC 85-80-70. Biennial renewal of licensure.

A. An occupational therapist shall renew his licensure biennially during his birth month in each even-numbered year by:

1. Paying to the board the renewal fee prescribed in 18 VAC 85-80-120; and

2. Indicating whether or not that he has been professionally engaged in the active practice of occupational therapy as defined in 18 VAC 85-80-10 for at least 160 hours during each biennial renewal cycle.

B. An occupational therapist whose licensure has not been renewed by the first day of the month following the month in which renewal is required shall be dropped from the licensure roll. C. pay an additional late fee to cover administrative costs for processing a late application shall be imposed by the board as prescribed in 18 VAC 85-80-120.

18 VAC 85-80-80. Reinstatement.

A. An occupational therapist who allows his licensure to lapse for a period of two years or more and chooses to resume his practice shall make a new application to the board, shall serve a board-approved practice of 160 hours which is to be completed in two consecutive months under the supervision of a licensed occupational therapist, and payment of—shall pay the fee for reinstatement of his licensure as prescribed in 18 VAC 85-80-120.

B. An occupational therapist who has allowed his licensure to lapse for six years or more and who has been professionally inactive shall serve a board-approved practice of 160 hours to be completed in two consecutive months under the supervision of a licensed occupational therapist.

C. B. An occupational therapist whose licensure has been revoked by the board and who wishes to be reinstated shall make a new application to the board and payment of the fee for reinstatement of his certification licensure as prescribed in 18 VAC 85-80-120 pursuant to § 54.1-2921 of the Code of Virginia.

NOTICE: The forms used in administering 18 VAC 85-80-10 et seq., Regulations Governing the Licensure of Occupational Therapists, are listed below. Any amended or added forms are reflected in the listing and are published following the listing.

FORMS

Instructions for Completing an Occupational Therapist Application (rev. 7/98 2/99).

Application for a License to Practice Occupational Therapy (rev. 7/98 2/99).
Final Regulations

Form #A, Claims History Sheet (rev. 7/98).
Form #B, Activity Questionnaire (rev. 7/98).
Form #C, Clearance from Other State Boards (rev. 7/98).
Form #L, Certificate of Professional Education (rev. 2/99).
Verification of Certification Request Form (NBCOT) (rev. 3/99).
Renewal Notice and Application (rev. 7/97).
INSTRUCTIONS FOR COMPLETING AN OCCUPATIONAL THERAPY APPLICATION

APPLICATION FOR A LICENSE TO PRACTICE OCCUPATIONAL THERAPY

To the Board of Medicine of Virginia:

I hereby make application for a license to practice occupational therapy in the Commonwealth of Virginia and submit the following statements:

1. Full name and address:

2. License No.:

3. Date of birth:

4. Address:

5. Social Security No.:

6. Applicant's designation:

7. Applicant's signature:

APPROVED BY

LICENSE NUMBER

SPECIALTIES

FEE

FEE REG.

BASE RATE

This form has been designed to be used as a checklist for completing required documentation.

NOTE: If any one of the required documents is not completed or is incorrect, the application will be returned to the applicant for correction.

Form A: Application for a License to Practice Occupational Therapy

Form B: Certificate of completion of course of study

Form C: Form C, Supplemental Questionnaire

Form D: Certificate of completion of course of study

Form E: Certificate of completion of course of study

Form F: Certificate of completion of course of study

Form G: Certificate of completion of course of study

Form H: Certificate of completion of course of study

Form I: Certificate of completion of course of study

Form J: Certificate of completion of course of study

Form K: Certificate of completion of course of study

Form L: Certificate of completion of course of study

Form M: Certificate of completion of course of study

Form N: Certificate of completion of course of study

Form O: Certificate of completion of course of study

Form P: Certificate of completion of course of study

Form Q: Certificate of completion of course of study

Form R: Certificate of completion of course of study

Form S: Certificate of completion of course of study

Form T: Certificate of completion of course of study

Form U: Certificate of completion of course of study

Form V: Certificate of completion of course of study

Form W: Certificate of completion of course of study

Form X: Certificate of completion of course of study

Form Y: Certificate of completion of course of study

Form Z: Certificate of completion of course of study

These forms may be copied and completed as necessary.

Additional information may be requested at any time to ensure compliance with the Board's regulations.

All completed forms must be submitted within six months of the date of submission.

Address change must be furnished to the Board in writing.
2. List all jurisdictions in which you have been issued a license or certificate to practice Occupational Therapy: active, inactive or expired. Indicate number and date issued.

3. Questions must be answered. If any of the following questions (5-14) is answered Yes, explain and substantiate with documentation. Letters must be submitted by your attorney regarding malpractice suits or you may complete and submit Form 6A yourself.

4. Have you ever taken the American Occupational Therapy Certification Examination? If so, provide date

5. Have you ever been denied the privilege of taking an Occupational Therapy examination for licensure or certification?

6. Have you ever been denied an Occupational Therapy license or certificate?

7. Have you ever been convicted of a violation of any state or local statute, regulation or ordinance, or arrested for any conviction relating to a felony or misdemeanor? (Including traffic violations, except convictions for driving under the influence.)

8. Have you ever voluntarily surrendered your clinical privileges while under investigation, been censured or warned, or requested to withdraw from the staff of any professional school, internship, hospital, nursing home, or other health care facility, or health care provider?

9. Have you ever had any of the following disciplinary actions taken against you or your license or certification to practice Occupational Therapy or any such actions pending?

10. Have you ever had any membership in a state or local professional society revoked, suspended, or sanctioned?

11. Have you had any malpractice suits brought against you in the last ten years? If so, how many?

12. Have you been physically or emotionally dependent upon the use of alcohol, drugs or treated by, consulted with, or seen under the care of a professional for any substance abuse within the last two years? If so, please provide a letter from the treating professional.

13. Do you have a physical, mental, or emotional condition which could affect your performance of professional duties? If so, please provide a letter from your treating professional to include diagnosis, treatment, prognosis and remorse to practice.

Please provide a telephone number where you can be reached during the day. This information is not mandatory and if provided, will not be used for any purpose other than a question if staff has questions about your application.

Work

Home
15. AFFIDAVIT OF APPLICANT

(THIS SECTION MUST BE NOTARIZED)

I, ,___, hereby declare under penalty of perjury, affirm, and swear that I am the applicant referred to in the foregoing application and supporting documents.

I solemnly swear, attest, and affirm that all information I have provided, and all information included in the application, including all statements made by me herein, are true and correct. I hereby authorize all pharmacies, retail stores, and any other persons, entities, or governmental agencies to release the information to the Virginia Board of Medicine and its agents.

I have read the information provided, and all information is true and correct. I hereby declare that this application is complete, without reservations of any kind, and I declare under penalty of perjury that the information is true and correct.

Should I furnish any false information, I hereby agree to such action as a cause for the denial, suspension, or revocation of my license to practice Occupational Therapy in the Commonwealth of Virginia.

Signature of Applicant:

Signature of Notary Public:

[Notarized seal]

[Occupational Therapy]

COMMONWEALTH OF VIRGINIA
Board of Medicine

Department of Health Professions
6606 West Broad Street, 4th Floor
Richmond, Virginia 23230-1717
(804) 622-7764

Submit this form to your medical school for completion and instruct them to return the completed form directly to the Virginia Board of Medicine.

CERTIFICATE OF PROFESSIONAL EDUCATION
(For graduates of approved programs only)

It is hereby certified that: ____________________________

(Name of Applicant)

matriculated in: ____________________________

(Course of Study) ____________________________

(State) ____________________________

on: ____________________________

(date) ____________________________

and received a diploma from: ____________________________

(Name of Institution) ____________________________

conferring the degree of: ____________________________

(Degree) ____________________________

on: ____________________________

(date) ____________________________

(President, Secretary or Designee)

SCHOOL SEAL

Completed form must be mailed to: Virginia Board of Medicine
6606 West Broad Street, 4th Floor
Richmond, Virginia 23230-1717
Attn: Ms. Cookie Ergens
Please print or type name of hospital or place of employment for supervised practice:

Name of Applicant

I hereby authorize an evaluation of my supervised practice to be released to the Virginia Board of Medicine in connection with the processing of my application.

Signature of Applicant

1. Please evaluate:

<table>
<thead>
<tr>
<th>Professional knowledge</th>
<th>Poor</th>
<th>Fair</th>
<th>Good</th>
<th>Super</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clinical judgment</td>
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<tr>
<td>Relationship with patients</td>
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<td>Ethical/professional conduct</td>
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<tr>
<td>Interest in work</td>
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</tr>
<tr>
<td>Ability to communicate</td>
<td></td>
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</tr>
</tbody>
</table>

1. Recommend highly and without reservation
2. Recommend as qualified and competent
3. Recommend with some reservation (explain)
4. Do not recommend (explain)

5. Of particular value to us in evaluating any candidate are comments regarding any notable strengths and weaknesses (including personal demeanor). We would appreciate such comments from you.

6. The above report is based on:

1. Close personal observation
2. General impression
3. A composite of evaluations
4. Other

Date: 
Signed: 
Printed name of type name:

(NBCOT Verification of Certification Request Form)

Verification Processing
Please allow 3-4 weeks for your request to be processed and mailed.

Questions regarding your request
You can contact NBCOT by phone at 301 - 590-7779 or e-mail at info@NBCOT.org to inquire about your verification request.

The name on my NBCOT record
If your name is different from what our certification records reflect, and you want the verification notice processed in your new name, the NBCOT requires legal documentation (i.e., marriage license, divorce decree, or court order). Submit an original certified copy or a notarized photocopy (i.e., copy the document and have it notarized) to reflect your change in name. Please attach your name change documentation to your verification request.

Faxed requests will NOT be honored.

Side 1 of 2 - Revised for 1999
**NBCOT Verification of Certification Request Form**

To request a letter verifying your NBCOT certification to be sent to a state regulatory board, employer, or any other agency, complete this form. Please print or type your request.

I have [ ] Faxed my verification request [ ] Mailed my verification request

*If you have faxed your request, please allow ample processing time (one week) to verify receipt of your request. NBCOT suggests you make a photocopy of this request for your files.*

<table>
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<tr>
<th>FULL NAME</th>
<th>CERTIFICATION NUMBER AND LEVEL OCCUPATIONAL THERAPY REGISTERED COTA* OR CERTIFIED OCCUPATIONAL THERAPY ASSISTANT COTA*</th>
</tr>
</thead>
<tbody>
<tr>
<td>STREET ADDRESS please check if new</td>
<td>HOME AREA CODE/PHONE NUMBER</td>
</tr>
<tr>
<td>CITY, STATE, ZIP CODE, COUNTRY</td>
<td>DAYTIME AREA CODE/PHONE NUMBER</td>
</tr>
<tr>
<td>SOCIAL SECURITY NUMBER</td>
<td>VERGINIA BOARD OF MEDICINE</td>
</tr>
</tbody>
</table>

STATE BOARD, EMPLOYER, OR AGENCY TO SUBMIT VERIFICATION REQUEST (If 2 or more state boards, please abbreviate, i.e. MD/PA)

| ADDRESS OF EMPLOYER OR AGENCY | METHOD OF PAYMENT: Please check appropriate box

- [ ] Visa
- [ ] MasterCard

Credit Card Number: ____________________________

Expiration Date: Month _____ Year _____

Amount of Credit Card $ ________

Signature: ____________________________

Required for Credit Card Request: ____________________________

[ ] Check

Money Order

Amount of Check/Money Order $ ________

Verification Letter Order Date: ____________________________
Final Regulations

BOARD OF LICENSED PROFESSIONAL COUNSELORS, MARRIAGE AND FAMILY THERAPISTS AND SUBSTANCE ABUSE TREATMENT PROFESSIONALS

Title of Regulation: 18 VAC 115-30-10 et seq. Regulations Governing the Certification of Substance Abuse Counselors (amending 18 VAC 115-30-10, 18 VAC 115-30-30, 18 VAC 115-30-40, 18 VAC 115-30-60, 18 VAC 115-30-70, 18 VAC 115-30-90, 18 VAC 115-30-110, 18 VAC 115-30-120, 18 VAC 115-30-140, 18 VAC 115-30-150, and 18 VAC 115-30-160; adding 18 VAC 115-30-45; repealing 18 VAC 115-30-20, 18 VAC 115-30-80, 18 VAC 115-30-100, and 18 VAC 115-30-130).

Statutory Authority: §§ 54.1-103 and 54.1-2400 and Chapter 35 (§ 54.1-3500 et seq.) of Title 54.1 of the Code of Virginia.

Effective Date: January 19, 2000.

Summary:
The amendments provide for certification by endorsement for individuals who hold national certifications in substance abuse counseling obtained by substantially equivalent requirements to those in the board's regulations. The board changed the current requirement for supervisors to have both national certification and two years of experience as a Virginia certified substance abuse counselor to allow individuals meeting either criterion to act as supervisors. To reduce the burden of the supervision requirement on applicants, the board will accept group supervision hours as equivalent to individual supervision hours, for up to half of the total supervised hours, and changed the face-to-face hour requirement from two hours per week to an average of two hours per week. A new licensure title is added to the list of acceptable supervisors. To reduce the financial burden on individuals who wish to renew a certification which has lapsed for more than four years, the board adopted a reapplication alternative to the current cumulative renewal and penalty fee requirement. An amendment to the dual relationship prohibition in the standards of practice to specify that sexual relationships with a client are strictly prohibited for five years following the cessation of services is adopted. The board also reformatted the regulations, eliminating obsolete and unnecessary language and adding new language where needed to clarify requirements.

While the review process for the amendments under Executive Order 15 (94) was in progress, the board's Regulatory Committee worked on identifying areas of its regulations that are inconsistent to prepare for a new regulatory review in 2000. When the committee compared the proposed regulations with its review materials, it was noted that it was recommending that the language in subsection A of 18 VAC 115-30-140 (not including subdivisions 1 and 2), and the language in subdivision B 1 of that section be consistent among all of its rules. Because of this recommendation, the board agreed not to change the language in 18 VAC 115-30-140 A or B 1 as proposed.

Summary of Public Comments and Agency's Response: A summary of comments made by the public and the agency's response may be obtained from the promulgating agency or viewed at the office of the Registrar of Regulations.

Agency Contact: Copies of the regulation may be obtained from Janet Delorme, Department of Health Professions, 6606 West Broad Street, 4th Floor, Richmond, VA 23230-1717, telephone (804) 662-9575.

18 VAC 115-30-10. Definitions.

A. The following words and terms when used in this chapter shall have the meaning ascribed to them in § 54.1-3500 of the Code of Virginia:

“Board”

“Certified substance abuse counselor”

B. The following words and terms, when used in this chapter, shall have the following meanings, unless the context clearly indicates otherwise:

“Applicant” means an individual who has submitted a completed application with documentation and the appropriate fees to be examined for certification as a substance abuse counselor.

“Appropriately credentialed authority” means an entity licensed by an agency of the Commonwealth to render the services of substance abuse counselors.

“Board” means the Virginia Board for Professional Counselors, Marriage and Family Therapists and Substance Abuse Professionals.

“Candidate” means a person who has been approved to take the examinations for certification as a substance abuse counselor.

“Certified substance abuse counselor” means a person certified to provide substance abuse counseling in a state approved public or private substance abuse program or facility.

“Competency area” means an area in which a person possesses knowledge and skill and the ability to apply them in the clinical setting.

“Didactic” means teaching-learning methods which impart facts and information, usually in the form of one-way communication (includes directed readings and lectures).

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

“Substance abuse counseling” means applying a counseling process, treatment strategies and rehabilitative services to help an individual to:

1. Understand his substance use, abuse or dependency; and

2. Change his drug-taking behavior so that it does not interfere with effective physical, psychological, social or vocational functioning.
"Clinical supervision" means the ongoing process performed by a clinical supervisor who monitors the performance of the person supervised and provides regular, documented face-to-face consultation, guidance and education with respect to the clinical skills and competencies of the person supervised.

"Clinical supervisor" means one who provides case-related supervision, consultation, education and guidance for the applicant. The supervisor must be credentialed as defined in 18 VAC 115-30-40 C and 18 VAC 115-30-60 D of this chapter.

18 VAC 115-30-20. Cross-referencing. (Repealed.)

These regulations are incorporated by reference in 18 VAC 115-20-10 et seq.

18 VAC 115-30-30. Fees required by the board.

A. The board has established the following fees applicable to the certification of substance abuse counselors:

- Biennial certification renewal: $40
- Duplicate certificate: $15
- Late renewal: $10
- Replacement of or additional wall certificate: $15
- Name change: $40
- Returned check: $15

B. Application, registration of supervision and examination fees shall be paid directly to the board’s contracting agents according to their requirements.

C. All fees are nonrefundable.

18 VAC 115-30-40. Certification, general Prerequisites for certification by examination.

A. No person shall use the title of “certified substance abuse counselor” in the Commonwealth of Virginia except as provided in this chapter.

B. A certified substance abuse counselor is employed to deliver substance abuse counseling in a state-approved public or private facility.

C. In every instance there shall be an identifiable appropriately credentialed individual or authority to provide supervision.

D. A. A candidate for certification as a substance abuse counselor shall meet all the requirements of this chapter, including passing the examination prescribed in 18 VAC 115-30-90.

E. B. Every prospective applicant for examination for certification by the board shall:

1. Meet the educational and experience requirements prescribed in 18 VAC 115-30-50 of this chapter and 18 VAC 115-30-60;

2. Register supervision at least one year before applying. The board, in its discretion, may waive this one-year period for an applicant who has met the work experience requirements prescribed in 18 VAC 115-30-60;

3. Meet the experience requirements prescribed in 18 VAC 115-30-60;

4. Meet the requirements of character and professional integrity prescribed in 18 VAC 115-30-80; and

5. Submit the following to the contracting agent within the time frame established by that agent:

   a. A completed application form;

   b. Documented evidence of having fulfilled the education, supervision, experience, and references required in subdivisions 1, 2, 3, and 4 of this subsection;

   c. Reference letters from three health or mental health care professionals attesting to the applicant’s character and professional integrity; and

   b. Official transcript documenting attainment of a high school diploma or general educational development (GED) certificate;

   c. Official transcripts or certificates verifying completion of the didactic training requirement set forth in subsection B of 18 VAC 115-30-50;

   d. Verification of supervisor’s education and experience as required under 18 VAC 115-30-60;

   e. Verification of supervision forms documenting fulfillment of the experience requirements of 18 VAC 115-30-60;

   f. Documentation of any other professional license or certificate ever held in another jurisdiction; and

   d. Any applicable fees.

F. The board may certify by endorsement an individual who is currently certified in another state as a substance abuse counselor and who has been certified in another state through a similar process with equivalent requirements as described in this section.

18 VAC 115-30-45. Prerequisites for certification by endorsement.

Every applicant for certification by endorsement shall submit in one package:

1. A completed application;

2. The application processing fee;

3. Verification of all professional licenses or certificates ever held in any other jurisdiction. In order to qualify for endorsement, the applicant shall have no unresolved action against a license or certificate. The board will consider history of disciplinary action on a case-by-case basis;

4. Affidavit of having read and understood the regulations and laws governing the practice of substance abuse counseling in Virginia; and

5. Further documentation of one of the following:
18 VAC 115-30-60. Experience requirements.

A. Registration. Supervision obtained without prior board approval will not be accepted if it does not meet the requirements set forth in subsections B and C of this section. Individuals who wish to register supervision for board approval prior to obtaining the supervised experience shall submit in one package:

1. A supervisory contract;
2. Verification of the supervisor’s education and experience as required under subsection C of this section;
3. Official transcripts documenting completion of a high school diploma or general education development certificate; and
4. The registration fee.

B. Experience requirements.

A. 1. An applicant for certification as a substance abuse counselor shall have had 2,000 hours of supervised experience in the delivery of clinical substance abuse counseling services.

B. The work experience shall be supervised by a board-approved licensed professional or certified substance abuse counselor. In every instance, there shall be an identifiable appropriately credentialed individual or authority to provide supervision.

C. 2. The supervised experience shall include at least an average of two hours per week of face-to-face consultation between the supervisor and the applicant to total 100 hours within the required experience. No more than half of these hours may be satisfied with group supervision. One hour of group supervision will be deemed equivalent to one hour of face-to-face supervision.

D. Supervision shall be provided under this section according to the following requirements:

1. The supervision contract shall be completed and signed by the applicant and the supervisor;
2. The supervisor shall assume responsibility for the professional activities of the applicant;
3. The supervisor shall not provide supervision for activities for which the prospective applicant has not had appropriate education;
4. The supervisor shall provide supervision only for those substance abuse counseling services which he is qualified to render;
5. Group supervision involving up to six members in a group will be acceptable for one hour of the two hours per week of supervision required in subsection C of this section, substituting on the basis of two hours of group supervision equaling one hour of individual supervision. In no case shall a person receiving supervision receive less than one hour of face-to-face individual supervision per week;
6. Supervision must be provided by a professional who has had specialized training or experience in substance abuse counseling or a certified substance abuse counselor approved by the board;

C. Supervisory requirements.

1. A board-approved supervisor shall:

a. Be a licensed professional counselor, licensed clinical psychologist, licensed psychologist, licensed clinical social worker, medical doctor, or registered nurse with a board-recognized national certification in substance abuse counseling obtained by standards substantially equivalent to those set forth in this chapter, or
b. A board-recognized national certification in substance abuse counseling or a certified substance abuse counselor obtained by standards substantially equivalent to those set forth in this chapter; or

b. c. Be a substance abuse counselor certified by the board Virginia Board of Licensed Professional Counselors, Marriage and Family Therapists and Substance Abuse Treatment Professionals who has:

1. Board-recognized national certification in substance abuse counseling obtained by standards substantially equivalent to those set forth in this chapter; or
2. Two years experience as a Virginia board-certified substance abuse counselor.

2. Supervisors shall assume responsibility for the professional activities of the prospective applicants under their supervision.

3. Supervisors shall not provide supervision for activities for which prospective applicants have not had appropriate education.

4. Supervisors shall provide supervision only for those substance abuse counseling services which they are qualified to render.

B. 5. At the time of formal application for certification, the board-approved supervisor shall document the applicant’s total hours of supervision, length of work
experience, competence in substance abuse counseling and any needs for additional supervision or training;

6. Supervision by any individual whose relationship to the supervisee compromises the objectivity of the supervisor is prohibited; and

7. The applicant shall keep the board’s contracting agent informed of his current supervisor’s license or certificate number, business address, and phone number. The board’s contracting agent shall be informed within 30 days of any changes in the applicant’s supervision.

18 VAC 115-30-70. Documentation of supervision.

Applicants must document successful completion of their supervised experience on appropriate forms the Verification of Supervision Form at the time of application. Supervised experience obtained prior to May 8, 1991, may be accepted toward certification if this supervised experience met the board’s requirements which were in effect at the time the supervision was rendered.

18 VAC 115-30-80. Character and professional integrity. (Repealed.)

If the applicant has been under treatment for substance abuse within the last four years, the applicant shall provide a written statement from the certified or licensed individual responsible for the treatment. The written statement shall address the capability of the applicant to assume the responsibilities of a certified substance abuse counselor.

18 VAC 115-30-90. General examination requirements.

A. Every applicant for certification as a substance abuse counselor by examination shall pass a written examination approved by the board and achieve a passing score as defined by the board. The board shall determine the passing score on the examination.

B. A written examination will be given at least once each year. The board may schedule such additional examinations as it deems necessary.

B. Every applicant for [license certification] by endorsement shall have passed an examination deemed by the board to be substantially equivalent to the Virginia examination.

C. The contracting agent shall notify all applicants in writing of the time and place of the examination for which they have been approved to sit.

D. The contracting agent will notify all applicants in writing of their success or failure on any examination.

18 VAC 115-30-100. Written examination. (Repealed.)

The written examination shall consist of objective, multiple-choice, or essay questions.


A. Every certificate issued by the board shall expire on June 30 of each odd-numbered year.

1. B. Along with the renewal application, the certified substance abuse counselor shall submit the renewal fee prescribed in 18 VAC 115-30-30.

2. C. Certified individuals shall notify the board of change of address within 60 days. Failure to receive a renewal notice and application forms shall not excuse the certified substance abuse counselor from the renewal requirement.

18 VAC 115-30-120. Reinstatement.

A. A person whose certificate has expired may renew it within four years after its expiration date by paying the penalty fee prescribed in 18 VAC 115-30-30 and the certification fee prescribed for each biennium the certificate was not renewed.

B. A person who fails to renew a certificate for four years or more shall: reapply according to the requirements set forth in 18 VAC 115-30-40 or 18 VAC 115-30-45.

1. Pay the late renewal fee prescribed in 18 VAC 115-30-30 and the certification fee prescribed for each biennium the certificate was not renewed;

2. Provide evidence satisfactory to the board of current ability to practice as evidenced by:
   a. Continuous practice of substance abuse counseling during the preceding two years and completion of 20 hours of continuing education in substance abuse counseling per year for the preceding two years; or
   b. Completing at least 40 hours of substance abuse education in the preceding 12 months.

18 VAC 115-30-130. Legal name change. (Repealed.)

A certified substance abuse counselor whose name is changed by marriage or court order may:

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 18 VAC 115-30-30; and

3. Request and obtain from the board a new certificate bearing the individual’s new legal name and pay the fee prescribed in 18 VAC 115-30-30.

18 VAC 115-30-140. Standards of practice.

A certified substance abuse counselor is employed to deliver substance abuse counseling in a state-approved public or private facility.

2. In every instance, there shall be an identifiable individual or authority that is appropriately credentialed to provide supervision.

B. Persons certified 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 services rendered to clients as necessary for diagnostic or therapeutic purposes;

3. Practice only within the competency area 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 certified substance abuse counselors;

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

6. Keep confidential their counseling relationships with clients, except: (i) when the client is a danger to self or others; and (ii) when the counselor is under court order to disclose information;

7. Disclose counseling records to others only with written consent of the client, and in accordance with the requirements of state and federal statutes and regulations, including, but not limited to §§ 32.1-127.1:03 (Patient Health Records Privacy Act), 2.1-342 B 3 (Virginia Freedom of Information Act), and 54.1-2400.1 (Mental Health Service Providers; Duty to Protect Third Parties; Immunity) of the Code of Virginia; 42 USC § 290dd-2 (Confidentiality of Drug and Alcohol Treatment Records); and 42 CFR Part 2 (Alcohol and Drug Abuse Patient Records and Regulations).

8. 7. Not engage in dual relationships with clients, former clients, supervisees and supervisors that are harmful to the client’s, former client’s, or supervisee’s well being, or which would impair the substance abuse counselor’s or supervisor’s objectivity and professional judgment, or increase the risk of client or supervisee exploitation. This prohibition includes, but is not limited to, such activities as counseling close friends, former sexual partners, employees or relatives; or engaging in sexual intimacies business relationships with clients, supervisees, or supervisors.

Engaging in sexual intimacies with current clients or supervisees is strictly prohibited. For at least five years after cessation or termination of professional services, certified substance abuse counselors shall not engage in sexual intimacies with a client or those included in collateral therapeutic services. Since sexual or romantic relationships are potentially exploitative, certified substance abuse counselors shall bear the burden of demonstrating that there has been no exploitation. A client’s consent to, initiation of or participation in sexual behavior or involvement with a certified substance abuse counselor does not change the nature of the conduct nor lift the regulatory prohibition.

8. Recognize conflicts of interest and inform all parties of obligations, responsibilities and loyalties to third parties.

18 VAC 115-30-150. Grounds for revocation, suspension, probation, reprimand, censure or denial of renewal of certificate; petition for rehearing.

A. In accordance with § 54.1-2400(7) of the Code of Virginia, the board may revoke, suspend or decline to renew a certificate based upon the following conduct:

1. Conviction of a felony or of a misdemeanor involving moral turpitude; or violation of or aid to another in violating any provision of Chapter 35 (§ 54.1-3500 et seq.) of Title 54.1 of the Code of Virginia, any other statute applicable to the practice of substance abuse counseling, or any provision of this chapter;

2. Procuring a certificate by fraud or misrepresentation;

3. Conducting one’s practice in such a manner so 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 substance abuse counseling with reasonable skill and safety to clients by reason of illness, abusive use of alcohol, drugs, narcotics, chemicals, or any other type of material or as a result of any mental or physical condition;

4. Negligence in professional conduct or nonconformance with the standards of practice outlined in 18 VAC 115-30-140 of this chapter, or

5. Performance of functions outside the board-certified area of competency;

6. Violation of or aid to another in violating any provision of Chapter 35 of Title 54.1 of the Code of Virginia, any other statute applicable to the practice of substance abuse counseling, or any provision of this chapter.

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

18 VAC 115-30-160. Reinstatement following disciplinary action.

A. Any person whose certificate has been revoked or denied renewal by the board under the provisions of 18 VAC 115-30-150 of this chapter must, two years subsequent to such board action, submit a new application for certification.

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 certified upon payment of the appropriate fees applicable at the time of reinstatement.

NOTICE: The forms used in administering 18 VAC 115-30-10 et seq., Regulations Governing the Certification of Substance Abuse Counselors, are listed below. Any amended or added forms are reflected in the listing and are published following the listing.
FORMS

Application for Certification as a Substance Abuse Counselor (rev. 8/99).

Substance Abuse Counselor Verification of Supervision, rev. 8/99.

Renewal Notice and Application, C-45128 (rev. 8/97).
APPLICATION FOR CERTIFICATION AS A SUBSTANCE ABUSE COUNSELOR

I hereby make application for certification to practice as a Substance Abuse Counselor in the Commonwealth of Virginia [ ] by examination [ ] by endorsement. The following evidence of my qualifications is submitted with a check or money order in the amount of $45 made payable to “Commonwealth of Virginia.” The application fee is non-refundable.

INSTRUCTIONS. PLEASE TYPE OR PRINT. USE BLACK INK
Applications lacking a Social Security Number or Virginia Department of Motor Vehicles Number will not be processed. This number will be used for identification only and will not be disclosed for other purposes except as provided for by law.

1. Applicants must complete all sections.
2. Completed application should be mailed to the above address.
3. Application and supporting documents must be received no less than 120 days prior to the date of the written examination.

I. GENERAL INFORMATION

Name (Last, First, M.I., Suffix, Maiden Name) Social Security Number or Virginia DMV Number Date of Birth

Name as you want it to appear on your wall certificate:

Mailing Address (Street and/or Box Number, City, State, ZIP Code)

Home Telephone Number

Business Name and Address (If different from above)

Business Telephone Number

II. EDUCATIONAL EXPERIENCE

Applicants must submit official transcripts in sealed, signed envelopes with this application. Applicants who have GED certificates must include official documentation that the certificate is a sealed, signed envelope.

Educational Institutions Attended Dates Attended Degree Confirmed

High School/4 Year College City & State From To

Month Year

III. LISENSE/CERTIFICATE

STATE LICENSE/CERTIFICATE NUMBER LICENSE EXP TYPE OF LICENSE/CERTIFICATE

III. SUPERVISED COUNSELING EXPERIENCE

Indicate below perren(s) designated as your supervisor(s) for substance abuse counseling supervised experience. Verification of Supervision forms must be submitted to the applicant by the supervisor in an envelope with the supervisor’s signature on the envelope flap.

Supervisor’s Name

Institution or Business Name and Address

Telephone Number:

Supervisor’s Name

Institution or Business Name and Address

Telephone Number:

Supervisor’s Name

Institution or Business Name and Address

Telephone Number:

Supervisor’s Name

Institution or Business Name and Address

Telephone Number:

rev. 8/99
IV. SUBSTANCE ABUSE COUNSELOR EDUCATIONAL REQUIREMENTS

Applicants are required to document 400 hours in a substance abuse educational program from one of the following: (1) an accredited university or college; (2) an integrated program approved by the Board; (3) an individualized program or seminars and workshops approved by the Board at the time of the application.

COURSE WORK MUST BE VERIFIED THROUGH OFFICIAL TRANSCRIPTS TO BE INCLUDED IN THE APPLICATION PACKAGE. CLOCKS HOURS REPORTED MUST BE ONLY THOSE HOURS SPENT COVERING THE SPECIFIC CONTENT AREA. TO VERIFY COURSE CONTENT, ADDITIONAL INFORMATION SUCH AS COURSE DESCRIPTIONS OR SYLLABUS MAY BE REQUIRED BY THE BOARD.

SEMINARS AND WORKSHOPS MUST BE VERIFIED THROUGH COPIES OF CERTIFICATES. IF CLOCKS HOURS OR C.E.U.'S ARE NOT RECORDED ON THE CERTIFICATE, SEPARATE DOCUMENTATION OF CLOCKS HOURS, SIGNED BY THE PRESENTER OR YOUR SUPERVISOR, MUST BE INCLUDED.

IV.A. DIDACTIC TRAINING (20 HOURS)
A minimum of ten (10) hours in each of the following areas must be documented.

<table>
<thead>
<tr>
<th>Content</th>
<th>Institution/Agency</th>
<th>Course Number and Title/Workshop Title</th>
<th>Clock Hours*</th>
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<tbody>
<tr>
<td>Understanding the Dynamics of Human Behavior</td>
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<tr>
<td>Signs and Symptoms of Substance Abuse</td>
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<tr>
<td>Counseling and Treatment Approaches, Substance Abuse Research, Group Therapy and Other Adjunctive Treatment and Support Groups</td>
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<tr>
<td>Continuance of Care and Case Management Skills</td>
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<tr>
<td>Recovery Process and Relapse Prevention Methods</td>
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<tr>
<td>Ethics and Professional Identity</td>
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</tbody>
</table>

* One semester credit is equivalent to 15 clock hours; one quarter credit is equivalent to 10 clock hours; one C.E.U. credit is equivalent to 5 clock hours.

IV.B. SUBSTANCE ABUSE EDUCATION TASKS (180 HOURS)
A minimum of eight (8) hours in each of the following areas must be documented. Please provide school transcripts for practicum and internship. If tasks were completed on the job, supervisor must sign the form verifying each task completed.

<table>
<thead>
<tr>
<th>Tasks</th>
<th>Number of Hours Completed</th>
<th>School/Institution</th>
<th>Course Number and Title of Practicum Internship or Supervisor’s Signature</th>
<th>Date</th>
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<tbody>
<tr>
<td>1. Supervision</td>
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<td>2. Induction</td>
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<td>3. Orientation</td>
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<td>6. Counseling Individual</td>
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<td>7. Case Management</td>
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<td>8. Crisis Intervention</td>
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<td>9. Client Education</td>
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<td>10. Referral</td>
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<tr>
<td>11. Reports and Recordkeeping</td>
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<td>12. Consultation (with other professionals)</td>
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</table>
ANSWER THE FOLLOWING QUESTIONS:

1. Have you ever been denied the privilege of taking an occupational licensure or certification examination? If yes, state what type of occupational examination and where: [ ] [ ]

2. Do you currently hold, or have you ever held, an occupational license or certification to practice as a substance abuse counselor in any other state or jurisdiction? If yes, please list below:
   State  Number  Issue Date  Type
   [ ] [ ] [ ]

   State  Number  Issue Date  Type
   [ ] [ ] [ ]

3. Have you ever had any disciplinary action taken against an occupational license to practice or are any such actions pending? If yes, explain in detail (use extra paper if necessary): [ ] [ ]

4. Have you ever been convicted of a violation of or pled noto contendere to any federal, state, or local statute, regulation or ordinance or entered into any plea bargaining relating to a felony or misdemeanor? (Excluding traffic violations, except for driving under the influence.) If yes, explain in detail: [ ] [ ]

5. Have you ever been terminated or asked to withdraw from any health care facility, agency, or practice? If yes, provide an explanation on a separate sheet of paper. [ ] [ ]

The following statement must be executed by a Notary Public. This form is not valid unless properly notarized.

AFFIDAVIT
(To be completed before a notary public)

State of [ ] County/City of [ ]

Name , being duly sworn, says that he/she is the person who is referred to in the foregoing application for certification to practice as a substance abuse counselor in the Commonwealth of Virginia, that the statements herein contained are true in every respect, that he/she has complied with all requirements of the law, that he/she has read and agrees to comply with the Standards of Practice and laws governing the practice of substance abuse counseling in Virginia and that he/she has read and understands this affidavit.

Signature of Applicant

Subscribed to and sworn to before me this ____________ day of ____________, 19

My commission expires on ____________

Signature of Notary Public

rev. 8/09
COMMONWEALTH OF VIRGINIA
BOARD OF LICENSED PROFESSIONAL COUNSELORS, MARRIAGE AND FAMILY THERAPISTS AND SUBSTANCE ABUSE PROFESSIONALS
Mail this form and fee to:
Applied Measurement Professionals, Inc.
8310 Norman Rd.
Lenexa, KS 66214-1579
1-800-345-4559

SUBSTANCE ABUSE COUNSELOR VERIFICATION OF SUPERVISION

The Virginia Board of Licensed Professional Counselors, Marriage and Family Therapists and Substance Abuse Professionals has received an application for certification as a substance abuse counselor from the applicant named below. Your name has been submitted by the applicant as his/her clinical supervisor. Please provide the Board with information requested on this form and return this form to the applicant in a sealed, signed envelope. Thank you.

I. To Be Completed by Applicant

Supervisor's Name:
Supervisor's Business Address:

Supervisor's Name:
Supervisor's Business Address:

Type of License:
License Number:
State of License:

II. To Be Completed by Supervisor

Date the applicant was employed:
From: (month/day/year) To: (month/day/year)

Dates the applicant was under your supervision:
From: (month/day/year) To: (month/day/year)

a. Hours applicant worked
   Avg./Week Total

b. Hours of individual, face-to-face supervision
   Avg./Week Total

c. Hours of group supervision
   Avg./Week Total

Was a supervision contract registered with the Board? Yes No
If not, his supervisor must complete Form A or Form B, "Supervisor Experience and Education."

I declare under penalty of perjury under the laws of the Commonwealth of Virginia that the foregoing is true and correct.

Supervisor's Signature

Date

Rev: 8/99
Final Regulations

* * * * * * * *


Statutory Authority: § 54.1-2400 and Chapter 35 (§ 54.1-3500 et seq.) of Title 54.1 of the Code of Virginia.

Effective Date: January 19, 2000.

Summary:

The amendments make it possible for individuals to obtain some of the requirement coursework outside of their degree program. These amendments were adopted in response to a petition for rulemaking from students who maintained that the current regulations disenfranchised graduates of all but one graduate program in Virginia. The board also adopted amendments to the supervisory requirements to ensure the continued availability of supervisors for individuals who wish to obtain post-graduate training for this license. In compliance with the statutory requirement that the board establish experience hour requirements consistent with the requirements for professional counselor licensure, the board has included a provision to accept group supervision hours as equivalent to individual hours, raising the face-to-face client contact hours during the residency from 1,000 to 2,000, and accepting 600 internship hours toward the residency, which is equivalent to recently adopted amendments for the regulations governing professional counselor licensure.

The board adopted a change to the proposed regulation to clarify that CACREP-accredited programs must be in the category of marriage and family counseling/therapy to conform with the degree requirement. The board also restructured the sentence to ensure that the meaning conforms with the degree requirement. The board added a new form to help endorsement applicants document the hours of supervision received in another jurisdiction.

Summary of Public Comments and Agency’s Response: A summary of comments made by the public and the agency’s response may be obtained from the promulgating agency or viewed at the office of the Registrar of Regulations.

Agency Contact: Copies of the regulation may be obtained from Janet Delorme, Department of Health Professions, 6606 West Broad Street, 4th Floor, Richmond, VA 23230-1717, telephone (804) 662-9575.

18 VAC 115-50-10. Definitions.

A. The following words and terms, when used in this chapter, shall have the meaning ascribed to them in § 54.1-3500 of the Code of Virginia: (i) “board,” (ii) “marriage and family therapy,” (iii) “marriage and family therapist,” and (iv) “practice of marriage and family therapy.”

B. The following words and terms, when used in this chapter, shall have the following meanings unless the context clearly indicates otherwise:

“AAMFT” means the American Association for Marriage and Family Therapy, or an organization deemed substantially equivalent by the board.

“CACREP” means the Council for Accreditation of Counseling and Related Education Programs.

“COAMFTE” means the Commission on Accreditation for Marriage and Family Therapy Education.

“Internship” means a supervised, planned, practical, advanced experience of at least one year, involving direct client contact with individuals, couples and families in a setting in which the advanced student will observe, diagnose and treat, through the application of principles, methods and techniques learned in training or educational settings.

“Regional accrediting agency” means one of the regional accreditation agencies recognized by the United States Secretary of Education as responsible for accrediting senior post-secondary institutions and training programs.

“Residency” means a post-internship, supervised clinical experience registered with the board.

“Resident” means an individual who has submitted a supervisory contract to the board and has received board approval to provide clinical services in marriage and family therapy under supervision.

“Supervision” means an ongoing process in which a practitioner qualified to supervise in the discipline of marriage and family therapy, performed by a supervisor who monitors the performance of the person supervised and provides regular, documented, face-to-face guidance, and instruction and evaluation of with respect to the clinical skills and competencies of the person or persons being supervised.


Every applicant for examination for licensure by the board shall:


2. Submit to the board office in one package, the following items, not less than 90 days prior to the date of the examination:
   a. A completed application;
   b. The application fee prescribed in 18 VAC 115-50-20;
   c. Documentation, on the appropriate forms, of the successful completion of the supervised experience residency requirements of 18 VAC 115-50-60 along with documentation of the supervisor's out-of-state license where applicable;
d. Official transcript or transcripts in the original sealed envelope with the registrar's signature across the sealed envelope flap submitted from the appropriate institutions of higher education directly to the applicant, verifying satisfactory completion of the education requirements set forth in 18 VAC 115-50-50 and 18 VAC 115-50-55. Previously submitted transcripts for registration of supervision do not have to be resubmitted; and

e. Verification on a board-approved form that any out-of-state license, certification or registration is in good standing.

18 VAC 115-50-40. Application for licensure by endorsement.

Every applicant for licensure by endorsement shall submit in one package:

1. A completed application;

2. The application fee prescribed in 18 VAC 115-50-20; and

3. Documentation of licensure as follows:

a. Documentation of a current marriage and family therapy license in good standing obtained by standards substantially equivalent to those outlined in 18 VAC 115-50-50, 18 VAC 115-50-55, 18 VAC 115-50-60 and 18 VAC 115-50-70 as verified by the out-of-state licensing agency on a board-approved form a current official transcript and certified copy of the original application materials; or

b. If currently holding an unrestricted license as a professional counselor in Virginia, documentation of successful completion of the requirements set forth in 18 VAC 115-50-50, 18 VAC 115-50-55 and 18 VAC 115-50-60;


18 VAC 115-50-50. Education requirements for licensure examination. Degree program requirements.

A. The applicant shall have completed 60 semester hours or 90 quarter hours of graduate study in marriage and family therapy, a graduate degree from a program that prepares individuals to practice marriage and family therapy or a discipline related to the practice of marriage and family therapy as defined in § 54.1-3500 of the Code of Virginia from a regionally accredited college or university, or a post-degree training institute accredited by the Commission on Accreditation for Marriage and Family Therapy Education, to include a graduate degree in marriage and family therapy or a related discipline which is accredited by a regional accrediting agency and which meets the following criteria:

1. Was accredited by the Commission on Accreditation for Marriage and Family Therapy Education prior to the applicant's graduation from the program; or

1. There must be a sequence of academic study with the expressed intent to prepare students to practice marriage and family therapy as documented by the institution;

2. There must be an identifiable marriage and family therapy training faculty and an identifiable body of students who complete that sequence of academic study; and

3. The academic unit must have clear authority and primary responsibility for the core and specialty areas.

B. Programs that are approved by CACREP [ as programs in marriage and family counseling/therapy ] or [ by ] COAMFTE are recognized as meeting the definition of a graduate degree program that prepares individuals to practice marriage and family therapy or a [ related ] discipline [ related to the practice of marriage and family therapy ] as defined in § 54.1-3500 of the Code of Virginia.

18 VAC 115-50-55. Course work requirements.

2. Consisted of a sequential integrated program A. The applicant shall have completed 60 semester hours or 90 quarter hours of graduate study in the following core areas with a minimum of nine six semester hours or 12 nine quarter hours completed in each of core areas identified in subdivisions 2a 1 and 2b 2 of this section subsection, and three semester hours or 4.5 quarter hours in each of the core areas identified in subdivisions 3 through 6 of this subsection (suggested courses are listed in parentheses after each core area):

a. 1. Marriage and family studies (marital and family development; family systems theory);

b. 2. Marriage and family therapy (systemic therapeutic interventions and application of major theoretical approaches);

c. 3. Human development (theories of counseling; psychotherapy techniques with individuals; human growth and lifespan development; personality theory; psychopathology; human sexuality; multicultural issues);

d. 4. Professional studies (professional identity and function; ethical and legal issues);

e. 5. Research (research methods; quantitative methods; statistics);

f. 6. Assessment and treatment (appraisal, assessment and diagnostic procedures); and

g. 7. Internship (minimum of one year, to include 300 hours of supervised direct client contact with individuals, couples and families). Supervised internship of 600 hours to include 240 hours of direct client contact. Three hundred of the internship hours and 120 of the direct client contact hours shall be with couples and families.

B. If the graduate hours in marriage and family therapy were begun prior to [ the effective date of this chapter January 19, 2000 ] , the board may accept those hours if they meet the requirements which were in effect on July 9, 1997.
18 VAC 115-50-60.  Supervised__clinical__experience
Residency.

A.  Registration.

1.  Applicants who render counseling services in a nonexempt setting shall:
   a.  With their supervisor, register their supervisory contract on the appropriate forms for board approval before starting to practice under supervision;
   b.  Have submitted an official transcript documenting a graduate degree as specified in 18 VAC 115-50-50 to include completion of the internship requirement specified in 18 VAC 115-50-55; and
   c.  Pay the registration fee.

2.  Applicants in exempt settings may register supervision with the board to assure acceptability at the time of application.

B.  Residency requirements.

1.  The applicant shall have completed at least two years of supervised post-graduate degree experience, representing no fewer than 4,000 hours of supervised work experience, to include 200 hours of face-to-face supervision with the supervisor in the practice of marriage and family therapy. Residents shall receive a minimum of one hour of face-to-face supervision for every 20 hours of supervised work experience. No more than 100 hours of the supervision may be acquired through group supervision, with the group consisting of no more than six residents. Two hours One hour of group supervision shall will be deemed equivalent to one hour of individual face-to-face supervision.

2.  Of the 4,000 hours stipulated, at least 1,000 2,000 hours must be acquired in direct client contact of which 500 1,000 hours shall be with couples or families or both.

3.  The supervised experience residency shall consist of practice in the core areas set forth in 18 VAC 115-50-50.

4.  Supervised experience The residency shall begin after the completion of a master's degree in marriage and family therapy or a related discipline as set forth in 18 VAC 115-50-50. However, internship hours completed by a graduate of a Commission on Accreditation for Marriage and Family Therapy Education accredited program as part of the graduate degree may count toward the 4,000 hours of supervised experience.

5.  A post-master's degree graduate-level internship completed in a program that meets the requirements of this subsection set forth in 18 VAC 115-50-50 may count toward for no more than 600 of the required 4,000 hours of experience. However, all 4,000 hours shall be continuous and integrated and shall, without exception, be conducted under qualified registered supervision. The internship shall include 20 hours of face-to-face on-site supervision, and 20 hours of face-to-face off-site supervision. Internship hours shall not begin until completion of 30 semester hours toward the graduate degree.

6.  In order for a graduate level internship to be counted toward a residency, either the clinical or faculty supervisor shall be licensed as set forth in subsection C of this section.

7.  Residents shall not call themselves marriage and family therapists, solicit clients, bill for services rendered or in any way represent themselves as marriage and family therapists. During the residency, they may use their names, the initials of their degree and the title “Resident in Marriage and Family Therapy.” Clients shall be informed in writing of the resident’s status, along with the name, address and telephone number of the resident's supervisor.

8.  Residents shall not engage in practice under supervision in any areas for which they do not have appropriate education.

9.  Residents who do not become candidates for licensure after five years of supervised training shall submit an explanation to the board stating reasons the residency should be allowed to continue.

B.  C.  Supervisory requirements.

1.  Prior to July 9, 2000, any A person who provides supervision for a resident in marriage and family therapy shall be licensed as a marriage and family therapist, professional counselor, clinical psychologist, clinical social worker or psychiatrist and shall be able to document on a board-approved form specific training in the supervision of marriage and family therapy in the jurisdiction where the supervision is being provided. Supervisors shall document two years post-licensure marriage and family therapy experience.

2.  After July 9, 2000, all supervision shall be provided by a licensed marriage and family therapist or a licensed professional counselor, clinical psychologist, clinical social worker or psychiatrist who meets the requirements of 18 VAC 115-50-50 and 18 VAC 115-50-60, and who is able to document on a board-approved form specific training in the supervision of marriage and family therapy.

3.  Supervision by an individual whose relationship to the resident is deemed by the board to compromise the objectivity of the supervisor is prohibited.

4.  The supervisor shall assume full responsibility for the clinical activities of residents as specified within the supervisory contract, for the duration of the supervised experience residency.

C.  Registration of supervision. Individuals registering supervision with the board shall submit in one package:

1.  A completed Registration of Supervision form;
2.  The registration fee set forth in 18 VAC 115-50-20; and
3.  Official graduate transcript or transcripts in the original sealed envelope with the registrar's signature across the sealed envelope flap submitted from the appropriate
institution of higher education directly to the applicant, verifying satisfactory completion of the education requirements set forth in 18 VAC 115-50-50.

18 VAC 115-50-70. General examination requirements.

A. All applicants for initial licensure shall pass an examination, with a passing score as determined by the board.

B. The examination shall concentrate on the core areas of marriage and family therapy set forth in subdivision A 2 subsection A of 18 VAC 115-50-59. 18 VAC 115-50-55.

C. Approved applicants shall sit for the examination within two years from the initial notification date of approval. Failure to do so will result in the revocation of approval and obligate the applicant to file a new application for examination.

D. Applicants who fail the examination twice in succession shall document completion of 45 clock hours of additional education or training for each area acceptable to the board addressing the areas of deficiency as reported in the examination results prior to obtaining board approval for reexamination.

18 VAC 115-50-80. Waiver of examination requirement. (Repealed.)

Prior to July 9, 1998, individuals who can document meeting the criteria in one of the following categories shall be licensed without examination:

1. Current and unrestricted professional counselor license in Virginia along with completion of four of the seven core coursework requirements outlined in 18 VAC 115-50-50; or

2. Clinical membership in the AAMFT and:
   a. A passing grade on the AAMFT examination as determined by the board; or
   b. Ten years continuous practice in marriage and family therapy along with three letters attesting to competency to practice from professionals who are either licensed mental health professionals or AAMFT supervisors.


A. All licensees shall renew licenses on or before June 30 of each odd-numbered year.

   B. All licensees who intend to continue to practice shall on or before the expiration date of the license submit to the board:

   1. A license renewal application supplied by the board; and

   2. The renewal fee prescribed in 18 VAC 115-50-20.

   C. D. Licensees shall provide the board with official documentation of a legal name change and written notification of address changes within 90 days of such change.

NOTICE: The forms used in administering 18 VAC 115-50-10 et seq., Regulations Governing the Practice of Marriage and Family Therapy are not being published due to the large number; however, the name of each form is listed below. The forms are available for public inspection at the Board of Licensed Professional Counselors, Marriage and Family Therapists and Substance Abuse Treatment Professionals, 6606 West Broad Street, 4th Floor, Richmond, Virginia, or at the office of the Registrar of Regulations, General Assembly Building, 2nd Floor, Richmond, Virginia.

FORMS

Marriage and Family Therapist Licensure Application, MFTAPP1, rev. 7/99.

Board of Professional Counselors and Marriage and Family Therapists Courses Outline Form.

Licensure Verification of Applicant, MFTAPP2, rev. 7/99.

Verification of Supervision for Marriage and Family Therapist Licensure, MFTAPP3, rev. 7/99.

Quarterly Evaluation Form, MFTAPP 3B, eff. 8/99.


Licensure Verification of Applicant.

Courses Outline Form for Marriage and Family Therapist Licensure, MFTAPP5, eff. 7/97.

Verification of Internship, MFTAPP6, eff. 8/99.

Verification of Internship Hours Toward the Residency, MFTAPP7, eff. 8/99.

Registration of Supervision for Marriage and Family Therapist Licensure, MFTREG1, rev. 8/99.

Supervisor’s Experience and Education.

Renewal Notice and Application.

Courses Outline Form.

Renewal Notice and Application, C-45128, rev. 8/97.

[ Supervision Outline Form for Marriage and Family Therapist Endorsement Applicants, MFTAPP8, eff. 12/99. ]

VA.R. Doc. No. R98-178; Filed December 1, 1999, 11:37 a.m.

* * * * * * *

Title of Regulation: 18 VAC 115-60-10 et seq. Regulations Governing the Practice of Licensed Substance Abuse Treatment Practitioners.

Statutory Authority: § 54.1-2400 and Chapter 35 (§ 54.1-3500 et seq.) of Title 54.1 of the Code of Virginia.

Effective Date: January 19, 2000.
Summary:
The regulations set forth the education, experience and examination requirements for licensure of substance abuse treatment practitioners, and establish standards of practice, renewal schedules and fees for licensed individuals. In accordance with a statutory requirement, the requirements for the educational credit hour, clinical experience hour, and clinical supervision hours are equivalent to those required for professional counselor licensure.

An amendment to the proposed regulations corrects an error which left a gap in the renewal instructions for individuals whose licenses have lapsed more than one year but less than four years. The board adopted an amendment to conform this regulation to the recently proposed fee changes for its other licensure categories, which provide for renewal with a penalty within one year of expiration, but require reinstatement after the one year has passed.

The board added a new form to help endorsement applicants document the hours of supervision received in another jurisdiction.

Summary of Public Comments and Agency’s Response: A summary of comments made by the public and the agency’s response may be obtained from the promulgating agency or viewed at the office of the Registrar of Regulations.

Agency Contact: Copies of the regulation may be obtained from Janet Delorme, Department of Health Professions, 6606 West Broad Street, 4th Floor, Richmond, VA 23230-1717, telephone (804) 662-9575.

CHAPTER 60.
REGULATIONS GOVERNING THE PRACTICE OF LICENSED SUBSTANCE ABUSE TREATMENT PRACTITIONERS.

PART I.
GENERAL PROVISIONS.

18 VAC 115-60-10. Definitions.
A. The following words and terms when used in this chapter shall have the meaning ascribed to them in § 54.1-3500 of the Code of Virginia:

“Board”
“Licensed substance abuse treatment practitioner”
“Substance abuse”
“Substance abuse treatment”

B. The following words and terms when used in this chapter 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 substance abuse treatment practitioner.

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

“Exempt setting” means an agency or institution in which licensure is not required to engage in the practice of substance abuse treatment according to the conditions set forth in § 54.1-3501 of the Code of Virginia.

“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.

“Jurisdiction” means a state, territory, district, province or country which has granted a professional certificate or license to practice a profession, use a professional title, or hold oneself out as a practitioner of that profession.

“Nonexempt setting” means a setting which does not meet the conditions of exemption from the requirements of licensure to engage in the practice of substance abuse treatment as set forth in § 54.1-3501 of the Code of Virginia.

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

“Residency” means a post-internship, supervised, clinical experience registered with the board.

“Resident” means an individual who has submitted a supervisory contract and has received board approval to provide clinical services in substance abuse treatment under supervision.

“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.

18 VAC 115-60-20. Fees required by the board.
A. The board has established the following fees applicable to licensure as a substance abuse treatment practitioner:

<table>
<thead>
<tr>
<th>Service</th>
<th>Fee</th>
</tr>
</thead>
<tbody>
<tr>
<td>Registration of supervision (initial)</td>
<td>$50</td>
</tr>
<tr>
<td>Add/change supervisor</td>
<td>$35</td>
</tr>
<tr>
<td>Licensure application</td>
<td>$100</td>
</tr>
<tr>
<td>Annual license renewal</td>
<td>$90</td>
</tr>
<tr>
<td>Duplicate license</td>
<td>$15</td>
</tr>
<tr>
<td>Verification of license to another jurisdiction</td>
<td>$10</td>
</tr>
<tr>
<td>Late renewal</td>
<td>$25</td>
</tr>
<tr>
<td>Replacement of or additional wall certificate</td>
<td>$15</td>
</tr>
<tr>
<td>Returned check</td>
<td>$15</td>
</tr>
</tbody>
</table>

B. Fees shall be paid by check or money order made payable to the Treasurer of Virginia and forwarded to the board. All fees are nonrefundable.
C. Examination fees shall be paid directly to the examination service according to its requirements.

18 VAC 115-60-30. Sex offender treatment provider certification.

Anyone licensed by the board who is seeking certification as a sex offender treatment provider shall adhere to the Regulations Governing the Certification of Sex Offender Treatment Providers, 18 VAC 125-30-10 et seq.

PART II.
REQUIREMENTS FOR LICENSURE.

18 VAC 115-60-40. Application for licensure by examination.

Every applicant for examination for licensure by the board shall:

1. Meet the degree program, course work and experience requirements prescribed in 18 VAC 115-60-60, 18 VAC 115-60-70 and 18 VAC 115-60-80; and

2. Submit the following items to the board office in one package not less than 90 days prior to the date of the examination:
   a. A completed application;
   b. Official transcripts documenting the applicant's completion of the degree program and course work requirements prescribed in 18 VAC 115-60-60 and 18 VAC 115-60-70;
   c. Verification of supervision forms documenting fulfillment of the experience requirements of 18 VAC 115-60-80 and copies of all required evaluation forms;
   d. Documentation of any other professional license or certificate ever held in another jurisdiction; and
   e. The licensure application fee.

18 VAC 115-60-50. Prerequisites for licensure by endorsement.

Every applicant for licensure by endorsement shall submit in one package:

1. A completed application;
2. The licensure application fee;
3. Verification of all professional licenses or certificates ever held in any other jurisdiction. In order to qualify for endorsement, the applicant shall have no unresolved disciplinary action against a license or certificate. The board will consider history of disciplinary action on a case-by-case basis;
4. Further documentation of one of the following:
   a. A current substance abuse treatment license in good standing in another jurisdiction obtained by meeting requirements substantially equivalent to those set forth in this chapter; or
   b. A mental health license in good standing in a category acceptable to the board which required completion of a master's degree in mental health to include 60 graduate semester hours in mental health; and

   (1) Board-recognized national certification in substance abuse treatment;
   (2) If the master's degree was in substance abuse treatment, two years of post-licensure experience in providing substance abuse treatment;
   (3) If the master's degree was not in substance abuse treatment, five years of post-licensure experience in substance abuse treatment plus 12 credit hours of didactic training in the substance abuse treatment competencies set forth in 18 VAC 115-60-70 C; or
   (4) Current substance abuse counselor certification in Virginia in good standing or a Virginia substance abuse treatment specialty licensure designation with two years of post-licensure or certification substance abuse treatment experience;
5. Verification of a passing score on a licensure examination as established by the jurisdiction in which licensure was obtained;
6. Official transcripts documenting the applicant's completion of the education requirements prescribed in 18 VAC 115-60-60 and 18 VAC 115-60-70; and
7. An affidavit of having read and understood the regulations and laws governing the practice of substance abuse treatment in Virginia.

18 VAC 115-60-60. Degree program requirements.

A. The applicant shall have completed a graduate degree from a program that prepares individuals to practice substance abuse treatment or a related counseling discipline as defined in § 54.1-3500 of the Code of Virginia from a college or university accredited by a regional accrediting agency that meets the following criteria:

1. There must be a sequence of academic study with the expressed intent to prepare counselors as documented by the institution;
2. There must be an identifiable counselor training faculty and an identifiable body of students who complete that sequence of academic study; and
3. The academic unit must have clear authority and primary responsibility for the core and specialty areas.

B. Education that does not come from a degree program meeting the requirements set forth in this section shall not be acceptable for licensure.

18 VAC 115-60-70. Course work requirements.

A. The applicant shall have completed 60 semester hours or 90 quarter hours of graduate study.

B. The applicant shall have completed a general core curriculum containing a minimum of three semester hours or
4.5 quarter hours in each of the areas identified in this section:

1. Professional identity, function and ethics;
2. Theories of counseling and psychotherapy;
3. Counseling and psychotherapy techniques;
4. Group counseling and psychotherapy, theories and techniques;
5. Appraisal, evaluation and diagnostic procedures;
6. Abnormal behavior and psychopathology;
7. Multicultural counseling, theories and techniques;
8. Research; and
9. Marriage and family systems theory.

C. The applicant shall also have completed 12 graduate semester credit hours or 18 graduate quarter hours in the [identified in this subsection].

1. Assessment, appraisal, evaluation and diagnosis specific to substance abuse;
2. Treatment planning models, client case management, interventions and treatments to include relapse prevention, referral process, step models and documentation process;
3. Understanding addictions: The biochemical, sociocultural and psychological factors of substance use and abuse;
4. Addictions and special populations including, but not limited to, adolescents, women, ethnic groups and the elderly; and
5. Client and community education.

D. The applicant shall have completed a supervised internship of 600 hours to include 240 hours of direct client contact. At least 450 of the internship hours and 200 of the direct client contact hours shall be in treating substance abuse-specific treatment problems.

E. One course may satisfy study in more than one content area set forth in subsections B and C of this section.

18 VAC 115-60-80. Residency.

A. Registration. Applicants who render substance abuse treatment services in a nonexempt setting shall:

1. With their supervisor, register their supervisory contract on the appropriate forms for board approval before starting to practice under supervision;
2. Have submitted an official transcript documenting a graduate degree as specified in 18 VAC 115-60-60 to include completion of the internship requirement specified in 18 VAC 115-60-70; and
3. Pay the registration fee.
communications. Clients shall be informed in writing of the resident’s status, the supervisor’s name, professional address, and telephone number.

8. Residents shall not engage in practice under supervision in any areas for which they have not had appropriate education.

D. Supervisory requirements.

1. A person who provides supervision for a resident in substance abuse treatment shall be licensed as a professional counselor, marriage and family therapist, substance abuse treatment practitioner, school psychologist, clinical psychologist, clinical social worker, clinical nurse specialist or psychiatrist in the jurisdiction where the supervision is being provided.

2. All supervisors shall document two years post-licensure substance abuse treatment experience, 100 hours of didactic instruction in substance abuse treatment, and training or experience in supervision. Within three years of the effective date of this chapter (insert date January 19, 2000), supervisors must document a three-credit-hour course in supervision.

3. Supervision by any individual whose relationship to the resident compromises the objectivity of the supervisor is prohibited.

4. The supervisor of a resident shall assume full responsibility for the clinical activities of that resident specified within the supervisory contract for the duration of the residency.

5. The supervisor shall complete evaluation forms to be given to the resident at the end of each three-month period.

6. The supervisor shall report the total hours of residency and shall evaluate the applicant’s competency in the six areas stated in subdivision C 1 of this section.

E. Documentation of supervision. Applicants shall document successful completion of their residency on the Verification of Supervision form at the time of application. Applicants must receive a satisfactory competency evaluation on each item on the evaluation sheet. Supervised experience obtained prior to the effective date of this chapter (insert date January 19, 2000), may be accepted towards licensure if this supervised experience met the board’s requirements which were in effect at the time the supervision was rendered.

PART III. EXAMINATIONS.

18 VAC 115-60-90. General examination requirements; schedules; time limits.

A. Every applicant for initial licensure as a substance abuse treatment practitioner by examination shall pass a written examination as prescribed by the board.

B. Every applicant for licensure as a substance abuse treatment practitioner by endorsement shall have passed an examination deemed by the board to be substantially equivalent to the Virginia examination.

C. The board shall notify all approved candidates in writing of the time and place of the examination.

D. A candidate approved by the board to sit for the examination shall take the 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 prescribed in this subsection:

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

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

E. The board shall establish a passing score on the written examination.

18 VAC 115-60-100. Reexamination.

A. After paying the examination fee, a candidate may be reexamined within an 18-month period without filing a new application.

B. Applicants who fail the examination twice in succession shall document completion of 45 clock hours of additional education or training acceptable to the board, addressing the areas of deficiency as reported in the examination results prior to obtaining board approval for reexamination.

PART IV. LICENSURE RENEWAL; REINSTATEMENT.

18 VAC 115-60-110. Renewal of licensure.

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

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

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

2. The renewal fee prescribed in 18 VAC 115-60-20.

C. Licensees shall notify the board of a change of address within 60 days. Failure to receive a renewal notice from the board shall not relieve the license holder from the renewal requirement.

18 VAC 115-60-120. Late renewal; reinstatement.

A. A person whose license has expired may renew it within one year after its expiration date by paying the penalty fee prescribed in 18 VAC 115-60-20, 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 reapply according to the requirements set forth in 18 VAC 115-60-40 or 18 VAC 115-60-50.
PART V.
STANDARDS OF PRACTICE; UNPROFESSIONAL CONDUCT; DISCIPLINARY ACTIONS; REINSTATEMENT.

18 VAC 115-60-130. 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 does not endanger the public health, safety, or welfare.
2. Practice only within the competency areas for which they are qualified by training or experience.
3. Be aware of competencies of practitioners in other fields of practice and make referrals for services when appropriate.
4. Stay abreast of new developments, concepts and practices which are important to providing appropriate professional services.
5. Terminate a service or consulting relationship when it is apparent that the client is not benefiting from the relationship.
6. Provide to clients only those services which are related to diagnostic or therapeutic goals.
7. Not offer services to a client who is receiving services from other mental health professionals without attempting to inform such other professionals of the planned provision of services.
8. Inform clients fully of the risks and benefits of services and treatment and obtain informed consent to all such services and treatment.
9. Ensure that the welfare of clients is not compromised by experimentation or research involving those clients and conform practice involving research or experimental treatment to the requirements of Chapter 5.1 (§ 32.1-162.16 et seq.) of Title 32.1 of the Code of Virginia.
10. Neither accept nor give commissions, rebates, or other forms of remuneration for referral of clients for professional services.
11. Inform clients of (i) the purposes of an interview, testing or evaluation session and (ii) the ways in which information obtained in such sessions will be used before asking the client to reveal personal information.
12. Consider the validity, reliability and appropriateness of assessments selected for use with clients and carefully interpret the performance of individuals from groups not represented in standardized norms.
13. Represent accurately their competence, education, training and experience.
14. In connection with practice as a substance abuse treatment practitioner, represent to the public only those educational and professional credentials as are related to such practice.
15. Not use the title “Doctor” or the abbreviation “Dr.” in writing or in advertising in connection with practice without including simultaneously a clarifying title, initials, abbreviation or designation or language that identifies the basis for use of the title, such as M.D., Ph.D., D.Min.
16. Announce professional services fairly and accurately in a manner which will aid the public in forming their own informed judgments, opinions and choices and which avoids fraud and misrepresentation.
17. Maintain client records securely, inform all employees of the requirements of confidentiality and provide for the disposal of records in a manner consistent with professional requirements.
18. Disclose client records to others in accordance with state and federal statutes and regulations including, but not limited to, §§ 32.1-127.1:03 (Patient Health Records Privacy Act), 2.1-342 B 3, (Virginia Freedom of Information Act) and 54.1-2400.1 (Mental Health Service Providers; Duty to Protect Third Parties; Immunity) of the Code of Virginia; 42 USC § 290dd-2 (Confidentiality of Drug and Alcohol Treatment Records); and 42 CFR Part 2 (Alcohol and Drug Abuse Patient Records and Regulations).
19. Maintain client records for a minimum of five years from the date of termination of the substance abuse treatment relationship, or as otherwise required by employer, hospital or insurance carrier.
20. Obtain informed consent from clients before (i) videotaping, (ii) audio recording, (iii) permitting third party observation, or (iv) using client records and clinical materials in teaching, writing or public presentations.
21. Not engage in dual relationships with clients, former clients, residents, supervisees, and supervisors that compromise the client's or resident's well being, impair the practitioner's or supervisor's objectivity and professional judgment or increase the risk of client or resident exploitation. This includes, but is not limited to, such activities as treating close friends, former sexual partners, employees or relatives, and engaging in business relationships with clients.
Engaging in sexual intimacies with current clients or residents is strictly prohibited. For at least five years after cessation or termination of professional services, licensees shall not engage in sexual intimacies with a therapy client or those included in collateral therapeutic services. Since sexual or romantic relationships are potentially exploitative, licensees shall bear the burden of demonstrating that there has been no exploitation. A patient's consent to, initiation of or participation in sexual behavior or involvement with a practitioner does not change the nature of the conduct nor lift the regulatory prohibition.
22. Recognize conflicts of interest and inform all parties of obligations, responsibilities and loyalties to third parties.
23. Report to the board known or suspected violations of the laws and regulations governing the practice of licensed or certified health care practitioners.

18 VAC 115-60-140. Grounds for revocation, suspension, probation, reprimand, censure, or denial of renewal of license.

A. Action by the board to revoke, suspend or decline to renew a license may be taken in accord with the following:

1. Conviction of a felony, of a misdemeanor involving moral turpitude, or violation of or aid to another in violating any provision of Chapter 35 (§ 54.1-3500 et seq.) of Title 54.1 of the Code of Virginia, any other statute applicable to the practice of substance abuse treatment, or any provision of this chapter.

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 substance abuse treatment with reasonable skill and safety to clients by reason of illness, abusive use of alcohol, drugs, narcotics, chemicals, or other type of material or result of any mental or physical condition.

4. Negligence in professional conduct or nonconformance with the Standards of Practice (18 VAC 115-60-130).

5. Performance of functions outside the demonstrable areas of competency.

B. Petition for rehearing. Following the revocation or suspension of a license the licensee may petition the board for rehearing upon good cause shown or as a result of substantial new evidence having been obtained that would alter the determination reached.

18 VAC 115-60-150. Reinstatement following disciplinary action.

A. Any person whose license has been revoked or denied renewal by the board under the provisions of 18 VAC 115-60-140 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.

NOTICE: The forms used in administering 18 VAC 115-60-10 et seq., Regulations Governing the Practice of Licensed Substance Abuse Treatment Practitioners are not being published due to the large number; however, the name of each form is listed below. The forms are available for public inspection at the Board of Licensed Professional Counselors, Marriage and Family Therapists and Substance Abuse Treatment Professionals, 6606 West Broad Street, 4th Floor, Richmond, Virginia, or at the office of the Registrar of Regulations, General Assembly Building, 9th and Broad Streets, 2nd Floor, Richmond, Virginia.
EMERGENCY REGULATIONS

TITLE 12. HEALTH

STATE BOARD OF HEALTH

Title of Regulation: 12 VAC 5-371-10 et seq. Regulations for the Licensure of Nursing Facilities (amending 12 VAC 5-371-40).


Statutory Authority: §§ 32.1-12 and 32.1-102.2 of the Code of Virginia.


Preamble:

This emergency action is a result of Virginia statutory law which requires that these regulatory changes be effective 280 days from enactment of the law, which occurred on March 29, 1999. Section 32.1-102.2 of the Code of Virginia requires the State Health Commissioner to condition the initial or renewal of a hospital or nursing home license on whether the applicant has complied with any agreement to provide a level of care at a reduced rate to indigents or accept patients requiring specialized care as a result of the granting of a Certificate of Public Need. Specifically, the proposed changes affect 12 VAC 5-371-40 (nursing facilities) and 12 VAC 5-410-70 (hospitals) respectively.

CHAPTER 371.
REGULATIONS FOR THE LICENSURE OF NURSING FACILITIES.

12 VAC 5-371-40. Licensing process.

A. Upon request, the center will provide consultation to any person seeking information about obtaining a license. The purpose of such consultation is to:

1. Explain the standards and the licensing process;
2. Provide assistance in locating other sources of information;
3. Review the potential applicant's proposed program plans, forms, and other documents, as they relate to standards; and
4. Alert the potential applicant regarding the need to meet other state and local ordinances, such as fire and building codes and environmental health standards, where applicable.

B. Upon request, the center will provide an application form for a license to operate a nursing facility.

C. The center shall consider the application complete when all requested information and the application fee is submitted with the form required. If the center finds the application incomplete, the applicant will be notified of receipt of the incomplete application.

D. The applicant shall complete and submit the initial application to the center at least 30 days prior to a planned opening date to allow the center time to act on the application. An application for a license may be withdrawn at any time.

E. Application for initial license of a nursing facility shall include a statement of any agreement made with the commissioner as a condition for Certificate of Public Need approval to provide a level of care at a reduced rate to indigents or accept patients requiring specialized care.

The initial license issued to any nursing facility that made such agreement as a condition of its Certification of Public Need approval shall not be renewed without demonstrating prior to or at the time of applying for renewal that it is substantially complying with its agreement.

F. The renewal of a nursing facility license shall be conditioned upon the up-to-date payment of any civil penalties owed as a result of willful refusal, failure, or neglect to honor certain conditions established in their award of a Certificate of Public Need pursuant to § 32.1-102.4 F of the Code of Virginia.

G. Prior to changes in operation which would affect the terms of the license, the licensee must secure a modification to the terms of the license from the center.

H. Requests to modify a license must be submitted in writing, 30 working days in advance of any proposed changes, to the Director of the Center for Quality Health Care Services and Consumer Protection.

I. The license shall be returned to the center following a correction or reissuance when there has been a change in:

1. Address;
2. Operator;
3. Name; or

J. The center will evaluate written information about any planned changes in operation which would affect either the terms of the license or the continuing eligibility for a license. A licensing representative may visit the facility during the process of evaluating a proposed modification.

K. If a modification can be granted, the center shall respond in writing with a modified license. In the event a new application is needed, the licensee will receive written notification. When the modification cannot be granted, the licensee shall be advised by letter.

L. The department shall send an application for renewal of the license to the licensee prior to the expiration date of the current license.

M. The licensee shall submit the completed renewal application form along with any required attachments and the application fee by the date indicated in the cover letter.

N. It is the licensee's responsibility to complete and return the application to assure timely processing. Should a current license expire before a new license is issued, the
current license shall remain in effect provided the complete and accurate application was filed on time.

CHAPTER 410.
RULES AND REGULATIONS FOR THE LICENSURE OF HOSPITALS IN VIRGINIA.

12 VAC 5-410-70. Request for issuance.

A. Hospital licenses shall be issued by the commissioner, but all requests for licensing shall be submitted initially to the office. The procedure for obtaining the license shall include the following steps:

1. Request for application forms shall be made in writing to the office;

2. Application for license or license renewal to establish or maintain a hospital shall be made and submitted to the office;

3. All categories of inpatient beds shall be included on the hospital application for licensure in order for the licensing agency to have an accurate and complete record of the total bed capacity of the facility;

4. Application for initial license, change in license, or license renewal shall be accompanied by a check or money order for the service charge, payable to the licensing agency; and

5. Application for initial license of a hospital or for additions to an existing licensed hospital must be accompanied by evidence of approval from a representative of the State Fire Marshal and a copy of the occupancy permit issued by the local building official; and

6. Application for initial license of a hospital shall include a statement of any agreement made with the commissioner as a condition for Certificate of Public Need approval to provide a level of care at a reduced rate to indigents or accept patients requiring specialized care.

The initial license issued to any hospital that made such agreement as a condition of its Certification of Public Need approval shall not be renewed without demonstrating prior to or at the time of applying for license renewal that it is substantially complying with its agreement.

B. The renewal of a facility license shall be conditioned upon the up-to-date payment of any civil penalties owed as a result of willful refusal, failure, or neglect to honor certain conditions established in their award of a Certificate of Public Need pursuant to § 32.1-102.4 F of the Code of Virginia.

/s/ E. Anne Peterson, M.D., M.P.H.
State Health Commissioner
Date: September 24, 1999

/s/ Claude A. Allen
Secretary of Health and Human Resources
Date: November 10, 1999
The Legislative Record is available on the Internet at http://dls.state.va.us/legrec99.htm
DEPARTMENT OF LABOR AND INDUSTRY

Safety and Health Codes Board

Notice of Periodic Review of Regulations Pursuant to Executive Order 25 (98)

Pursuant to Executive Order Number 25 (98), the Virginia Department of Labor and Industry and the Safety and Health Codes Board have scheduled regulations for review. The agency will conduct this review to determine whether the regulations should be terminated, amended, or retained as written. If any changes are deemed necessary, the Department of Labor and Industry will file the appropriate documentation as required by the Administrative Process Act (APA) (§ 9-6.14:1 et seq. of the Code of Virginia).

16 VAC 25-20-10 et seq. Registration Concerning Licensed Asbestos Contractor Notification, Asbestos Project Permits, and Permit Fees.

Description: Establishes the notification requirements for certain asbestos projects and provides for the payment of permit fees based on the size of the asbestos project. The Department of Labor and Industry seeks public comment regarding the following questions:

1. Does the regulation meet the following goals?
   - Reduce the incidence of material impairment of the health of Virginians due to exposure to asbestos in the workplace or as an environmental pollutant.
   - Protect the public’s health, safety and welfare with the least possible cost and intrusiveness to the citizens and businesses of the Commonwealth.

2. Is the regulation written clearly and understandably?


Description: Section 15.1-11.6 of the Code of Virginia authorizes a local government, at its option, to require boiler or pressure vessel operators to obtain an initial certification from the locality before engaging in the operation and maintenance of boilers and pressure vessels in the jurisdiction. This regulation provides a uniform statewide standard to determine ability, proficiency and qualification of local certification applicants. This standard is for the use of governing bodies of counties, cities and towns that have adopted ordinances requiring local certification. This regulation does not provide for state certification of boiler and pressure vessel operators.

The Department of Labor and Industry seeks public comment regarding the following questions:

1. Does the regulation meet the following goals?
   - Insure statewide uniformity in the determination of the ability, proficiency and qualifications of boiler and pressure vessel operators certified under a local government ordinance.
   - Protect the public’s health, safety and welfare with the least possible cost and intrusiveness to the citizens and businesses of the Commonwealth.

2. Is the regulation written clearly and understandably?

Written and electronically submitted comments on any of the listed regulations may be submitted from December 20, 1999, through January 10, 2000. Comments should be sent to Bonnie R. Hopkins, Regulatory Coordinator, Department of Labor and Industry, 13 South Thirteenth Street, Richmond, VA 23219, (804) 371-2631; FAX (804) 371-6524 or e-mail brh@doli.state.va.us.

STATE BOARD OF SOCIAL SERVICES

Notice of Public Comment

Pursuant to regulations at 45 CFR 261.41, Virginia will submit its estimate and methodology of the (TANF) Temporary Assistance for Needy Families caseload reduction credit to the United States Department of Health and Human Services following a comment period.

A public hearing on the estimate and methodology of the TANF caseload reduction credit will be conducted by the Department of Social Services, Temporary Assistance Programs Division, on December 21, 1999. The public
hearing will take place at 10 a.m. at the Virginia Department of Social Services, Theater Row Building, 730 East Broad Street, Richmond, VA 23219. The public is invited to attend and to comment.

Written comments may be submitted through December 21, 1999, to Mark Golden, TANF Program Consultant, Department of Social Services, Theater Row Building, 730 East Broad Street, Richmond, VA 23219.

Copies of the estimate and methodology of the TANF caseload reduction credit may be obtained by calling Mark Golden at (804) 692-1735 or by writing to Mr. Golden at the Department of Social Services, Theater Row Building, 730 East Broad Street, Richmond, VA 23219.

VIRGINIA CODE COMMISSION

Notice to State Agencies

Mailing Address: Virginia Code Commission, 910 Capitol Street, General Assembly Building, 2nd Floor, Richmond, VA 23219. You may FAX in your notice; however, we ask that you FAX two copies and do not follow up with a mailed copy. Our FAX number is: (804) 692-0625.

Forms for Filing Material for Publication in The Virginia Register of Regulations

All agencies are required to use the appropriate forms when furnishing material for publication in The Virginia Register of Regulations. The forms may be obtained from: Virginia Code Commission, 910 Capitol Street, General Assembly Building, 2nd Floor, Richmond, VA 23219, telephone (804) 786-3591.

Internet: Forms and other Virginia Register resources may be printed or downloaded from the Virginia Register web page: http://legis.state.va.us/codecomm/register/regindex.htm

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 OBJECTIONS - RR08
CALENDAR OF EVENTS

Symbol Key

Location accessible to handicapped
Teletype (TTY)/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) 698-1500 or Senate Information and Constituent Services at (804) 698-7410 or (804) 698-7419/TTY or visit the General Assembly web site's Legislative Information System (http://leg1.state.va.us/lis.htm) and select "Meetings."

VIRGINIA CODE COMMISSION

BOARD OF ACCOUNTANCY

December 20, 1999 - 10 a.m. -- Open Meeting
Department of Professional and Occupational Regulation, 3600 W. Broad St., Richmond, Virginia.

A meeting to review comments received from the Notice of Intended Regulatory Action (NOIRA), adopt proposed regulations for public comment, and consider and decide any issues pertinent to the implementation of the emergency regulations which became effective on October 4, 1999.

Contact: David E. Dick, Assistant Director, Department of Professional and Occupational Regulation, 3600 W. Broad St., Richmond, VA 23230, telephone (804) 367-8505, FAX (804) 367-2475, (804) 367-9753/TTY, e-mail accountancy@dpor.state.va.us, homepage http://www.state.va.us/dpor.

January 24, 2000 - 10 a.m. -- Open Meeting
Department of Professional and Occupational Regulation, 3600 W. Broad St., Richmond, Virginia.

A regular meeting. A public comment period will be held at the beginning of the meeting.

Contact: David E. Dick, Assistant Director, Department of Professional and Occupational Regulation, 3600 W. Broad St., Richmond, VA 23230, telephone (804) 367-8505, FAX (804) 367-2475, (804) 367-9753/TTY, e-mail accountancy@dpor.state.va.us, http://www.state.va.us/dpor.

DEPARTMENT OF AGRICULTURE AND CONSUMER SERVICES

Virginia Charity Food Assistance Advisory Board

January 6, 2000 - 10 a.m. -- Open Meeting
Washington Building, 1100 Bank Street, 2nd Floor Board Room, Richmond, Virginia.

A regular meeting to discuss issues related to food insecurity. The board will entertain public comment at the conclusion of all other business for a period not to exceed 30 minutes. Any person who needs any accommodation in order to participate at the meeting should contact Steven W. Thomas at least five days before the meeting date so that suitable arrangements can be made.

Contact: Steven W. Thomas, Executive Director, Virginia Charity Food Assistance Advisory Board, Washington Building, 1100 Bank Street, Room 809, Richmond, VA 23219, telephone (804) 786-3936, FAX (804) 371-7788.

Pesticide Control Board

January 13, 2000 - 9 a.m. -- Open Meeting
Washington Building, 1100 Bank Street, 2nd Floor, Board Room, Richmond, Virginia.

A general business meeting. Portions of the meeting may be held in closed session pursuant to § 2.1-344 of the Code of Virginia. The public will have an opportunity to comment on any matter not on the board's agenda beginning at 9 a.m. Any person who needs any accommodations in order to participate at the meeting should contact Dr. Marvin A. Lawson at least five days before the meeting date so that suitable arrangements can be made.

Contact: Dr. Marvin A. Lawson, Program Manager, Pesticide Control Board, Washington Building, 1100 Bank Street, Room 401, P.O. Box 1163, Richmond, VA 23218, telephone (804) 371-6558, toll-free (800) 552-9963.

Virginia Winegrowers Advisory Board

February 22, 2000 - 10 a.m. -- Open Meeting
Washington Building, 1100 Bank Street, Second Floor, Board Room, Richmond, Virginia.

A quarterly business meeting, including hearing and potential approval of minutes from the prior meeting, committee reports, treasurer's report, and a report from the Alcoholic Beverage Control Board. The board will entertain public comment at the conclusion of all other business for a period not to exceed 30 minutes. Any
person who needs any accommodations in order to participate at the meeting should contact Mary E. Davis-Barton at least five days before the meeting date so that suitable arrangements can be made.

Contact: Mary Davis-Barton, Board Secretary, Virginia Winegrowers Advisory Board, Washington Building, 1100 Bank Street, Suite 1010, Richmond, VA 23219, telephone (804) 371-7685, FAX (804) 786-3122.

STATE AIR POLLUTION CONTROL BOARD

January 4, 2000 - 9 a.m. -- Public Hearing
Main Street Centre, 600 East Main Street, Lower Level Conference Room, Richmond, Virginia.

January 24, 2000 - Public 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 State Air Pollution Control Board intends to amend regulations entitled: Regulations for the Control and Abatement of Air Pollution (Rev. S97): 9 VAC 5-20-10 et seq. General Provisions and 9 VAC 5-40-10 et seq. Existing Stationary Sources. The proposed regulation applies to hospital/medical/infectious waste incinerators (HMIWIs), and includes emission limits for particulate matter, carbon monoxide, dioxins/furans, hydrogen chloride, sulfur dioxide, nitrogen oxides, lead, cadmium, and mercury. Special HMIWI operator training and qualification requirements are included in order to assure proper facility operation and compliance with the emissions limitations; sources are also required to prepare overall waste management plans. Compliance, emissions testing, and monitoring requirements are delineated, as well as recordkeeping and reporting of such test results. Finally, specific compliance schedules are provided.

Request for Comments: The purpose of this notice is to provide the public with the opportunity to comment on the proposed regulation and the costs and benefits of the proposal.

Localities Affected: There is no locality which will bear any identified disproportionate material air quality impact due to the proposed regulation which would not be experienced by other localities.

Location of Proposal: The proposal, an analysis conducted by the department (including: a statement of purpose, a statement of estimated impact and benefits of the proposed regulation, an explanation of need for the proposed regulation, an estimate of the impact of the proposed regulation upon small businesses, identification of and comparison with federal requirements, and a discussion of alternative approaches) and any other supporting documents may be examined by the public at the Department's Office of Air Regulatory Development (Eighth Floor), 629 East Main Street, Richmond, Virginia and the Department's regional offices (listed below) between 8:30 a.m. and 4:30 p.m. of each business day until the close of the public comment period.

Request for Comments: The purpose of this notice is to provide the public with the opportunity to comment on the proposed regulation and the costs and benefits of the proposal.

Localities Affected: There is no locality which will bear any identified disproportionate material air quality impact due to the proposed regulation which would not be experienced by other localities.

Location of Proposal: The proposal, an analysis conducted by the department (including: a statement of purpose, a statement of estimated impact and benefits of the proposed regulation, an explanation of need for the proposed regulation, an estimate of the impact of the proposed regulation upon small businesses, identification of and comparison with federal requirements, and a discussion of alternative approaches) and any other supporting documents may be examined by the public at the Department's Office of Air Regulatory Development (Eighth Floor), 629 East Main Street, Richmond, Virginia and the Department's regional offices (listed below) between 8:30 a.m. and 4:30 p.m. of each business day until the close of the public comment period.

Southwest Regional Office
Department of Environmental Quality
355 Deadmore Street
Abingdon, Virginia
Ph: (540) 676-4800

West Central Regional Office
Department of Environmental Quality
3019 Peters Creek Road
Roanoke, Virginia
Ph: (540) 562-6700

Lynchburg Satellite Office
Department of Environmental Quality
7705 Timberlake Road
Lynchburg, Virginia
Ph: (804) 582-5120

Valley Regional Office
Department of Environmental Quality
4411 Early Road
Harrisonburg, Virginia 22801
Ph: (540) 574-7800

Fredericksburg Satellite Office
Department of Environmental Quality
806 Westwood Office Park
Fredericksburg, Virginia
Ph: (540) 899-4600

Northern Regional Office
Department of Environmental Quality
13901 Crown Court
Woodbridge, Virginia
Ph: (703) 583-3800

Piedmont Regional Office
Department of Environmental Quality
4949-A Cox Road
Glen Allen, Virginia
Ph: (804) 527-5020

Tidewater Regional Office
Department of Environmental Quality
5636 Southern Boulevard
Virginia Beach, Virginia
Ph: (757) 518-2000


Public comments may be submitted until 4:30 p.m., January 24, 2000, to the Director, Office of Air Regulatory Development, Department of Environmental Quality, P.O. Box 10009, Richmond, Virginia 23240.

Contact: Karen G. Sabasteanski, Policy Analyst, Office of Air Regulatory Development, Department of Environmental Quality, P.O. Box 10009, Richmond, VA 23240, telephone (804) 698-4426, FAX (804) 698-4510, toll-free (800) 592-5482 or (804) 698-4021/TTY 📞.
Calendar of Events

BOARD FOR ARCHITECTS, PROFESSIONAL ENGINEERS, LAND SURVEYORS, CERTIFIED INTERIOR DESIGNERS AND LANDSCAPE ARCHITECTS

Land Surveyor Section

January 20, 2000 - 11 a.m. -- Open Meeting
Department of Professional and Occupational Regulation, 3600 West Broad Street, Examination Conference Room, 5th Floor, Richmond, Virginia.

A meeting of the Land Surveyor Section and invited subject matter experts to conduct an exam workshop. A public comment period will be held at the beginning of the workshop. After the public comment period, the workshop will be conducted in closed executive session under authority of § 2.1-344 A 11 of the Code of Virginia due to the confidential nature of the examination. The public will not be admitted to the closed executive session.

Contact: Sharon M. Sweet, Examination Director, Department of Professional and Occupational Regulation, 3600 W. Broad St., Richmond, VA 23230-4917, telephone (804) 367-8572 or (804) 367-9753/TTY.

VIRGINIA BOARD FOR ASBESTOS AND LEAD

March 7, 2000 - 10 a.m. -- Open Meeting
Department of Professional and Occupational Regulation, 3600 West Broad Street, Conference Room 5W, Richmond, Virginia.

A meeting to conduct routine business. A public comment period will be held at the beginning of the meeting.

Contact: David E. Dick, Assistant Director, Virginia Board for Asbestos and Lead, Department of Professional and Occupational Regulation, 3600 W. Broad Street, Richmond, VA 23230, telephone (804) 367-8505, FAX (804) 367-2475, (804) 367-9753/TTY, e-mail asbestos@dpor.state.va.us.

ASSISTIVE TECHNOLOGY LOAN FUND AUTHORITY

January 20, 2000 - 10 a.m. -- Open Meeting
February 17, 2000 - 10 a.m. -- Open Meeting
Department of Rehabilitative Services, 8004 Franklin Farms Drive, Richmond, Virginia. (Interpreter for the deaf provided upon request)

A monthly board meeting of the Board of Directors to review applications for guaranteed loans. Public comment is invited. The board will meet in closed session to review loan applications in order to protect the personal information of the applicants.

Contact: Gail Stubbs, Assistive Technology Loan Fund Authority, 8004 Franklin Farms Drive, Richmond, VA 23228, telephone (804) 662-7331, FAX (804) 662-9533, (804) 662-7331/TTY, e-mail loanfund@erols.com, homepage http://www.cns.state.va.us/atlfa.

BOARD FOR BARBERS

February 7, 2000 - 10 a.m. -- Open Meeting
Department of Professional and Occupational Regulation, 3600 West Broad Street, 4th Floor, Richmond, Virginia.

An open meeting to discuss regulatory review and other matters requiring board action, including disciplinary cases. All meetings are subject to cancellation. The time of the meeting is subject to change. A public comment period will be held at the beginning of the meeting. Any person desiring to attend the meeting and requiring special accommodations or interpretive services should contact the department at 804-367-8590 or 367-9753/TTY at least 10 days prior to the meeting so that suitable arrangements can be made for an appropriate accommodation. The department fully complies with the Americans with Disabilities Act.

Contact: Nancy Taylor Feldman, Assistant Director, Department of Professional and Occupational Regulation, 3600 West Broad Street, 4th Floor, Richmond, VA 23230, telephone (804) 367-8590, FAX (804) 367-2474, (804) 367-9753/TTY, e-mail barbers@dpor.state.va.us, homepage http://www.state.va.us/dpor.

CEMETERY BOARD

January 19, 2000 - 9:30 a.m. -- Open Meeting
Department of Professional and Occupational Regulation, 3600 West Broad Street, Richmond, Virginia.

A regular business meeting.

Contact: Eric L. Olson, Regulatory Boards Administrator, Department of Professional and Occupational Regulation, 3600 W. Broad Street, Richmond, VA 23230, telephone (804) 367-2039, FAX (804) 367-2475, (804) 367-9753/TTY, e-mail olson@dpor.state.va.us.

January 20, 2000 - 8:30 a.m. -- Open Meeting
Department of Professional and Occupational Regulation, 3600 West Broad Street, Richmond, Virginia.

A regular meeting of the Delivery Committee to develop a working definition of the delivery of cemetery items.

Contact: Eric L. Olson, Regulatory Boards Administrator, Department of Professional and Occupational Regulation, 3600 W. Broad Street, Richmond, VA 23230, telephone (804) 367-2039, FAX (804) 367-2475, (804) 367-9753/TTY, e-mail olson@dpor.state.va.us, http://www.state.va.us/dpor.
STATE BOARD FOR COMMUNITY COLLEGES

January 26, 2000 - 12:30 p.m. -- Open Meeting
Virginia Community College System, James Monroe Building, 101 North 14th Street, 15th Floor, Godwin-Hamel Board Room, Richmond, Virginia.

Telephonic meetings of the following committees: Academic and Student Affairs, Audit, Budget and Finance, Facilities, and Personnel with times to be announced at a later date.


January 27, 2000 - 9 a.m. -- Open Meeting
Virginia Community College System, James Monroe Building, 101 North 14th Street, 14th Floor, Compressed Video Room, Richmond, Virginia.

A regular meeting to be held by video conference. Other sites available to the public will be announced.


COMPENSATION BOARD

December 21, 1999 - 11 a.m. -- Open Meeting
January 25, 2000 - 11 a.m. -- Open Meeting
Compensation Board, 202 North 9th Street, 10th Floor, Richmond, Virginia.

A monthly board meeting.

Contact: Cindy Waddell, Administrative Assistant, Compensation Board, P.O. Box 710, Richmond, VA 23218, telephone (804) 786-0786, FAX (804) 371-0235, e-mail cwaddell@scb.state.va.us.

January 11, 2000 - 2 p.m. -- Open Meeting
Compensation Board, 202 North 9th Street, 10th Floor, Richmond, Virginia.

A meeting with Constitutional Officer Association presidents regarding upcoming legislation.

Contact: Cynthia P. Waddell, Administrative Staff Assistant, Compensation Board, P.O. Box 710, Richmond, VA 23218, telephone (804) 786-0786, FAX (804) 371-0235, e-mail cwaddell@scb.state.va.us.

BOARD FOR COSMETOLOGY

March 6, 2000 - 8:30 a.m. -- Open Meeting
Department of Professional and Occupational Regulation, 3600 W. Broad Street, 4th Floor, Richmond, Virginia.

A meeting to discuss regulatory review and other matters requiring board action, including disciplinary cases. A public comment period will be held at the beginning of the meeting. All meetings are subject to cancellation. The time of the meeting is subject to change. Any persons desiring to attend the meeting and requiring special accommodations or interpretative services should contact the department at 804-367-8590 or 804-367-9753/TTY at least 10 days prior to the meeting so that suitable arrangements can be made for an appropriate accommodation. The department fully complies with the Americans with Disabilities Act.

Contact: Nancy Taylor Feldman, Assistant Director, Department of Professional and Occupational Regulation, 3600 W. Broad Street, 4th Floor, Richmond, VA 23230-4917, telephone (804) 367-8590, FAX (804) 367-2474, (804) 367-9753/TTY, e-mail cosmo@dpor.state.va.us, homepage http://www.state.va.us/dpor.

BOARD OF DENTISTRY

January 6, 2000 - 8:30 a.m. -- Open Meeting
Department of Health Professions, 6606 West Broad Street, 5th Floor, Richmond, Virginia.

A meeting of the Legislative/Regulatory Committee to consider legislative and regulatory issues. Public comment may be received at the beginning of meeting.

Contact: Marcia J. Miller, Executive Director, Board of Dentistry, 6606 West Broad Street, Richmond, VA 23230-1717, telephone (804) 662-9906, FAX (804) 662-9943, (804) 662-7197/TTY, e-mail mjm1@dhp.state.va.us, homepage http://www.dhp.state.va.us.

January 6, 2000 - 9 a.m. -- Open Meeting
Department of Health Professions, 6606 West Broad Street, 5th Floor, Conference Room 2, Richmond, Virginia.

A regular board meeting.

Contact: Marcia J. Miller, Executive Director, Board of Dentistry, 6606 W. Broad Street, 4th Floor, Richmond, VA 23230-1717, telephone (804) 662-9906, FAX (804) 662-9114, (804) 662-7197/TTY.

January 6, 2000 - 10:30 a.m. -- Open Meeting
January 7, 2000 - 1 p.m. -- Open Meeting
Department of Health Professions, 6606 West Broad Street, 5th Floor, Richmond, Virginia.

A Special Conference Committee meeting to hear disciplinary matters.
Calendar of Events

Contact: Marcia J. Miller, Executive Director, Board of Dentistry, 6606 West Broad Street, Richmond, VA 23230-1717, telephone (804) 662-9906, FAX (804) 662-9943, (804) 662-7197/TTY ☎, e-mail mjm1@dhp.state.va.us, homepage http://www.dhp.state.va.us.

January 7, 2000 - 8:30 a.m. -- Open Meeting
Department of Health Professions, 6606 West Broad Street, 5th Floor, Richmond, Virginia. 🎈 (Interpreter for the deaf provided upon request)

A formal hearing on a disciplinary matter.

Contact: Marcia J. Miller, Executive Director, Board of Dentistry, 6606 West Broad Street, Richmond, VA 23230-1717, telephone (804) 662-9906, FAX (804) 662-9943, (804) 662-7197/TTY ☎, e-mail mjm1@dhp.state.va.us, homepage http://www.dhp.state.va.us.

DESIGN-BUILD/CONSTRUCTION MANAGEMENT REVIEW BOARD

January 24, 2000 - 11 a.m. -- Open Meeting
The Library of Virginia, 800 East Broad Street, Richmond, Virginia. 🎈 (Interpreter for the deaf provided upon request)

A meeting to review requests submitted by localities for the use of the design-build or construction management type of contract. Public comments will be received. Please contact the Division of Engineering and Buildings to confirm meeting.

Contact: Joseph M. West, Jr., Assistant Director for Administration, Design-Build/Construction Management Review Board, 805 E. Broad Street, Room 101, Richmond, VA 23219, telephone (804) 786-3263, FAX (804) 371-7934, (804) 786-6152/TTY ☎, e-mail jwest@dgs.state.va.us, homepage http://dgs.state.va.us.

BOARD OF EDUCATION

January 6, 2000 - 9 a.m. -- Open Meeting
Location to be determined.
February 24, 2000 - 9 a.m. -- Open Meeting
March 23, 2000 - 9 a.m. -- Open Meeting
James Monroe Building, 101 North 14th Street, Richmond, Virginia. 🎈 (Interpreter for the deaf provided upon request)

The Board of Education and the Board of Vocational Education will hold its regularly scheduled meeting. Business will be conducted according to items on the agenda. The agenda is available upon request.

Contact: Dr. Margaret Roberts, Executive Assistant for State Board of Education, Department of Education, Monroe Building, 101 North 14th Street, P.O. Box 2120, Richmond, VA 23218-2120, telephone (804) 225-2540, FAX (804) 225-2524 or toll-free (800) 292-3829.

LOCAL EMERGENCY PLANNING COMMITTEE - HANOVER COUNTY

January 18, 2000 - 9 a.m. -- Open Meeting
Hanover Fire Administration, Emergency Operation Center, 13326 Hanover Courthouse Road, Route 301, Hanover, Virginia. 🎈

A meeting to meet the requirement of the Chemical Safety Information, Site Security and Fuels Relief Act to inform the public about local facilities' risk management plans by February 1, 2000, and to elect LEPC officers for 2000.

Contact: John F. Trivellin, CEM, Deputy Fire Marshal/Hazardous Materials Coordinator, Hanover County Fire Administration, P.O. Box 470, Hanover, VA 23069, telephone (804) 537-6195, ext. 207.

LOCAL EMERGENCY PLANNING COMMITTEE - WINCHESTER

January 20, 2000 - 2 p.m. -- Open Meeting
Shawnee Fire Company, 2333 Roosevelt Boulevard, Winchester, Virginia.

A meeting to meet the requirement of the Chemical Safety Information, Site Security and Fuels Relief Act to inform the public about local facilities’ risk management plans by February 1, 2000, and to elect LEPC officers for 2000.

Contact: L. A. Miller, Fire and Rescue Chief, Winchester Fire and Rescue Department, 126 N. Cameron St., Winchester, VA 22601, telephone (540) 662-2298, (540) 667-0118 or (540) 662-4131/TTY ☎

DEPARTMENT OF ENVIRONMENTAL QUALITY

January 4, 2000 - 7 p.m. -- Public Hearing
Smith Bland Regional Library, 118 South Sheeffey Street, Marion, Virginia. 🎈
A public hearing to receive comments on a draft permit for Marion Composites to modify and operate their composites coating operation located in Marion, Virginia.

**Contact:** James R. Stanley, Department of Environmental Quality, Southwest Regional Office, 355 Deadmore Street, Abingdon, VA 24212, telephone (540) 676-4819, e-mail jrstanley@deq.state.va.us, http://www.deq.state.va.us.

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**BOARD OF FUNERAL DIRECTORS AND EMBALMERS**

**January 5, 2000 - 9 a.m. -- Open Meeting**
Department of Health Professions, 6606 West Broad Street, 5th Floor, Conference Room 3, Richmond, Virginia.

A meeting of the Legislative Committee to discuss and review legislative proposals for the 2001 Session of the General Assembly.

**Contact:** Cheri Emma-Leigh, Administrative Staff Assistant, Board of Funeral Directors and Embalmers, 6606 W. Broad Street, 4th Floor, Richmond, VA 23230, telephone (804) 662-9907, FAX (804) 662-9523, e-mail CEmma-Leigh@dhp.state.va.us, homepage http://dhp.state.va.us.

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**DEPARTMENT OF GAME AND INLAND FISHERIES**

**February 8, 2000 - 7 p.m. -- Open Meeting**
Department of Game and Inland Fisheries, Williamsburg Regional Office, 5806 Mooretown Road, Williamsburg, Virginia.

**February 9, 2000 - 7 p.m. -- Open Meeting**
Department of Game and Inland Fisheries, Lynchburg Regional Office, 910 Thomas Jefferson Road, Forest, Virginia.

**February 10, 2000 - 7 p.m. -- Open Meeting**
Department of Game and Inland Fisheries, Fredericksburg Regional Office, 1320 Belman Road, Fredericksburg, Virginia.

**February 15, 2000 - 7 p.m. -- Open Meeting**
Smyth-Bland Regional Library, Copenhaver Meeting Room, 118 South Sheffey Street, Marion, Virginia.

**February 16, 2000 - 7 p.m. -- Open Meeting**
Department of Game and Inland Fisheries, Verona (Staunton) Regional Office, 4724 Lee Highway, Verona, Virginia.

The Virginia Department of Game and Inland Fisheries (DGIF) is hosting five public meetings in February 2000 to discuss Virginia’s freshwater fishing regulations and agency programs with anglers and other interested parties. Interested individuals are invited to join the DGIF staff to discuss these subjects. Public comments and suggestions received will be considered by staff as they refine current programs, develop new ones, and develop staff recommendations for amendments to freshwater fish and fishing regulations. Agency staff will present such recommendations to the Board of Game and Inland Fisheries at its August 2000 meeting as part of the regular biennial review of freshwater fish and fishing regulations.

**Contact:** Phil Smith, Policy Analyst, Department of Game and Inland Fisheries, 4010 W. Broad Street, Richmond, VA, telephone (804) 367-1000 or FAX (804) 367-0488.

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**BOARD OF HEALTH PROFESSIONS**

**January 7, 2000 - 9 a.m. -- Public Hearing**
Southern States Building, 6606 West Broad Street, 5th Floor, Conference Room 1, Richmond, Virginia.

A public hearing to receive comment on a draft report on the study of the regulation of clinical lab specialists.

**Contact:** Elizabeth A. Carter, Ph.D., Deputy Executive Director, Board of Health Professions, Southern States Building, 6606 W. Broad Street, 4th Floor, Richmond, VA 23230-1717, telephone (804) 662-7691, FAX (804) 662-7098, (804) 662-7197/TTY, e-mail ecarter@dhp.state.va.us, homepage http://dhp.state.va.us.

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**BOARD FOR HEARING AID SPECIALISTS**

**January 25, 2000 - 8:30 a.m. -- Open Meeting**
Department of Professional and Occupational Regulation, 3600 West Broad Street, 4th Floor, Richmond, Virginia.

An open meeting to discuss regulatory review and other matters requiring board action, including disciplinary cases. A public comment period will be held at the beginning of the meeting. All meetings are subject to cancellation. The time of the meeting is subject to change. Any persons desiring to attend the meeting and requiring special accommodations or interpretive services should contact the department at 804-367-8590 or 804-367-9753/TTY at least 10 days prior to the meeting so that suitable arrangements can be made for an appropriate accommodation. The department fully complies with the Americans with Disabilities Act.

**Contact:** Nancy Taylor Feldman, Assistant Director, Department of Professional and Occupational Regulation, 3600 West Broad Street, 4th Floor, Richmond, VA 23230-4917, telephone (804) 367-8590, FAX (804) 367-2474, (804) 367-9753/TTY, e-mail hearingaidspec@dpor.state.va.us, homepage http://www.state.va.us/dpor.

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**STATE COUNCIL OF HIGHER EDUCATION FOR VIRGINIA**

**January 11, 2000 - 9 a.m. -- Open Meeting**

**February 8, 2000 - 9 a.m. -- Open Meeting**

James Monroe Building, 101 North 14th Street, Richmond, Virginia.

**Calendar of Events**

**Volume 16, Issue 7**

**Monday, December 20, 1999**
Calendar of Events

A teleconferenced meeting. Locations are McGuire, Woods, Battle and Boothe; World Trade Center, Suite 9000, Norfolk, Virginia; and 420 Park Street, Charlottesville, Virginia. Times may vary.

Contact: Pamela H. Landrum, Administrative Staff Assistant, State Council of Higher Education for Virginia, James Monroe Building, 101 N. 14th Street, Richmond, VA 23219, telephone (804) 225-2602, FAX (804) 371-7911, e-mail landrum@schev.edu, homepage http://schev.edu.

January 18, 2000 - 8:30 a.m. -- Open Meeting
James Monroe Building, 9th Floor, Richmond, Virginia. (Interpreter for the deaf provided upon request)

Monthly committee and council meetings.

Contact: Pamela H. Landrum, Administrative Staff Assistant, State Council of Higher Education for Virginia, James Monroe Building, 101 N. 14th Street, Richmond, VA 23219, telephone (804) 225-2602, FAX (804) 371-7911, e-mail landrum@schev.edu, homepage http://schev.edu.

HOPEWELL INDUSTRIAL SAFETY COUNCIL

January 4, 2000 - 9 a.m. -- Open Meeting
February 1, 2000 - 9 a.m. -- Open Meeting
March 7, 2000 - 9 a.m. -- Open Meeting
Hopewell Community Center, 100 West City Point Road, Hopewell, Virginia. (Interpreter for the deaf provided upon request)

Local Emergency Preparedness Committee meeting on emergency preparedness as required by SARA Title III.

Contact: Robert Brown, Emergency Services Coordinator, Hopewell Industrial Safety Council, 300 N. Main Street, Hopewell, VA 23860, telephone (804) 541-2298.

BOARD OF HOUSING AND COMMUNITY DEVELOPMENT

January 10, 2000 - Public 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 Board of Housing and Community Development intends to amend regulations entitled: 13 VAC 5-111-10 et seq. Enterprise Zone Program Regulation. The amendments address changes made during the 1999 General Assembly session to the Virginia Enterprise Zone Act. These changes relate to the increase in total state enterprise zones from 50 to 55 with special conditions for the five newly designated zones. In addition, interpretive changes have been made for guidance.


Contact: M. Shea Hollifield, Deputy Director, Department of Housing and Community Development, 501 N. 2nd St., Richmond, VA 23219, telephone (804) 371-7030, FAX (804) 371-7093 or (804) 371-7089/TTY.

STATEWIDE INDEPENDENT LIVING COUNCIL

January 5, 2000 - 11 a.m. -- Open Meeting
Department of Rehabilitative Services, 8004 Franklin Farms Drive, Richmond, Virginia. (Interpreter for the deaf provided upon request)

A meeting of the Executive Committee to address council business and plan the quarterly meeting agenda. Individuals wishing to participate via telecommunication should contact the council.

Contact: Jim Rothrock, Statewide Independent Living Council, 1802 Marriott Rd., Richmond, VA 23229, telephone (804) 673-0119, FAX (804) 282-7118.

January 12, 2000 - 1 p.m. -- Open Meeting
Department for the Visually Handicapped, 397 Azalea Avenue, Resource and Information Library, Richmond, Virginia. (Interpreter for the deaf provided upon request)

A regular quarterly meeting to review progress and assess the impact of the state plan for independent living.

Contact: Jim Rothrock, Statewide Independent Living Council, 1802 Marriott Rd., Richmond, VA 23229, telephone (804) 673-0119, FAX (804) 282-7110.

DEPARTMENT OF LABOR AND INDUSTRY

Migrant and Seasonal Farmworkers Board

January 19, 2000 - 10 a.m. -- Open Meeting
Jackson Center Building, 501 North Second Street, 1st Floor, Richmond, Virginia. (Interpreter for the deaf provided upon request)

A regular quarterly meeting of the board rescheduled from December 1, 1999.

Contact: Patti C. Bell, Public Relations Coordinator, Department of Labor and Industry, 13 S. Thirteenth Street, Richmond, VA 23219, telephone (804) 225-3083, FAX (804) 786-8418, (804) 786-2376/TTY, e-mail pcb@doli.state.va.us, homepage http://www.dli.state.va.us.

STATE LIBRARY BOARD

January 21, 2000 - 8:15 a.m. -- Open Meeting
The Library of Virginia, 800 East Broad Street, Richmond, Virginia.

March 13, 2000 - 8:15 a.m. -- Open Meeting
Location to be announced.

A meeting to discuss matters pertaining to The Library of Virginia and The Library Board.

The following committees will meet at 8:15 a.m.

Public Library Development Committee (Orientation Room)
Publications and Educational Services Committee (Conference Room B)

Virginia Register of Regulations 918
LITTER CONTROL AND RECYCLING FUND ADVISORY BOARD

January 5, 2000 - 10 a.m. -- Open Meeting
701 East Franklin Street, Lower Level Conference Room, Richmond, Virginia (Interpreter for the deaf provided upon request)

A quarterly meeting.

Contact: Michael P. Murphy, Director, Environmental Enhancement, Litter Control and Recycling Fund Advisory Board, P.O. Box 10009, Richmond, VA 23240-0009, telephone (804) 698-4003, FAX (804) 698-4319, toll-free (800) 592-5482, (804) 698-4021/TTY.

COMMISSION ON LOCAL GOVERNMENT

January 10, 2000 - 10 a.m. -- Open Meeting
900 East Main Street, Suite 103, Richmond, Virginia (Interpreter for the deaf provided upon request)

A regular meeting to consider such matters as may be presented.

Contact: Barbara W. Bingham, Administrative Assistant, Commission on Local Government, 900 E. Main Street, Suite 103, Richmond, VA 23219-3513, telephone (804) 786-6508, FAX (804) 371-7999, (800) 828-1120/TTY, e-mail bbingham@clg.state.va.us, http://www.state.va.us/clg.

February 21, 2000 - 10:30 a.m. -- Public Hearing
Clifton Forge area; site to be determined.

Oral presentations regarding the City of Clifton Forge's proposed reversion to a town in Alleghany County. Persons desiring to participate in the meeting and requiring special accommodations or interpreter services should contact the commission.

Contact: Barbara W. Bingham, Administrative Assistant, Commission on Local Government, 900 E. Main Street, Suite 103, Richmond, VA 23219-3513, telephone (804) 786-6508, FAX (804) 371-7999, (800) 828-1120/TTY, e-mail bbingham@clg.state.va.us, http://www.state.va.us/clg.

MARINE RESOURCES COMMISSION

December 21, 1999 - 9:30 a.m. -- Open Meeting
January 25, 2000 - 9:30 a.m. -- Open Meeting
February 22, 2000 - 9:30 a.m. -- Open Meeting
March 28, 2000 - 9:30 a.m. -- Open Meeting

The commission will hear and decide the following marine environmental matters beginning at 9:30 a.m.: permit applications for projects in wetlands, bottom lands, coastal primary sand dunes and beaches; appeals of local wetland board decisions; and policy and regulatory issues. The commission will hear and decide the following fishery management items beginning at approximately noon: regulatory proposals; fishery management plans; fishery conservation issues; licensing; and shellfish leasing. Meetings are open to the public. Testimony will be taken under oath from parties addressing agenda items on permits and licensing. Public comments will be taken on resource matters, regulatory issues and items scheduled for public hearing.

Contact: LaVerne Lewis, Secretary to the Commission, Marine Resources Commission, P.O. Box 756, Newport News, VA 23607-0756, telephone (757) 247-2261, toll-free (800) 541-4646 or (757) 247-2292/TTY.
Calendar of Events

DEPARTMENT OF MEDICAL ASSISTANCE SERVICES

January 4, 2000 - 1 p.m. -- Open Meeting
Department of Medical Assistance Services, 600 East Broad Street, Suite 1300, Board Room, Richmond, Virginia.

A meeting of the Virginia Medicaid Pharmacy Liaison Committee to conduct routine business.

Contact: Marianne Rollings, Pharmacy Services, Division of Program Operators, Department of Medical Assistance Services, 600 E. Broad St., Suite 1300, Richmond, VA 23219, telephone (804) 225-4268.

BOARD OF MEDICINE

January 5, 2000 - 8:30 a.m. -- Open Meeting
Department of Health Professions, 6606 West Broad Street, 5th Floor, Richmond, Virginia

A formal administrative hearing to inquire into allegations that certain practitioners may have violated laws and regulations governing the practice of medicine and other healing arts in Virginia. The panel will meet in open and closed sessions pursuant to § 2.1-344 A 7 and A 15 of the Code of Virginia. Public comment will not be received.

Contact: Karen W. Perrine, Deputy Executive Director, Board of Medicine, 6606 W. Broad Street, 4th Floor, Richmond, VA 23230, telephone (804) 662-7332, FAX (804) 662-9943, (804) 662-7197/TTY

January 6, 2000 - 1 p.m. -- Open Meeting
Department of Health Professions, 6606 West Broad Street, 5th Floor, Richmond, Virginia

A meeting of the Advisory Board on Athletic Training to discuss the establishment of regulations mandated by § 54.1-2957.5 of the Code of Virginia.

Contact: William L. Harp, M.D., Executive Director, Board of Medicine, 6606 W. Broad Street, 4th Floor, Richmond, VA 23230-1717, telephone (804) 662-9960, FAX (804) 662-9517, (804) 662-7197/TTY

January 12, 2000 - 9 a.m. -- Open Meeting
Department of Health Professions, 6606 West Broad Street, 5th Floor, Richmond, Virginia

A meeting of the Advisory Committee on Acupuncture to discuss regulatory review of regulations 18 VAC 85-110-10 et seq., Regulations Governing the Practice of Licensed Acupuncturists, and such other issues which may be presented. The advisory board will entertain public comments during the first 15 minutes on agenda items.

Contact: William L. Harp, M.D., Executive Director, Board of Medicine, 6606 W. Broad St., 4th Floor, Richmond, VA 23230-1717, telephone (804) 662-9960, FAX (804) 662-9517, (804) 662-7197/TTY

January 13, 2000 - 1 p.m. -- Open Meeting
Department of Health Professions, 6606 West Broad Street, 5th Floor, Richmond, Virginia

A meeting of the Advisory Board on Occupational Therapy to review public comments and make recommendations to the Board of Medicine regarding the regulatory review of regulations 18 VAC 85-80-10 et seq., Regulations for Licensing of Occupational Therapists, and such other issues which may be presented. The advisory board will entertain public comments during the first 15 minutes on agenda items.

Contact: William L. Harp, M.D., Executive Director, Board of Medicine, 6606 W. Broad St., 4th Floor, Richmond, VA 23230-1717, telephone (804) 662-9960, FAX (804) 662-9517, (804) 662-7197/TTY

January 13, 2000 - 9 a.m. -- Open Meeting
Department of Health Professions, 6606 West Broad Street, 5th Floor, Richmond, Virginia

A meeting of the Advisory Committee on Radiological Technology to review public comments and make recommendations to the board regarding the regulations 18 VAC 85-101-10 et seq., Regulations Governing the Licensure of Radiologic Technologists Practitioners and Radiologic Technologist-Limited, and such other issues which may be presented. The advisory board will entertain public comments during the first 15 minutes on agenda items.

Contact: William L. Harp, M.D., Executive Director, Board of Medicine, 6606 W. Broad Street, 4th Floor, Richmond, VA 23230-1717, telephone (804) 662-9960, FAX (804) 662-9517, (804) 662-7197/TTY

January 14, 2000 - 9 a.m. -- Open Meeting
Department of Health Professions, 6606 West Broad Street, 5th Floor, Richmond, Virginia

A meeting of the Advisory Board on Respiratory Care to review public comments and make recommendations to the Board of Medicine regarding the regulatory review of regulations 18 VAC 85-40-10 et seq., Regulations Governing the Practice of Respiratory Care Practitioners, and such other issues which may be presented. The advisory board will entertain public comments during the first 15 minutes on agenda items.

Contact: William L. Harp, M.D., Executive Director, Board of Medicine, 16606 W. Broad St., 4th Floor, Richmond, VA 23230-1717, telephone (804) 662-9960, FAX (804) 662-9517, (804) 662-7197/TTY

January 14, 2000 - 9 a.m. -- Open Meeting
Department of Health Professions, 6606 West Broad Street, 5th Floor, Richmond, Virginia

A meeting of the Advisory Board on Radiology to review public comments and make recommendations to the Board of Medicine regarding the regulatory review of regulations 18 VAC 85-101-10 et seq., Regulations Governing the Practice of Radiology Technologists, and such other issues which may be presented. The advisory board will entertain public comments during the first 15 minutes on agenda items.

Contact: William L. Harp, M.D., Executive Director, Board of Medicine, 6606 West Broad Street, 5th Floor, Richmond, Virginia
A meeting of the Advisory Board on Physical Therapy to review public comments and make recommendations to the Board of Medicine regarding the regulatory review of regulations 18 VAC 85-31-10 et seq., Regulations Governing the Practice of Physical Therapy, and such other issues which may be presented. The advisory board will entertain public comments during the first 15 minutes on agenda items.

Contact: William L. Harp, M.D., Executive Director, Board of Medicine, 6606 W. Broad St., 4th Floor, Richmond, VA 23230-1717, telephone (804) 662-9960, FAX (804) 662-9517, (804) 662-7197/TTY.

January 14, 2000 - 1 p.m. -- Open Meeting
Department of Health Professions, 6606 West Broad Street, 5th Floor, Richmond, Virginia  (Interpreter for the deaf provided upon request)

A meeting of the Advisory Committee on Physician Assistants to review public comments and make recommendations to the Board of Medicine regarding the regulatory review of regulations 18 VAC 85-50-10 et seq., Regulations Governing the Practice of Physician Assistants, and such other issues which may be presented. The advisory board will entertain public comments during the first 15 minutes on agenda items.

Contact: William L. Harp, M.D., Executive Director, Board of Medicine, 6606 W. Broad St., 4th Floor, Richmond, VA 23230-1717, telephone (804) 662-9960, FAX (804) 662-9517, (804) 662-7197/TTY.

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January 21, 2000 - Public 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 Board of Medicine intends to amend regulations entitled:

18 VAC 85-20-10 et seq. Regulations Governing the Practice of Medicine, Osteopathy, Podiatry, Chiropractic and Physician Acupuncture;

18 VAC 85-31-10 et seq. Regulations Governing the Practice of Physical Therapy;

18 VAC 85-40-10 et seq. Regulations Governing the Practice of Respiratory Care Practitioners;

18 VAC 85-50-10 et seq. Regulations Governing the Practice of Physician Assistants;

18 VAC 85-80-10 et seq. Regulations Governing the Licensure of Occupational Therapists;

18 VAC 85-101-10 et seq. Regulations Governing the Licensure of Radiologic Technologists and Radiologic Technologists-Limited; and

18 VAC 85-110-10 et seq. Regulations Governing the Practice of Licensed Acupuncturists.

The proposed amendments revise the schedule of fees paid by physicians and other medical professionals to the Board of Medicine. These fee changes bring the board into compliance with the board’s interpretation of § 54.1-113 of the Code of Virginia, which requires all regulatory boards under the Department of Health Professions to revise their fee schedules if, after the close of any biennium, there is more than a 10% difference between revenues and expenditures.


Contact: William L. Harp, M.D., Executive Director, Board of Medicine, 6606 W. Broad St., 4th Floor, Richmond, VA 23230-1717, telephone (804) 662-9908.

January 28, 2000 - 1 p.m. -- Open Meeting
Department of Health Professions, 6606 West Broad Street, 5th Floor, Richmond, Virginia  (Interpreter for the deaf provided upon request)

A meeting of the Legislative Committee to (i) discuss legislative issues related to board activities and regulations, (ii) review any pending regulations pursuant to regulatory review or legislative action, and (iii) consider any other information that may come before the committee. The committee will entertain public comments during the first 15 minutes on agenda items.

Contact: William L. Harp, M.D., Executive Director, Board of Medicine, 6606 W. Broad St., 4th Floor, Richmond, VA 23230-1717, telephone (804) 662-9960, FAX (804) 662-9517, (804) 662-7197/TTY.

February 10, 2000 - 8 a.m. -- Open Meeting
February 11, 2000 - 8 a.m. -- Open Meeting
February 12, 2000 - 8 a.m. -- Open Meeting
Department of Health Professions, 6606 West Broad Street, 5th Floor, Richmond, Virginia  (Interpreter for the deaf provided upon request)

A meeting to conduct general board business, receive committee and board reports, and discuss any other items which may come before the board. The board will also meet on Friday and Saturday, February 11 and 12, to review reports, interview licensees/applicants, conduct administrative proceedings, and make decisions on disciplinary matters. The board will also review any regulations that may come before it. The board will entertain public comments during the first 15 minutes on agenda items.

Contact: William L. Harp, M.D., Executive Director, Board of Medicine, 6606 W. Broad St., 4th Floor, Richmond, VA 23230-1717, telephone (804) 662-9960, FAX (804) 662-9517, (804) 662-7197/TTY.

Informal Conference Committee

January 13, 2000 - 9 a.m. -- Open Meeting
Central Park Hotel, 2801 Plank Road, Fredericksburg, Virginia.

January 14, 2000 - 9 a.m. -- Open Meeting
Williamsburg Marriott, 50 Kingsmill Road, Williamsburg, Virginia.
Calendar of Events

A meeting to inquire into allegations that certain practitioners may have violated laws and regulations governing the practice of medicine and other healing arts in Virginia. The committee will meet in open and closed sessions pursuant to § 2.1-344 A 7 and A 15 of the Code of Virginia. Public comment will not be received.

Contact: Karen W. Perrine, Deputy Executive Director, Board of Medicine, 6606 W. Broad Street, 4th Floor, Richmond, VA 23230, telephone (804) 662-7332, FAX (804) 662-9517, (804) 662-7197/TTY.

MOTOR VEHICLE DEALER BOARD

January 10, 2000 - 9 a.m. -- Open Meeting
Department of Motor Vehicles, 2300 West Broad Street, Room 702, Richmond, Virginia. (Interpreter for the deaf provided upon request)

Committees will meet as follows:

- Dealer Practices Committee - 9 a.m.
- Franchise Law Committee - 11 a.m.
- Licensing Committee - 12:30 p.m.
- Transaction Recovery Fund Committee - 2:30 p.m.
- Personnel Committee - 3:30 p.m.

Any person who needs any accommodation in order to participate in the meeting should contact the board at least 10 days before the meeting so that suitable arrangements can be made.

Contact: Alice R. Weedon, Administrative Assistant, Motor Vehicle Dealer Board, 2201 W. Broad Street, Suite 104, Richmond, VA 23220, telephone (804) 367-1100, FAX (804) 367-1053, toll-free (877) 270-0203, e-mail dboard@mvb.state.va.us, homepage http://mvdb.vipnet.org.

January 11, 2000 - 9:30 a.m. -- Open Meeting
Department of Motor Vehicles, 2300 West Broad Street, Room 702, Richmond, Virginia. (Interpreter for the deaf provided upon request)

A meeting of the full board. Prior to the meeting, the following committees will meet:

- Finance Committee - 8:30 a.m. -- Room 702
- Advertising Committee - 8:30 a.m. -- Executive Conference Room

Any person who needs any accommodation in order to participate in the meeting should contact the board at least 10 days before the meeting so that suitable arrangements can be made.

Contact: Alice R. Weedon, Administrative Assistant, Motor Vehicle Dealer Board, 2201 W. Broad St., Suite 104, Richmond, VA 23220, telephone (804) 367-1100, FAX (804) 367-1053, toll-free (877) 270-0203, e-mail dboard@mvb.state.va.us, homepage http://mvdb.vipnet.org.

VIRGINIA MUSEUM OF FINE ARTS

January 4, 2000 - 8 a.m. -- Open Meeting
Virginia Museum of Fine Arts, 2800 Grove Avenue, Main Lobby Conference Room, Richmond, Virginia.

A joint meeting of the Executive and Legislative Committees to discuss the upcoming legislative session in the General Assembly, plus a monthly staff briefing for Executive Committee members. Public comment will not be received at the meeting.

Contact: Emily C. Robertson, Secretary of the Museum, Virginia Museum of Fine Arts, 2800 Grove Avenue, Richmond, VA 23221, telephone (804) 340-1503, FAX (804) 340-1502, e-mail erobertson@vmfa.state.va.us, homepage http://www.vmfa.state.va.us.

BOARD OF NURSING

January 21, 2000 - Public 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 Board of Nursing intends to amend regulations entitled: 18 VAC 90-20-10 et seq. Regulations Governing the Practice of Nursing. The proposed amendments increase application, renewal and other fees charged to applicants and regulated entities in order to cover the expenditures for the regulatory and disciplinary functions of the board.


Contact: Nancy K. Durrett, R.N., Executive Director, Board of Nursing, 6606 W. Broad St., 4th Floor, Richmond, VA 23230-1717, telephone (804) 662-9909 or FAX (804) 662-9943.

BOARD OF NURSING HOME ADMINISTRATORS

January 12, 2000 - 9:30 a.m. -- Open Meeting
Department of Health Professions, 6606 West Broad Street, 5th Floor, Richmond, Virginia.

A regular meeting. Public comments will be heard for 15 minutes prior to the start of the meeting.

Contact: Senita Booker, Administrative Staff Assistant, Board of Nursing Home Administrators, 6606 W. Broad St., 4th Floor, Richmond, VA 23230-1717, telephone (804) 662-9111, FAX (804) 662-9523, (804) 662-7197/TTY, e-mail SBooker@dhp.state.va.us, http://www.dhp.state.va.us.

BOARD FOR OPTICIANS

February 11, 2000 - 9 a.m. -- Open Meeting
Department of Professional and Occupational Regulation, 3600 West Broad Street, 4th Floor, Richmond, Virginia. (Interpreter for the deaf provided upon request)
An open meeting to discuss regulatory review and other matters requiring board action, including disciplinary cases. A public comment period will be held at the beginning of the meeting. All meetings are subject to cancellation. The time of the meeting is subject to change. Any persons desiring to attend the meeting and requiring special accommodations or interpretative services should contact the department at 804-367-8590 or 804-367-9753/TTY at least 10 days prior to the meeting so that suitable arrangements can be made for an appropriate accommodation. The department fully complies with the Americans with Disabilities Act.

Contact:  Nancy Taylor Feldman, Assistant Director, Department of Professional and Occupational Regulation, 3600 West Broad Street, 4th Floor, Richmond, VA 23230-4917, telephone (804) 367-8590, FAX (804) 367-2474, e-mail opticians@dpor.state.va.us,  http://www.state.va.us/dpor.

VIRGINIA BOARD FOR PEOPLE WITH DISABILITIES
February 3, 2000 - 8:30 a.m. -- Open Meeting
The Library of Virginia, 800 East Broad Street, Richmond, Virginia.  (Interpreter for the deaf provided upon request)

A regular meeting.

Contact:  Tom Ariail, Assistant Director of Board Operations, Virginia Board for People with Disabilities, 202 N. 9th Street, 9th Floor, Richmond, VA 23219, telephone (804) 786-0016, FAX (804) 786-1118, toll-free (800) 846-4464, (804) 786-0016/TTY.

BOARD OF PHARMACY
January 11, 2000 - 9 a.m. -- Public Hearing
Department of Health Professions, 6606 West Broad Street, 5th Floor, Conference Room 3, Richmond, Virginia.

Notice is hereby given in accordance with § 9-6.14:7.1 of the Code of Virginia that the Board of Pharmacy intends to amend regulations entitled: 18 VAC 125-20-10 et seq. Regulations Governing the Practice of Psychology.

The purpose of the proposed action is to increase fees for practitioners regulated by the board in order to comply with statutory requirements for revenues to be sufficient to cover the expenditures of the board.


Contact:  Janet Delorme, Deputy Executive Director, Board of Professional Counselors, Marriage and Family Therapists, and Substance Abuse Treatment Professionals, 6606 W. Broad St., 4th Floor, Richmond, VA 23230, telephone (804) 662-9975 or (804) 662-9943.

January 21, 2000 - Public comments may be submitted until this date.

Board of Psychology

BOARD OF PROFESSIONAL COUNSELORS, MARRIAGE AND FAMILY THERAPISTS, AND SUBSTANCE ABUSE TREATMENT PROFESSIONALS
January 6, 2000 - 9 a.m. -- Public Hearing
Department of Health Professions, 6606 West Broad Street, 5th Floor, Conference Room 3, Richmond, Virginia.

Notice is hereby given in accordance with § 9-6.14:7.1 of the Code of Virginia that the Board of Professional Counselors, Marriage and Family Therapists, and Substance Abuse Treatment Professionals intends to amend regulations entitled:

18 VAC 115-20-10 et seq. Regulations Governing the Practice of Professional Counseling;
18 VAC 115-30-10 et seq. Regulations Governing the Certification of Substance Abuse Counselors;
18 VAC 115-40-10 et seq. Regulations Governing the Certification of Rehabilitation Providers; and
18 VAC 115-50-10 et seq. Regulations Governing the Practice of Marriage and Family Therapists.

The proposed amendments increase certain fees pursuant to the board's statutory mandate to levy fees as necessary to cover expenses of the board. Fees sufficient to fund the operations of the board are essential for activities such as licensing, investigation of complaints, and adjudication of disciplinary cases.


Contact:  Janet Delorme, Deputy Executive Director, Board of Professional Counselors, Marriage and Family Therapists, and Substance Abuse Treatment Professionals, 6606 W. Broad St., 4th Floor, Richmond, VA 23230, telephone (804) 662-9975 or (804) 662-9943.

January 11, 2000 - 10 a.m. -- Open Meeting
Department of Health Professions, 6606 West Broad Street, 5th Floor, Conference Room 1, Richmond, Virginia.

Two formal disciplinary conferences involving the full board.

Contact:  Arnice Covington, Administrative Assistant, Department of Health Professions, 6606 West Broad Street, Richmond, VA 23230-1717, telephone (804) 662-9913, FAX
STATE BOARD OF SOCIAL SERVICES

December 21, 1999 - 10 a.m. -- Public Hearing
Department of Social Services, Theater Row Building, 730 East Broad Street, 9th Floor, Conference Room, Richmond, Virginia.

A public hearing on the estimate and methodology of the Temporary Assistance for Needy Families caseload reduction credit. Interested individuals are invited to comment.

Contact: Mark Golden, TANF Program Consultant, Department of Social Services, Theater Row Building, 730 E. Broad St., Richmond, VA 23219, telephone (804) 692-1735 or FAX (804) 692-1704.

BOARD OF SOCIAL WORK

February 25, 2000 - 10 a.m. -- Open Meeting
Department of Health Professions, 6606 West Broad Street, 5th Floor, Board Room 1, Richmond, Virginia.

A meeting to conduct general board business, receive committee reports, and discuss any other items which may come before the board. The board will entertain public comments during the first 15 minutes of the meeting.

Contact: Rai Minor, Administrative Assistant, Board of Social Work, 6606 West Broad Street, 4th Floor, Richmond, VA 23230-1717, telephone (804) 662-9914, FAX (804) 662-9943, (804) 662-7197/TTY, e-mail bsw@dhp.state.va.us, homepage http://www.dhp.state.va.us.

VIRGINIA TOURISM AUTHORITY

December 20, 1999 - 2 p.m. -- Open Meeting
Virginia Economic Development Partnership, 901 East Byrd Street, 19th Floor, Richmond, Virginia.

A meeting of the Motion Picture Development Committee to continue discussion regarding the Motion Picture Incentive Fund and formally adopt the Governor's Motion Picture Opportunity Funds. Public comment will be taken at the beginning of the meeting.

Contact: Nanette Maguire, Administrative Staff Assistant, Film Office, Virginia Tourism Authority, 901 E. Byrd Street, Richmond, VA 23219, telephone (804) 371-8204, FAX (804) 371-8177, toll-free (800) 854-6233.

TRANSPORTATION SAFETY BOARD

January 25, 2000 - 10 a.m. -- Open Meeting
Department of Transportation, 1401 East Broad Street, 3rd Floor, Conference Room, Richmond, Virginia.

A meeting to discuss issues relating to highway safety in Virginia.

Contact: Angelisa Jennings, Management Analyst, Transportation Safety Board, 2300 W. Broad Street, Richmond, VA 23269, telephone (804) 367-2026.

BOARD FOR THE VISUALLY HANDICAPPED

January 18, 2000 - 1 p.m. -- Open Meeting
Department for the Visually Handicapped, Administrative Headquarters, 397 Azalea Avenue, Richmond, Virginia.

A regular quarterly meeting to receive information regarding department activities and operations, review expenditures from the board's endowment fund, and discuss other issues raised for board members.

Contact: Katherine C. Proffitt, Administrative Secretary Senior, Department for the Visually Handicapped, 397 Azalea Avenue, Richmond, VA 23227, telephone (804) 371-3145, FAX (804) 371-3157, toll-free (800) 622-2155, (804) 371-3140/TTY, e-mail profikc@dvh.state.va.us, homepage http://www.cns.state.va.us/dvh.

VIRGINIA WAR MEMORIAL FOUNDATION

January 11, 2000 - noon -- Open Meeting
Virginia War Memorial, 621 South Belvidere Street, Richmond, Virginia.

A regular meeting of the Board of Trustees. Public comments will be received. Contact Jon Hatfield for a copy of the agenda.

Contact: Jon C. Hatfield, Executive Director, Virginia War Memorial Foundation, 621 S. Belvidere Street, Richmond, VA 23220, telephone (804) 786-2060, FAX (804) 786-6652, (804) 786-6152/TTY, e-mail jhatfield@vawarmemorial.state.va.us.

VIRGINIA WASTE MANAGEMENT BOARD

January 20, 2000 - 9 a.m. -- Open Meeting
Department of Environmental Quality, 629 East Main Street, 10th Floor Conference Room, Richmond, Virginia.

A public meeting to receive comments on the board’s intent to amend 9 VAC 20-140-10 et seq., Regulations for the Certification of Recycling Machinery and Equipment for Tax Exemption Purposes.

Contact: John Ely, Department of Environmental Quality, P.O. Box 10009, Richmond, VA 23240, telephone (804) 698-4249, (804) 698-4021/TTY, e-mail jeely@deq.state.va.us, homepage http://www.deq.state.va.us.

January 20, 2000 - 2 p.m. -- Open Meeting
Department of Environmental Quality, 10th Floor Conference Room, 629 East Main Street, 10th Floor Conference Room, Richmond, Virginia.
A public meeting to receive comments on the board's intent to adopt 9 VAC 20-180-10 et seq., Regulations Governing the Commercial Transportation of Nonhazardous Municipal Solid Waste and Regulated Medical Waste by Truck.

Contact: Robert Wickline, Department of Environmental Quality, P.O. Box 10009, Richmond, Virginia 23240, telephone (804) 698-4213, (804) 698-4021/TTY, e-mail rgwickline@deq.state.va.us, homepage http://deq.state.va.us.

January 21, 2000 - 9 a.m. -- Open Meeting
Department of Environmental Quality, 10th Floor Conference Room, 629 East Main Street, Richmond, Virginia.

A public meeting to receive comments on the board's intent to amend 9 VAC 20-130-10 et seq., Regulations for the Development of Solid Waste Management Plans.

Contact: Robert Wickline, Department of Environmental Quality, P.O. Box 10009, Richmond, VA 23240, telephone (804) 698-4213, (804) 698-4021/TTY, e-mail rgwickline@deq.state.va.us, homepage http://www.deq.state.va.us.

STATE WATER CONTROL BOARD

January 20, 2000 - 1 p.m. -- Open Meeting
Robert E. Lee Building, 121 East 2nd Street, Chase City, Virginia.

A meeting to receive comments on the board's intent to amend 9 VAC 25-430-10 et seq., Roanoke River Basin Water Quality Management Plan, relative to Chase City's wasteload allocation.

Contact: Jon Van Soestbergen, Environmental Engineer, Senior, Department of Environmental Quality, Piedmont Regional Office, 4949-A Cox Road, Glen Allen, Virginia 23060, telephone (804) 527-5106, e-mail jvansoest@deq.state.va.us, homepage http://deq.state.va.us.

January 27, 2000 - 2 p.m. -- Open Meeting
Virginia War Memorial, 621 South Belvidere Street, Richmond, Virginia.

A meeting to receive comments on the board's intent to amend the Water Quality Standards, 9 VAC 25-260-10 et seq., to update numerical and/or narrative criteria for dissolved oxygen.

Contact: Elleanore Daub, Department of Environmental Quality, P.O. Box 10009, Richmond, Virginia 23240, telephone (804) 698-4111, (804) 698-4021/TTY, e-mail emdaub@deq.state.va.us.

BOARD FOR WATERWORKS AND WASTEWATER WORKS OPERATORS

March 16, 2000 - 8:30 a.m. -- Open Meeting
Department of Professional and Occupational Regulation, 3600 West Broad Street, Conference Room 5W, Richmond, Virginia.

A regular meeting. A public comment period will be held at the beginning of the meeting.

Contact: David E. Dick, Assistant Director, Department of Professional and Occupational Regulation, 3600 W. Broad Street, Richmond, VA 23230, telephone (804) 367-8505, FAX (804) 367-2475, (804) 367-9753/TTY, e-mail waterwasteoper@dpor.state.va.us.

LEGISLATIVE

JOINT SUBCOMMITTEE TO STUDY THE ADEQUACY OF CONFLICT OF INTEREST LAWS APPLICABLE TO THE APPOINTMENT AND CONDUCT OF MEMBERS OF VIRGINIA'S POLICY AND SUPERVISORY BOARDS, COMMISSIONS AND COUNCILS

December 20, 1999 - 2 p.m. -- Open Meeting
General Assembly Building, 9th and Broad Streets, House Room C, Richmond, Virginia. (Interpreter for the deaf provided upon request)

A regular meeting. Questions regarding the meeting should be addressed to Mary Spain, Division of Legislative Services, (804) 786-3591. Individuals requiring interpreter services or other special assistance should contact the committee operations office at least 10 working days prior to the meeting.

Contact: Lois V. Johnson, House Committee Operations, P.O. Box 406, Richmond, VA 23218, telephone (804) 698-1540 or (804) 786-2369/TTY.

COMMISSION ON EDUCATIONAL ACCOUNTABILITY (SJR 498, 1999)

December 21, 1999 - 10 a.m. -- Open Meeting
January 4, 2000 - 2 p.m. -- Open Meeting
General Assembly Building, 9th and Broad Streets, Senate Room B, Richmond, Virginia. (Interpreter for the deaf provided upon request)

A regular meeting. Questions regarding the meeting should be directed to Kathy Harris, Division of Legislative Services, (804) 786-3591. Individuals requiring interpreter services or other accommodations should call or write Senate Committee Operations at least seven working days prior to the meeting.

Contact: Patty J. Lung, Senate Committee Operations, P.O. Box 396, Richmond, VA 23218, telephone (804) 698-7450 or (804) 698-7419/TTY.

JOINT COMMISSION ON HEALTH CARE

January 6, 2000 - 10 a.m. -- Open Meeting
General Assembly Building, 9th and Broad Streets, Senate Room A, Richmond, Virginia. (Interpreter for the deaf provided upon request)

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Calendar of Events

A regular meeting. Individuals requiring interpreter services or other special assistance should contact Kimberly Rockhold at least 10 working days prior to the meeting. You can also access information on the Internet at http://legis.state.va.us/jchc/jchchome.htm.

Contact: Travis Varner, Committee Operations, House of Delegates, State Capitol, P.O. Box 406, Richmond, VA 23218, telephone (804) 698-1540 or (804) 786-2369/TTY.

OPEN MEETINGS

December 20, 1999
Accountancy, Board of
Tourism Authority, Virginia
- Motion Picture Development Committee

December 21, 1999
Compensation Board
Educational Accountability, Commission on
Marine Resources Commission

January 4, 2000
Educational Accountability, Commission on
Hopewell Industrial Safety Council
Medical Assistance Services, Department of
- Virginia Medicaid Pharmacy Liaison Committee
Museum of Fine Arts, Virginia
- Executive and Legislative Committees

January 5, 2000
Funeral Directors and Embalmers, Board of
- Legislative Committee
Independent Living Council, Statewide
Litter Control and Recycling Fund Advisory Board
Medicine, Board of

January 6, 2000
Agriculture and Consumer Services, Department of
- Virginia Charity Food Assistance Advisory Board
Dentistry, Board of
- Legislative/Regulatory Committee
- Special Conference Committee
Education, Board of
Medicine, Board of
- Advisory Board on Athletic Training

January 7, 2000
Dentistry, Board of
- Special Conference Committee

January 10, 2000
Local Government, Commission on
Motor Vehicle Dealer Board

January 11, 2000
Compensation Board
Higher Education for Virginia, State Council of
Motor Vehicle Dealer Board
Pharmacy, Board of
- Special Conference Committee
Psychology, Board of
War Memorial Foundation, Virginia
- Board of Trustees

January 12, 2000
Independent Living Council, Statewide
Medicine, Board of
- Advisory Committee on Acupuncture
- Advisory Committee on Radiological Technology
Nursing Home Administrators, Board of

January 13, 2000
Agriculture and Consumer Services, Department of
- Pesticide Control Board
Medicine, Board of
- Informal Conference Committee
- Advisory Board on Occupational Therapy
- Advisory Board on Respiratory Care

January 14, 2000
Medicine, Board of
- Informal Conference Committee
- Advisory Board on Physical Therapy
- Advisory Committee on Physician Assistants

January 18, 2000
Emergency Planning Committee, Local - Hanover County
Higher Education for Virginia, State Council of
Visually Handicapped, Board for the

January 19, 2000
Cemetery Board
Labor and Industry, Department of
- Migrant and Seasonal Farmworkers Board

January 20, 2000
Architects, Professional Engineers, Land Surveyors,
Certified Interior Designers and Landscape Architects,
Board of
- Land Surveyor Section
Assistive Technology Loan Fund Authority
Cemetery Board
- Delivery Committee
Emergency Planning Committee, Local - Winchester
Waste Management Board, Virginia
Water Control Board, State

January 21, 2000
Library Board, State
Waste Management Board, Virginia

January 24, 2000
Accountancy, Board of
Community Colleges, State Board for
Design-Build/Construction Management Review Board

January 25, 2000
Compensation Board
Hearing Aid Specialists, Board for
Marine Resources Commission
Transportation Safety Board

January 27, 2000
Community Colleges, State Board for
Water Control Board, State

January 28, 2000
Medicine, Board of
- Legislative Committee
Calendar of Events

February 1, 2000
Hopewell Industrial Safety Council

February 3, 2000
People with Disabilities, Virginia Board for

February 7, 2000
Barbers, Board for

February 8, 2000
Game and Inland Fisheries, Department of
Higher Education for Virginia, State Council of

February 9, 2000
Game and Inland Fisheries, Department of

February 10, 2000
Game and Inland Fisheries, Department of
Medicine, Board of

February 11, 2000
Medicine, Board of
Opticians, Board for

February 12, 2000
Medicine, Board of

February 15, 2000
Game and Inland Fisheries, Department of

February 16, 2000
Game and Inland Fisheries, Department of

February 17, 2000
Assistive Technology Loan Fund Authority

February 22, 2000
Agriculture and Consumer Services, Board of
- Virginia Winegrowers Advisory Board
Marine Resources Commission

February 24, 2000
Education, Board of

February 25, 2000
Social Work, Board of

March 6, 2000
Cosmetology, Board for

March 7, 2000
Asbestos and Lead, Virginia Board for
Hopewell Industrial Safety Council

March 13, 2000
Library Board, State

March 16, 2000
Waterworks and Wastewater Works Operators, Board for

March 23, 2000
Education, Board of

March 28, 2000
Marine Resources Commission

PUBLIC HEARINGS

December 21, 1999
Social Services, State Board of

January 4, 2000
Air Pollution Control Board, State
Environmental Quality, Department of

January 7, 2000
Health Professions, Board of

January 11, 2000
Psychology, Board of

February 21, 2000
Local Government, Commission on

February 22, 2000
Local Government, Commission on