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Title 1. Administration			
1 VAC 55-20-320 emer	Amended	19:25 VA.R. 3829	10/1/03-9/30/04
Title 2. Agriculture			
2 VAC 20-30	Erratum	20:1 VA.R 39	
Title 3. Alcoholic Beverages			
3 VAC 5-40-20 emer	Amended	19:24 VA.R. 3586	7/10/03-7/9/04
3 VAC 5-40-50 emer	Amended	19:24 VA.R. 3587	7/10/03-7/9/04
3 VAC 5-70-220 emer	Added	19:24 VA.R. 3587	7/10/03-7/9/04
Title 4. Conservation and Natural Resources			
4 VAC 5-10-10	Amended	19:24 VA.R. 3507	9/10/03
4 VAC 5-10-20	Amended	19:24 VA.R. 3507	9/10/03
4 VAC 5-10-30	Amended	19:24 VA.R. 3508	9/10/03
4 VAC 5-10-40	Repealed	19:24 VA.R. 3510	9/10/03
4 VAC 5-36-50	Amended	19:16 VA.R. 2370	5/21/03
4 VAC 5-36-60	Amended	19:16 VA.R. 2373	5/21/03
4 VAC 5-36-70	Amended	19:16 VA.R. 2375	5/21/03
4 VAC 5-36-90	Amended	19:12 VA.R. 1881	3/27/03
4 VAC 5-36-100	Amended	19:12 VA.R. 1883	3/27/03
4 VAC 5-36-110 through 4 VAC 5-36-140	Amended	19:16 VA.R. 2376-2379	5/21/03
4 VAC 5-36-170 through 4 VAC 5-36-210	Amended	19:16 VA.R. 2379-2392	5/21/03
4 VAC 15-30-40	Amended	19:25 VA.R. 3780	7/30/03
4 VAC 15-30-50	Amended	19:19 VA.R. 2818	7/1/03
4 VAC 15-40-230	Amended	19:19 VA.R. 2818	7/1/03
4 VAC 15-40-282	Added	19:19 VA.R. 2818	7/1/03
4 VAC 15-40-283	Added	19:19 VA.R. 2818	7/1/03
4 VAC 15-40-284	Added	19:19 VA.R. 2819	7/1/03
4 VAC 15-50-10	Amended	19:19 VA.R. 2819	7/1/03
4 VAC 15-50-20	Amended	19:19 VA.R. 2819	7/1/03
4 VAC 15-50-25	Amended	19:19 VA.R. 2819	7/1/03
4 VAC 15-50-30	Repealed	19:19 VA.R. 2819	7/1/03
4 VAC 15-50-70	Amended Added	19:19 VA.R. 2819	7/1/03
4 VAC 15-50-71 4 VAC 15-50-80		19:19 VA.R. 2820 19:19 VA.R. 2820	7/1/03 7/1/03
4 VAC 15-50-80 4 VAC 15-50-81	Amended Added	19:19 VA.R. 2820 19:19 VA.R. 2820	7/1/03
4 VAC 15-50-81 4 VAC 15-50-90	Added Amended	19:19 VA.R. 2820 19:19 VA.R. 2820	7/1/03
4 VAC 15-50-90 4 VAC 15-50-91	Added	19:19 VA.R. 2820 19:19 VA.R. 2820	7/1/03
4 VAC 15-50-91 4 VAC 15-50-110	Added	19:19 VA.R. 2820	7/1/03
4 VAC 15-50-110 4 VAC 15-50-120	Amended	19:19 VA.R. 2820	7/1/03
4 VAC 15-60-120	Amended	19:19 VA.R. 2820	7/1/03
4 VAC 15-00-20 4 VAC 15-90-10	Amended	19:19 VA.R. 2821	7/1/03
4 VAC 15-90-20	Amended	19:19 VA.R. 2821	7/1/03
4 VAC 15-90-21	Amended	19:19 VA.R. 2821	7/1/03
4 VAC 15-90-70	Amended	19:19 VA.R. 2821	7/1/03
4 VAC 15-90-80	Amended	19:19 VA.R. 2822	7/1/03
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4 VAC 15-90-90	Amended	19:19 VA.R. 2822	7/1/03
4 VAC 15-90-100	Amended	19:19 VA.R. 2822	7/1/03
4 VAC 15-90-110	Amended	19:19 VA.R. 2822	7/1/03
4 VAC 15-90-120	Amended	19:19 VA.R. 2822	7/1/03
4 VAC 15-90-121	Added	19:19 VA.R. 2822	7/1/03
4 VAC 15-90-141	Amended	19:19 VA.R. 2822	7/1/03
4 VAC 15-90-160	Amended	19:19 VA.R. 2822	7/1/03
4 VAC 15-90-170	Amended	19:19 VA.R. 2822	7/1/03
4 VAC 15-90-190	Amended	19:19 VA.R. 2822	7/1/03
4 VAC 15-90-195	Amended	19:19 VA.R. 2823	7/1/03
4 VAC 15-90-200	Amended	19:19 VA.R. 2823	7/1/03
4 VAC 15-90-210	Amended	19:19 VA.R. 2823	7/1/03
4 VAC 15-90-220	Amended	19:19 VA.R. 2823	7/1/03
4 VAC 15-90-230	Amended	19:19 VA.R. 2823	7/1/03
4 VAC 15-90-231	Added	19:19 VA.R. 2823	7/1/03
4 VAC 15-90-240	Amended	19:19 VA.R. 2823	7/1/03
4 VAC 15-90-241	Added	19:19 VA.R. 2823	7/1/03
4 VAC 15-140-20	Amended	19:19 VA.R. 2823	7/1/03
4 VAC 15-140-40	Repealed	19:19 VA.R. 2823	7/1/03
4 VAC 15-160-10	Amended	19:19 VA.R. 2824	7/1/03
4 VAC 15-160-20	Repealed	19:19 VA.R. 2824	7/1/03
4 VAC 15-160-31	Amended	19:19 VA.R. 2824	7/1/03
4 VAC 15-200-10	Amended	19:19 VA.R. 2824	7/1/03
4 VAC 15-210-30	Amended	19:19 VA.R. 2824	7/1/03
4 VAC 15-210-40	Repealed	19:19 VA.R. 2824	7/1/03
4 VAC 15-210-51	Amended	19:19 VA.R. 2824	7/1/03
4 VAC 15-230-20	Amended	19:19 VA.R. 2824	7/1/03
4 VAC 15-230-30	Repealed	19:19 VA.R. 2824	7/1/03
4 VAC 15-230-60	Amended	19:19 VA.R. 2824	7/1/03
4 VAC 15-230-70	Repealed	19:19 VA.R. 2824	7/1/03
4 VAC 15-240	Erratum	19:23 VA.R. 3412	7/4/00
4 VAC 15-240-31	Amended	19:19 VA.R. 2825	7/1/03
4 VAC 15-240-40	Amended	19:19 VA.R. 2825	7/1/03
4 VAC 15-240-50 4 VAC 15-240-80	Amended	19:19 VA.R. 2825	7/1/03
4 VAC 15-240-80 4 VAC 15-240-81	Amended Added	19:19 VA.R. 2825 19:19 VA.R. 2825	7/1/03 7/1/03
4 VAC 15-240-81 4 VAC 15-240-90	Added	19:19 VA.R. 2825	7/1/03
4 VAC 15-240-90 4 VAC 15-240-91	Added	19:19 VA.R. 2825	7/1/03
4 VAC 15-240-91 4 VAC 15-260-120	Amended	19:19 VA.R. 2826	7/1/03
4 VAC 15-290-115	Amended	19:19 VA.R. 2826	7/1/03
4 VAC 15-430-40	Erratum	19:14 VA.R. 2176	
4 VAC 15-430-210	Erratum	19:14 VA.R. 2177	
4 VAC 20-252-130 emer	Amended	19:12 VA.R. 1905	1/31/03-2/28/03
4 VAC 20-252-130	Amended	19:14 VA.R. 2086	3/1/03
4 VAC 20-252-150 emer	Amended	19:12 VA.R. 1906	1/31/03-2/28/03
4 VAC 20-252-150	Amended	19:14 VA.R. 2087	3/1/03
4 VAC 20-380-10	Amended	19:14 VA.R. 2087	3/1/03
4 VAC 20-380-30	Amended	19:14 VA.R. 2087	3/1/03
4 VAC 20-380-50	Amended	19:14 VA.R. 2087	3/1/03
4 VAC 20-380-60	Amended	19:14 VA.R. 2088	3/1/03
4 VAC 20-490-40	Amended	19:23 VA.R. 3320	7/1/03
4 VAC 20-490-60	Amended	19:23 VA.R. 3320	7/1/03
4 VAC 20-563-10 through 4 VAC 20-563-50 emer	Added	19:16 VA.R. 2417	3/26/03-4/24/03
4 VAC 20-620-50	Amended	19:14 VA.R. 2088	3/1/03
4 VAC 20-620-70	Amended	19:14 VA.R. 2089	3/1/03
4 VAC 20-720-20 emer	Amended	19:12 VA.R. 1906	2/1/03-3/3/03
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4 VAC 20-720-40 emer	Amended	19:12 VA.R. 1907	2/1/03-3/3/03
4 VAC 20-720-50 emer	Amended	19:12 VA.R. 1907	2/1/03-3/3/03
4 VAC 20-720-70 emer	Amended	19:12 VA.R. 1908	2/1/03-3/3/03
4 VAC 20-720-80	Erratum	19:12 VA.R. 1915	
4 VAC 20-720-80 emer	Amended	19:12 VA.R. 1909	2/1/03-3/3/03
4 VAC 20-752-20 emer	Amended	19:23 VA.R. 3385	6/26/03-7/24/03
4 VAC 20-752-20	Amended	19:25 VA.R. 3780	7/23/03
4 VAC 20-910-45 emer	Amended	19:12 VA.R. 1911	1/31/03-2/28/03
4 VAC 20-910-45	Amended	19:14 VA.R. 2089	3/1/03
4 VAC 20-910-45	Amended	19:23 VA.R. 3320	7/1/03
4 VAC 20-950-30	Amended	19:14 VA.R. 2090	3/1/03
4 VAC 20-950-45	Amended	19:14 VA.R. 2090	3/1/03
4 VAC 20-950-47	Amended	19:23 VA.R. 3321	7/1/03
4 VAC 20-1050-10	Added	19:16 VA.R. 2392	3/26/03
4 VAC 20-1050-20	Added	19:16 VA.R. 2392	3/26/03
4 VAC 20-1050-30	Added	19:16 VA.R. 2392	3/26/03
4 VAC 20-1060-10 emer	Amended	19:23 VA.R. 3385	6/25/03-7/24/03
4 VAC 20-1060-10	Added	19:16 VA.R. 2393	3/26/03
4 VAC 20-1060-20 emer	Amended	19:23 VA.R. 3385	6/25/03-7/24/03
4 VAC 20-1060-20	Added	19:16 VA.R. 2393	3/26/03
4 VAC 20-1060-30	Added	19:16 VA.R. 2393	3/26/03
4 VAC 20-1070-10 through 4 VAC 20-1070-50	Added	19:25 VA.R. 3781	8/1/03
4 VAC 25-30	Repealed	19:24 VA.R. 3510	9/11/03
4 VAC 25-31-10 through 4 VAC 25-31-570	Added	19:24 VA.R. 3510-3518	9/11/03
4 VAC 25-40 (Forms)	Amended	19:17 VA.R. 2589	
4 VAC 25-130 (Forms)	Amended	20:1 VA.R 33	
4 VAC 25-150-120	Amended	19:18 VA.R. 2663	7/1/03
4 VAC 25-160-30	Amended	19:18 VA.R. 2664	7/1/03
4 VAC 50-10-10	Amended	19:24 VA.R. 3518	9/10/03
4 VAC 50-10-20	Amended	19:24 VA.R. 3519	9/10/03
4 VAC 50-10-30	Amended	19:24 VA.R. 3519	9/10/03
4 VAC 50-10-40	Repealed	19:24 VA.R. 3521	9/10/03
4 VAC 50-10-40	Repealed	19:24 VA.R. 3521	9/10/03
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6 VAC 20-210-10 through 6 VAC 20-210-110 emer	Added	19:10 VA.R. 1511-1512	1/7/03-1/6/04
6 VAC 35-20-10	Amended	19:23 VA.R. 3322	9/1/03
6 VAC 35-20-10	Repealed	19:23 VA.R. 3324	9/1/03
6 VAC 35-20-20	Amended	19:23 VA.R. 3324	9/1/03
6 VAC 35-20-35	Added	19:23 VA.R. 3324	9/1/03
6 VAC 35-20-37	Added	19:23 VA.R. 3324	9/1/03
6 VAC 35-20-40	Repealed	19:23 VA.R. 3324	9/1/03
6 VAC 35-20-40	Amended	19:23 VA.R. 3324	9/1/03
6 VAC 35-20-60	Amended	19:23 VA.R. 3325	9/1/03
6 VAC 35-20-63	Added	19:23 VA.R. 3325	9/1/03
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6 VAC 35-20-69	Added	19:23 VA.R. 3325	9/1/03
6 VAC 35-20-09	Repealed	19:23 VA.R. 3326	9/1/03
6 VAC 35-20-76	Added	19:23 VA.R. 3326	9/1/03
6 VAC 35-20-73	Amended	19:23 VA.R. 3326	9/1/03
6 VAC 35-20-80 6 VAC 35-20-90	Amended	19:23 VA.R. 3326	9/1/03
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6 VAC 35-20-92 6 VAC 35-20-93	Added	19:23 VA.R. 3328	9/1/03
6 VAC 35-20-93 6 VAC 35-20-94	Added	19:23 VA.R. 3328	9/1/03
6 VAC 35-20-94 6 VAC 35-20-100	Amended	19:23 VA.R. 3328	9/1/03
6 VAC 35-20-100 6 VAC 35-20-110	Amended	19:23 VA.R. 3326 19:23 VA.R. 3330	9/1/03
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6 VAC 35-20-120	Amended	19:23 VA.R. 3330	9/1/03
6 VAC 35-20-130	Repealed	19:23 VA.R. 3330	9/1/03
6 VAC 35-20-140	Repealed	19:23 VA.R. 3330	9/1/03
6 VAC 35-20-150	Added	19:23 VA.R. 3330	9/1/03
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8 VAC 20-440-10	Amended	19:12 VA.R. 1886	3/28/03
8 VAC 20-440-90	Amended	19:12 VA.R. 1886	3/28/03
8 VAC 20-440-110	Amended	19:12 VA.R. 1886	3/28/03
8 VAC 20-440-120	Amended	19:12 VA.R. 1886	3/28/03
8 VAC 20-440-140	Amended	19:12 VA.R. 1886	3/28/03
8 VAC 20-440-150	Amended	19:12 VA.R. 1886	3/28/03
8 VAC 20-440-160	Amended	19:12 VA.R. 1886	3/28/03
8 VAC 20-440 Appendix A	Amended	19:12 VA.R. 1887	3/28/03
8 VAC 20-440 Appendix B	Amended	19:12 VA.R. 1890	3/28/03
8 VAC 40-30-10 through 8 VAC 40-30-470 emer	Repealed	19:24 VA.R. 3589	7/16/03-7/15/04
8 VAC 40-31-10 through 8 VAC 40-31-280 emer	Added	19:24 VA.R. 3589-3600	7/16/03-7/15/04
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9 VAC 5-20-204	Amended	19:17 VA.R. 2486	6/4/03
9 VAC 5-20-310	Amended	19:17 VA.R. 2486	6/4/03
9 VAC 5-40	Erratum	19:25 VA.R. 3844	7/4/00
9 VAC 5-40-6000 through 9 VAC 5-40-6150	Amended	19:17 VA.R. 2487-2494	7/1/03
9 VAC 5-40-6250 through 9 VAC 5-40-6510	Added	19:24 VA.R. 3521-3535	9/10/03
9 VAC 5-40-6550 through 9 VAC 5-40-6810	Added	19:24 VA.R. 3536-3556	9/10/03
9 VAC 5-40-6180	Amended	19:17 VA.R. 2494	7/1/03
9 VAC 5-40-6190	Amended	19:17 VA.R. 2499	7/1/03
9 VAC 5-40-6220	Amended	19:17 VA.R. 2500	7/1/03
9 VAC 5-40-7950	Amended	19:17 VA.R. 2501	7/1/03
9 VAC 5-40-7960	Amended	19:17 VA.R. 2502	7/1/03
9 VAC 5-40-8090	Amended	19:17 VA.R. 2505	7/1/03
9 VAC 5-40-8100	Amended	19:17 VA.R. 2505	7/1/03
9 VAC 5-40-8110 through 9 VAC 5-40-8160	Amended	19:17 VA.R. 2507-2519	7/1/03
9 VAC 5-40-8180	Amended	19:17 VA.R. 2519	7/1/03
9 VAC 20-60-17	Amended	19:18 VA.R. 2665	7/1/03
9 VAC 20-60-18	Amended	19:12 VA.R. 1891	3/26/03
9 VAC 20-60-40	Amended	19:18 VA.R. 2665	7/1/03
9 VAC 20-60-70	Amended	19:18 VA.R. 2665	7/1/03
9 VAC 20-60-124	Amended	19:18 VA.R. 2665	7/1/03
9 VAC 20-60-261	Amended	19:18 VA.R. 2665	7/1/03
9 VAC 20-60-262	Amended	19:18 VA.R. 2665	7/1/03
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9 VAC 20-60-270	Amended	19:18 VA.R. 2670	7/1/03
9 VAC 20-60-305	Amended	19:18 VA.R. 2670	7/1/03
9 VAC 20-60-315	Amended	19:18 VA.R. 2670	7/1/03
9 VAC 20-60-328	Amended	19:18 VA.R. 2670	7/1/03
9 VAC 20-60-420	Amended	19:18 VA.R. 2670	7/1/03
9 VAC 20-60-440	Amended	19:18 VA.R. 2670	7/1/03
9 VAC 20-60-450	Amended	19:18 VA.R. 2670	7/1/03
9 VAC 20-60-490	Amended	19:18 VA.R. 2670	7/1/03
9 VAC 20-60-1260	Amended	19:18 VA.R. 2670	7/1/03
9 VAC 20-60-1280	Amended	19:18 VA.R. 2670	7/1/03
9 VAC 20-60-1285	Amended	19:18 VA.R. 2670	7/1/03
9 VAC 20-60-1370	Amended	19:18 VA.R. 2672	7/1/03
9 VAC 20-60-1380	Amended	19:18 VA.R. 2672	7/1/03
9 VAC 20-60-1390	Amended	19:18 VA.R. 2672	7/1/03
9 VAC 20-60-1420	Amended	19:18 VA.R. 2672	7/1/03
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9 VAC 20-80	Erratum	19:26 VA.R. 3926	
9 VAC 20-80-10	Amended	19:25 VA.R. 3782	9/24/03
9 VAC 20-80-60	Amended	19:25 VA.R. 3782	9/24/03
9 VAC 20-80-80	Amended	19:25 VA.R. 3782	9/24/03
9 VAC 20-80-90	Amended	19:25 VA.R. 3782	9/24/03
9 VAC 20-80-100	Amended	19:25 VA.R. 3782	9/24/03
9 VAC 20-80-105	Added	19:25 VA.R. 3782	9/24/03
9 VAC 20-80-110	Amended	19:25 VA.R. 3782	9/24/03
9 VAC 20-80-113	Amended	19:25 VA.R. 3782	9/24/03
9 VAC 20-80-115	Amended	19:25 VA.R. 3782	9/24/03
9 VAC 20-80-113	Amended	19:25 VA.R. 3782	9/24/03
9 VAC 20-80-140	Amended	19:25 VA.R. 3782	9/24/03
9 VAC 20-80-150 9 VAC 20-80-160	Amended	19:25 VA.R. 3782 19:25 VA.R. 3782	9/24/03
	Amended	19:25 VA.R. 3782	9/24/03
9 VAC 20-80-170	Amended		9/24/03
9 VAC 20-80-180	Amended	19:25 VA.R. 3782	9/24/03
9 VAC 20-80-190	Amended	19:25 VA.R. 3782	9/24/03
9 VAC 20-80-205	Added	19:25 VA.R. 3782	9/24/03
9 VAC 20-80-210	Amended	19:25 VA.R. 3782	9/24/03
9 VAC 20-80-240	Amended	19:25 VA.R. 3782	9/24/03
9 VAC 20-80-250	Amended	19:25 VA.R. 3782	9/24/03
9 VAC 20-80-260	Amended	19:25 VA.R. 3782	9/24/03
9 VAC 20-80-270	Amended	19:25 VA.R. 3782	9/24/03
9 VAC 20-80-280	Amended	19:25 VA.R. 3782	9/24/03
9 VAC 20-80-300	Amended	19:25 VA.R. 3782	9/24/03
9 VAC 20-80-310	Amended	19:25 VA.R. 3782	9/24/03
9 VAC 20-80-330	Amended	19:25 VA.R. 3782	9/24/03
9 VAC 20-80-340	Amended	19:25 VA.R. 3782	9/24/03
9 VAC 20-80-360	Amended	19:25 VA.R. 3782	9/24/03
9 VAC 20-80-370	Amended	19:25 VA.R. 3782	9/24/03
9 VAC 20-80-460	Amended	19:25 VA.R. 3782	9/24/03
9 VAC 20-80-485	Amended	19:25 VA.R. 3782	9/24/03
9 VAC 20-80-500	Amended	19:25 VA.R. 3782	9/24/03
9 VAC 20-80-510	Amended	19:25 VA.R. 3782	9/24/03
9 VAC 20-80-520	Amended	19:25 VA.R. 3782	9/24/03
9 VAC 20-80-530	Amended	19:25 VA.R. 3782	9/24/03
9 VAC 20-80-550	Amended	19:25 VA.R. 3782	9/24/03
9 VAC 20-80-570	Amended	19:25 VA.R. 3782	9/24/03
9 VAC 20-80-580	Amended	19:25 VA.R. 3782	9/24/03
9 VAC 20-80-600	Repealed	19:25 VA.R. 3782	9/24/03
9 VAC 20-80-620	Amended	19:25 VA.R. 3782	9/24/03
9 VAC 20-80-640	Added	19:25 VA.R. 3782	9/24/03
9 VAC 20-80-650	Added	19:25 VA.R. 3782	9/24/03
9 VAC 20-80-670	Amended	19:25 VA.R. 3782	9/24/03
9 VAC 20-80-730	Amended	19:25 VA.R. 3782	9/24/03
9 VAC 20-80-740	Amended	19:25 VA.R. 3782	9/24/03
9 VAC 20-80-760	Amended	19:25 VA.R. 3782	9/24/03
9 VAC 20-80-770	Repealed	19:25 VA.R. 3782	9/24/03
9 VAC 20-80-780	Amended	19:25 VA.R. 3782	9/24/03
9 VAC 20-80-790	Amended	19:25 VA.R. 3782	9/24/03
9 VAC 20-90-10	Amended	19:18 VA.R. 2672	7/1/03
9 VAC 20-90-20	Repealed	19:18 VA.R. 2672	7/1/03
9 VAC 20-90-30 through 9 VAC 20-90-100	Amended	19:18 VA.R. 2672-2675	7/1/03
9 VAC 20-90-110	Added	19:18 VA.R. 2675	7/1/03
9 VAC 20-90-110	Added	19:18 VA.R. 2675	7/1/03
9 VAC 20-110-10 through 9 VAC 20-110-40	Amended	19:19 VA.R. 2826-2827	7/1/03
3 VAO 20-110-10 tillough 3 VAO 20-110-40	Amended	13.13 VA.IV. 2020-2021	112/03

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9 VAC 20-110-90	Amended	19:19 VA.R. 2827	7/2/03
9 VAC 20-110-90 9 VAC 20-110-100	Amended	19:19 VA.R. 2828	7/2/03
9 VAC 20-110-100 9 VAC 20-110-110	Amended	19:19 VA.R. 2828	7/2/03
9 VAC 20-110-110 9 VAC 20-110-115	Repealed	19:19 VA.R. 2828	7/2/03
9 VAC 20-110-115 9 VAC 20-110-121	Amended	19:19 VA.R. 2828	7/2/03
9 VAC 20-110-121 9 VAC 20-110-122		19:19 VA.R. 2828	7/2/03
	Amended		
9 VAC 20-130 (Forms)	Amended	19:12 VA.R. 1912 19:19 VA.R. 2829-2833	
9 VAC 20-170-10 through 9 VAC 20-170-60	Added		7/2/03
9 VAC 20-170-70	Added	19:18 VA.R. 2678	
9 VAC 20-170-70	Erratum	19:23 VA.R. 3412	7/2/02
9 VAC 20-170-80 through 9 VAC 20-170-190	Added	19:19 VA.R. 2833-2839	7/2/03
9 VAC 20-170-195	Added	19:18 VA.R. 2679	7/0/00
9 VAC 20-170-270 through 9 VAC 20-170-420	Added	19:19 VA.R. 2842-2862	7/2/03
9 VAC 25-20-10	Amended	19:18 VA.R. 2680	7/1/03
9 VAC 25-20-110	Amended	19:18 VA.R. 2681	7/1/03
9 VAC 25-20-120	Amended	19:18 VA.R. 2681	7/1/03
9 VAC 25-20-130	Amended	19:18 VA.R. 2681	7/1/03
9 VAC 25-70	Repealed	19:14 VA.R. 2090	4/23/03
9 VAC 25-71-10 through 9 VAC 25-71-70	Added	19:14 VA.R. 2090	4/23/03
9 VAC 25-120 (Forms)	Amended	19:18 VA.R. 2739	
9 VAC 25-140-155	Amended	19:23 VA.R. 3348	8/27/03
9 VAC 25-193-10	Amended	19:23 VA.R. 3332	10/1/03
9 VAC 25-193-30 through 9 VAC 25-193-70	Amended	19:23 VA.R. 3332-3348	10/1/03
9 VAC 25-193-80	Repealed	19:23 VA.R. 3348	10/1/03
9 VAC 25-210 (Forms)	Amended	19:12 VA.R. 1912	
9 VAC 25-210 (Forms)	Added	19:16 VA.R. 2418	
9 VAC 25-260	Erratum	19:26 VA.R. 3926	
9 VAC 25-260-5 through 9 VAC 25-260-30	Amended	19:25 VA.R. 3785	2
9 VAC 25-260-50	Amended	19:25 VA.R. 3785	2
9 VAC 25-260-140	Amended	18:24 VA.R. 3289	8/27/03 ³
9 VAC 25-260-140	Amended	19:25 VA.R. 3785	8/27/03 ³
9 VAC 25-260-150	Repealed	19:25 VA.R. 3785	8/27/03 ³
9 VAC 25-260-155	Amended	18:24 VA.R. 3289	8/27/03 ³
9 VAC 25-260-170	Amended	19:25 VA.R. 3785	8/27/03 ³
9 VAC 25-260-190 through 9 VAC 25-260-240	Repealed	19:25 VA.R. 3785	8/27/03 ³
9 VAC 25-260-300	Amended	19:25 VA.R. 3785	8/27/03 ³
9 VAC 25-260-310	Amended	18:20 VA.R. 2659	8/27/03 ³
9 VAC 25-260-310	Amended	19:25 VA.R. 3785	8/27/03 ³
9 VAC 25-260-320	Amended	19:25 VA.R. 3785	8/27/03 ³
9 VAC 25-260-340	Repealed	19:25 VA.R. 3785	8/27/03 ³
9 VAC 25-260-380 through 9 VAC 25-260-450	Amended	19:25 VA.R. 3785	8/27/03 ³
9 VAC 25-260-390	Amended	18:20 VA.R. 2661	8/27/03 ³
9 VAC 25-260-415	Added	19:25 VA.R. 3785	8/27/03 ³
9 VAC 25-260-470 through 9 VAC 25-260-540	Amended	19:25 VA.R. 3785	8/27/03 ³
9 VAC 25-280-10 through 9 VAC 25-280-90	Added	19:25 VA.R. 3785	8/27/03 ³
9 VAC 25-420	Repealed	19:14 VA.R. 2091	4/24/03
9 VAC 25-430	Repealed	19:14 VA.R. 2091	4/24/03
9 VAC 25-440	Repealed	19:14 VA.R. 2091	4/24/03
9 VAC 25-450	Repealed	19:14 VA.R. 2091	4/24/03
9 VAC 25-450	Repealed	19:14 VA.R. 2091	4/24/03
9 VAC 25-452 9 VAC 25-460	Repealed	19:14 VA.R. 2091 19:14 VA.R. 2091	4/24/03
9 VAC 25-400 9 VAC 25-470	Repealed	19:14 VA.R. 2091 19:14 VA.R. 2091	4/24/03
3 VAC 20-470	rzepealeu	13.14 VA.N. 2031	4/24/03

Section suspended in 19:18 VA.R. 2680.

² 30 days after notice of approval published in the Virginia Register of Regulations.

³ Notice of effective date published in 19:23 VA. R. 3348.

SECTION NUMBER	ACTION	CITE	EFFECTIVE DATE
9 VAC 25-480	Repealed	19:14 VA.R. 2091	4/24/03
9 VAC 25-400 9 VAC 25-490	Repealed	19:14 VA.R. 2091	4/24/03
9 VAC 25-490 9 VAC 25-500	Repealed	19:14 VA.R. 2091	4/24/03
9 VAC 25-510	Repealed	19:14 VA.R. 2091	4/24/03
9 VAC 25-510 9 VAC 25-520	Repealed	19:14 VA.R. 2091	4/24/03
9 VAC 25-530	Repealed	19:14 VA.R. 2091	4/24/03
9 VAC 25-540	Repealed	19:14 VA.R. 2091	4/24/03
9 VAC 25-550	Repealed	19:14 VA.R. 2091	4/24/03
9 VAC 25-560	Repealed	19:14 VA.R. 2091	4/24/03
9 VAC 25-500 9 VAC 25-570	Repealed	19:14 VA.R. 2091	4/24/03
9 VAC 25-570 9 VAC 25-572	Repealed	19:14 VA.R. 2091	4/24/03
9 VAC 25-660 (Forms)	Amended	19:12 VA.R. 1912	4/24/03
9 VAC 25-660 (Forms)	Added	19:16 VA.R. 2418	
		19:10 VA.R. 2416 19:12 VA.R. 1912	
9 VAC 25-670 (Forms)	Amended		
9 VAC 25-680 (Forms)	Amended	19:12 VA.R. 1912	
9 VAC 25-680 (Forms)	Added	19:16 VA.R. 2418	
9 VAC 25-690 (Forms)	Amended	19:12 VA.R. 1912	
9 VAC 25-690 (Forms)	Added	19:16 VA.R. 2418	
9 VAC 25-720	Erratum	19:20 VA.R. 2999	 4/0.4/0.0
9 VAC 25-720-10 through 9 VAC 25-720-140	Added	19:14 VA.R. 2091-2138	4/24/03
9 VAC 25-720-50	Erratum	19:18 VA.R. 2746-2747	
9 VAC 25-720-80	Erratum	19:18 VA.R. 2747	
9 VAC 25-720-120	Erratum	19:18 VA.R. 2747	
9 VAC 25-720-130	Erratum	19:18 VA.R. 2747	
9 VAC 25-730	Repealed	19:14 VA.R. 2090	4/23/03
Title 11. Gaming			
11 VAC 5-10-10 through 11 VAC 5-10-70	Amended	19:15 VA.R. 2264	5/7/03
11 VAC 5-10-80	Added	19:15 VA.R. 2264	5/7/03
11 VAC 5-20-10	Amended	19:15 VA.R. 2265	5/7/03
11 VAC 5-20-60	Amended	19:15 VA.R. 2265	5/7/03
11 VAC 5-20-70	Amended	19:15 VA.R. 2265	5/7/03
11 VAC 5-20-80	Amended	19:15 VA.R. 2265	5/7/03
11 VAC 5-20-90	Repealed	19:15 VA.R. 2265	5/7/03
11 VAC 5-20-100	Repealed	19:15 VA.R. 2265	5/7/03
11 VAC 5-20-110	Repealed	19:15 VA.R. 2265	5/7/03
11 VAC 5-20-120 through 11 VAC 5-20-180	Amended	19:15 VA.R. 2265	5/7/03
11 VAC 5-20-420	Amended	19:15 VA.R. 2265	5/7/03
11 VAC 5-30	Repealed	19:15 VA.R. 2265	5/7/03
11 VAC 5-31-10 through 11 VAC 5-31-200	Added	19:15 VA.R. 2266	5/7/03
11 VAC 5-40	Repealed	19:15 VA.R. 2266	5/7/03
11 VAC 5-41-10 through 11 VAC 5-41-340	Added	19:15 VA.R. 2266-2269	5/7/03
11 VAC 10-20-410 through 11 VAC 10-20-417 emer	Added	19:26 VA.R. 3913-3919	8/13/03-8/12/04
Title 12. Health			
12 VAC 5-31-610	Added	19:3 VA.R. 493	4
12 VAC 5-31-620	Added	19:3 VA.R. 494	4
12 VAC 5-31-730	Added	19:3 VA.R. 516	4
12 VAC 5-31-940	Added	19:3 VA.R. 503	4
12 VAC 5-31-1030	Added	19:3 VA.R. 504	5/6/03 ⁵
12 VAC 5-31-1030 12 VAC 5-31-1140	Added	19:3 VA.R. 505	5/6/03 ⁵
12 VAC 5-51-1140 12 VAC 5-90-80 emer	Amended	19:22 VA.R. 3220	6/24/03-6/23/04
12 VAC 5-90-80 emer	Amended	19:13 VA.R. 1971	2/11/03-2/10/04
12 VAC 5-90-80 emer	Amended	19:18 VA.R. 2737	4/24/03-4/23/04
12 VUO 9-30-00 CIIICI	Amenueu	13.10 VA.N. 2/3/	4/4/00-4/20/04

Section withdrawn in 19:16 VA.R. 2393.

Section readopted in 19:16 VA.R. 2393.

SECTION NUMBER	ACTION	CITE	EFFECTIVE DATE
12 VAC 5-120-50	Amended	19:22 VA.R. 3215	8/13/03
12 VAC 5-200-10	Amended	19:22 VA.R. 3215	8/13/03
12 VAC 5-218-10 through 12 VAC 5-218-60	Added	19:26 VA.R. 3911	10/8/03
12 VAC 5-407-10 through 12 VAC 5-407-120	Added	19:26 VA.R. 3911	10/8/03
12 VAC 5-550-5	Added	19:26 VA.R. 3912	10/8/03
12 VAC 5-550-10	Repealed	19:26 VA.R. 3912	10/8/03
12 VAC 5-550-30	Amended	19:26 VA.R. 3912	10/8/03
12 VAC 5-550-40	Repealed	19:26 VA.R. 3912	10/8/03
12 VAC 5-550-70	Amended	19:26 VA.R. 3912	10/8/03
12 VAC 5-550-90 through 12 VAC 5-550-120	Amended	19:26 VA.R. 3912	10/8/03
12 VAC 5-550-125	Added	19:26 VA.R. 3912	10/8/03
12 VAC 5-550-130	Amended	19:26 VA.R. 3912	10/8/03
12 VAC 5-550-140	Amended	19:26 VA.R. 3912	10/8/03
12 VAC 5-550-150	Amended	19:26 VA.R. 3912	10/8/03
12 VAC 5-550-190	Amended	19:26 VA.R. 3912	10/8/03
12 VAC 5-550-200	Amended	19:26 VA.R. 3912	10/8/03
12 VAC 5-550-210	Amended	19:26 VA.R. 3912	10/8/03
12 VAC 5-550-230 through 12 VAC 5-550-260	Amended	19:26 VA.R. 3912	10/8/03
12 VAC 5-550-280 through 12 VAC 5-550-330	Amended	19:26 VA.R. 3912	10/8/03
12 VAC 5-550-350 through 12 VAC 5-550-410	Amended	19:26 VA.R. 3912	10/8/03
12 VAC 5-550-430 through 12 VAC 5-550-470	Amended	19:26 VA.R. 3912	10/8/03
12 VAC 5-550-510	Amended	19:26 VA.R. 3912	10/8/03
12 VAC 5-550-520	Amended	19:26 VA.R. 3912	10/8/03
12 VAC 5-585-10	Amended	19:14 VA.R. 2138	4/23/03
12 VAC 5-585-40	Amended	19:14 VA.R. 2140	4/23/03
12 VAC 5-585-50	Amended	19:14 VA.R. 2141	4/23/03
12 VAC 5-585-270	Amended	19:14 VA.R. 2141	4/23/03
12 VAC 5-585-660 through 12 VAC 5-585-750	Added	19:14 VA.R. 2141-2145	4/23/03
12 VAC 5-590-10	Amended	19:17 VA.R. 2520	6/4/03
12 VAC 5-590-140	Amended	19:24 VA.R. 3557	9/10/03
12 VAC 5-590-150	Amended	19:24 VA.R. 3557	9/10/03
12 VAC 5-590-370	Amended	19:17 VA.R. 2526	6/4/03
12 VAC 5-590-370	Amended	19:24 VA.R. 3557	9/10/03
12 VAC 5-590-380	Amended	19:24 VA.R. 3557	9/10/03
12 VAC 5-590-400	Amended	19:24 VA.R. 3557	9/10/03
12 VAC 5-590-410	Amended	19:24 VA.R. 3557	9/10/03
12 VAC 5-590-420	Amended	19:17 VA.R. 2549	6/4/03
12 VAC 5-590-420	Amended	19:20 VA.R. 2982	7/16/03
12 VAC 5-590-440	Amended	19:17 VA.R. 2565	6/4/03
12 VAC 5-590-440	Amended	19:24 VA.R. 3557	9/10/03
12 VAC 5-590-530	Amended	19:17 VA.R. 2568	6/4/03
12 VAC 5-590-530	Amended	19:20 VA.R. 2982	7/16/03
12 VAC 5-590-530	Amended	19:24 VA.R. 3557	9/10/03
12 VAC 5-590-540	Amended	19:24 VA.R. 3557	9/10/03
12 VAC 5-590-550	Amended	19:20 VA.R. 2982	7/16/03
12 VAC 5-590-990, Appendix F and Appendix G	Amended	19:20 VA.R. 2983-2984	7/16/03
12 VAC 5-590 Appendix M	Amended	19:17 VA.R. 2575	6/4/03
12 VAC 5-590 Appendix B	Amended	19:24 VA.R. 3557	9/10/03
12 VAC 5-590 Appendix O	Amended	19:24 VA.R. 3557	9/10/03
12 VAC 5-590 Appendix P	Added	19:24 VA.R. 3557	9/10/03
12 VAC 5-590 Appendix F	Repealed	19:24 VA.R. 3557	9/10/03
12 VAC 5-590 Appendix H	Repealed	19:24 VA.R. 3557	9/10/03
12 VAC 30-20-80	Amended	19:18 VA.R. 2682	7/1/03
12 VAC 30-20-150	Amended	19:18 VA.R. 2682	7/1/03
12 VAC 30-20-160	Amended	19:18 VA.R. 2683	7/1/03
12 VAC 30-40-220 emer	Amended	19:22 VA.R. 3222	7/1/03-6/30/04

SECTION NUMBER	ACTION	CITE	EFFECTIVE DATE
12 VAC 30-40-235 emer	Added	19:21 VA.R. 3076	8/1/03-7/31/04
12 VAC 30-40-345 emer	Amended	19:22 VA.R. 3224	7/1/03-6/30/04
12 VAC 30-50-10 emer	Amended	19:21 VA.R. 3078	7/1/03-6/30/04
12 VAC 30-50-10	Amended	20:1 VA.R. 25	10/22/03
12 VAC 30-50-20 emer	Amended	19:21 VA.R. 3078	7/1/03-6/30/04
12 VAC 30-50-20	Amended	20:1 VA.R. 26	10/22/03
12 VAC 30-50-50 emer	Amended	19:21 VA.R. 3079	7/1/03-6/30/04
12 VAC 30-50-50	Amended	20:1 VA.R. 26	10/22/03
12 VAC 30-50-60 emer	Amended	19:21 VA.R. 3079	7/1/03-6/30/04
12 VAC 30-50-60	Amended	20:1 VA.R. 27	10/22/03
12 VAC 30-50-120 emer	Amended	19:21 VA.R. 3080	7/1/03-6/30/04
12 VAC 30-50-120	Amended	20:1 VA.R. 27	10/22/03
12 VAC 30-50-140	Amended	19:18 VA.R. 2684	7/1/03
12 VAC 30-50-140 emer	Amended	19:21 VA.R. 3080	7/1/03-6/30/04
12 VAC 30-50-140 cmcl	Amended	20:1 VA.R. 27	10/22/03
12 VAC 30-50-140	Amended	20:1 VA.R. 29	10/22/03
12 VAC 30-50-140 12 VAC 30-50-150	Amended	19:18 VA.R. 2685	7/1/03
12 VAC 30-50-150 12 VAC 30-50-150	Amended	20:1 VA.R. 30	10/22/03
12 VAC 30-50-150 12 VAC 30-50-160	Amended	19:18 VA.R. 2686	7/1/03
12 VAC 30-50-100 12 VAC 30-50-229.1 emer	Amended	19:23 VA.R. 3387	7/1/03-6/30/04
12 VAC 30-50-460		19:18 VA.R. 2686	7/1/03-0/30/04
12 VAC 30-50-400 12 VAC 30-50-530 emer	Repealed	19:21 VA.R. 3081	
	Amended		7/1/03-6/30/04
12 VAC 30-50-530	Amended	20:1 VA.R. 28	10/22/03
12 VAC 30-60-40 emer	Amended	19:23 VA.R. 3391	7/1/03-6/30/04
12 VAC 30-60-70	Amended	19:18 VA.R. 2687	7/1/03
12 VAC 30-60-320 emer	Amended	19:23 VA.R. 3392	7/1/03-6/30/04
12 VAC 30-70-201	Amended	19:21 VA.R. 3058	8/1/03
12 VAC 30-70-221	Amended	19:18 VA.R. 2699	7/1/03
12 VAC 30-70-271 emer	Amended	19:22 VA.R. 3225	7/1/03-6/30/04
12 VAC 30-70-281	Amended	19:18 VA.R. 2699	7/1/03
12 VAC 30-70-291 emer	Amended	19:26 VA.R. 3920	8/13/03-8/12/04
12 VAC 30-70-301 emer	Amended	19:26 VA.R. 3921	8/13/03-8/12/04
12 VAC 30-70-331 emer	Amended	19:26 VA.R. 3922	8/13/03-8/12/04
12 VAC 30-70-351	Amended	19:18 VA.R. 2699	7/1/03
12 VAC 30-70-351 emer	Amended	19:21 VA.R. 3082	7/1/03-6/30/04
12 VAC 30-70-391 emer	Amended	19:22 VA.R. 3226	7/1/03-6/30/04
12 VAC 30-80-20	Amended	19:18 VA.R. 2699	7/1/03
12 VAC 30-80-40	Amended	19:18 VA.R. 2701	7/1/03
12 VAC 30-80-75 emer	Added	19:23 VA.R. 3391	7/1/03-6/30/04
12 VAC 30-90-264 emer	Amended	19:23 VA.R. 3393	7/1/03-6/30/04
12 VAC 30-80-200 emer	Added	19:21 VA.R. 3085	7/1/03-6/30/04
12 VAC 30-90-41	Amended	19:18 VA.R. 2702	7/1/03
12 VAC 30-90-41.2 emer	Added	19:22 VA.R. 3226	7/1/03-6/30/04
12 VAC 30-90-257	Added	19:18 VA.R. 2702	7/1/03
12 VAC 30-110-1210	Repealed	19:18 VA.R. 2689	7/1/03
12 VAC 30-110-1350 through 12 VAC 30-110-1410	Added	19:18 VA.R. 2703	6/19/03
12 VAC 30-120-50	Amended	19:18 VA.R. 2690	7/1/03
12 VAC 30-120-140 emer	Amended	19:15 VA.R. 2270	3/17/03-3/16/04
12 VAC 30-120-150 emer	Amended	19:15 VA.R. 2273	3/17/03-3/16/04
12 VAC 30-120-160 emer	Amended	19:15 VA.R. 2274	3/17/03-3/16/04
12 VAC 30-120-165 emer	Added	19:15 VA.R. 2276	3/17/03-3/16/04
12 VAC 30-120-170 emer	Amended	19:15 VA.R. 2281	3/17/03-3/16/04
12 VAC 30-120-180 emer	Amended	19:15 VA.R. 2282	3/17/03-3/16/04
12 VAC 30-120-190 emer	Amended	19:15 VA.R. 2284	3/17/03-3/16/04
12 VAC 30-120-260	Amended	19:23 VA.R. 3349	8/27/03
12 VAC 30-120-280	Amended	19:23 VA.R. 3350	8/27/03

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12 VAC 30-130-50	12 VAC 30-120-710	Amended	19:25 VA.R. 3789	10/1/03
12 VAC 30-130-620 emer	12 VAC 30-120-720	Amended	19:25 VA.R. 3789	10/1/03
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12 VAC 3-1-10 through 12 VAC 3-1-41-660 Added 19:11 VAR. 3058-3071 81/103 12 VAC 3-1-10 through 12 VAC 3-1-10 Amended 19:19 VAR. 2864 7/2/03 12 VAC 3-1-1-100 Repealed 19:19 VAR. 2864 7/2/03 12 VAC 3-1-1-100 Repealed 19:19 VAR. 2864 7/2/03 12 VAC 3-1-1-100 Added 19:19 VAR. 2865 81/103 12 VAC 3-1-100 Added 19:19 VAR. 2865 81/103 12 VAC 3-1-100 Added 19:19 VAR. 2865 81/103 12 VAC 3-1-100 Added 19:19 VAR. 2865 81/103 12 VAC 3-1-105 Added 19:19 VAR. 2865 81/103 12 VAC 3-105 Added 19:19 VAR. 2865 81/103 12 VAC 3-105-20 Amended 19:24 VAR. 3564 9/18/03 12 VAC 3-105-20 Amended 19:24 VAR. 3564 9/18/03 12 VAC 3-105-200 Amended 19:24 VAR. 3564 9/18/03 12 VAC 3-105-200 Amended 19:24 VAR. 3564 9/18/03 12 VAC 3-105-200 Amended 19:24 VAR. 3564 9/18/03 12 VAC 3-105-600 Amended 19:24 VAR. 3564 9/18/03 12 VAC 3-105-600 Amended 19:24 VAR. 3564 9/18/03 12 VAC 3-105-600 Amended 19:24 VAR. 3565 9/18/03 13 VAC 5-21-10 Amended 19:25 VAR. 3792 10/1/03 13 VAC 5-21-31 Amended 19:25 VAR. 3792 10/1/03 13 VAC 5-21-31 Amended 19:25 VAR. 3793 10/1/03 13 VAC 5-21-41 Amended 19:25 VAR. 3793 10/1/03 13 VAC 5-21-61 Amended 19:25 VAR. 3795 10/1/03 13 VAC 5-21-61 Amended 19:25 VAR. 3796 10/1/03 13 VAC 5-31-10 Amended 19:25 VAR. 3799 10/1/03 13 VAC 5-31-10 Amended 19:25 VAR. 3799 10/1/03 13 VAC 5-31-10 Amended 19:25 VAR. 3799 10/1/03 13 VAC 5-31-10	12 VAC 30-135-10 through 12 VAC 30-135-90	Added	19:25 VA.R. 3789-3791	10/1/03
12 VAC 35-11-10 through 12 VAC 35-11-90	12 VAC 30-140-10 through 12 VAC 30-140-570	Repealed	19:24 VA.R. 3557	9/11/03
12 VAC 35-11-15	12 VAC 30-141-10 through 12 VAC 30-141-660	Added	19:21 VA.R. 3058-3071	8/1/03
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Title 13. Housing Amended 19:25 VA.R. 3791 10/1/03 13 VAC 5-21-10 Amended 19:25 VA.R. 3792 10/1/03 13 VAC 5-21-20 Amended 19:25 VA.R. 3792 10/1/03 13 VAC 5-21-31 Amended 19:25 VA.R. 3792 10/1/03 13 VAC 5-21-41 Amended 19:25 VA.R. 3793 10/1/03 13 VAC 5-21-51 Amended 19:25 VA.R. 3795 10/1/03 13 VAC 5-21-61 Amended 19:25 VA.R. 3795 10/1/03 13 VAC 5-21-70 Amended 19:25 VA.R. 3796 10/1/03 13 VAC 5-31-10 Amended 19:25 VA.R. 3796 10/1/03 13 VAC 5-31-40 Amended 19:25 VA.R. 3796 10/1/03 13 VAC 5-31-50 Amended 19:25 VA.R. 3796 10/1/03 13 VAC 5-31-60 Amended 19:25 VA.R. 3796 10/1/03 13 VAC 5-31-90 Amended 19:25 VA.R. 3796 10/1/03 13 VAC 5-31-110 Amended 19:25 VA.R. 3796 10/1/03 13 VAC 5-31-190 Amended 19:25 VA.R. 3796 10/1/03		Amended		9/18/03
13 VAC 5-21-10	12 VAC 35-105-800	Amended	19:24 VA.R. 3565	9/18/03
13 VAC 5-21-20 Amended 19:25 VA.R. 3792 10/1/03 13 VAC 5-21-31 Amended 19:25 VA.R. 3792 10/1/03 13 VAC 5-21-41 Amended 19:25 VA.R. 3793 10/1/03 13 VAC 5-21-51 Amended 19:25 VA.R. 3795 10/1/03 13 VAC 5-21-61 Amended 19:25 VA.R. 3796 10/1/03 13 VAC 5-21-70 Amended 19:25 VA.R. 3796 10/1/03 13 VAC 5-31-10 Amended 19:25 VA.R. 3796 10/1/03 13 VAC 5-31-40 Amended 19:25 VA.R. 3796 10/1/03 13 VAC 5-31-50 Amended 19:25 VA.R. 3796 10/1/03 13 VAC 5-31-60 Amended 19:25 VA.R. 3796 10/1/03 13 VAC 5-31-10 Amended 19:25 VA.R. 3796 10/1/03 13 VAC 5-31-80 Amended 19:25 VA.R. 3796 10/1/03 13 VAC 5-31-10 Amended 19:25 VA.R. 3796 10/1/03 13 VAC 5-31-110 Amended 19:25 VA.R. 3796 10/1/03 13 VAC 5-31-120 Amended 19:25 VA.R. 3797 10/1/03 13 VAC 5-51-11 Amended 19:25 VA.R. 3797 10/1/03	Title 13. Housing			
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	13 VAC 5-51-121	Amended	19:25 VA.R. 3814	10/1/03

SECTION NUMBER	ACTION	CITE	EFFECTIVE DATE
13 VAC 5-51-129	Added	19:25 VA.R. 3815	10/1/03
13 VAC 5-51-130	Amended	19:25 VA.R. 3815	10/1/03
13 VAC 5-51-131	Amended	19:25 VA.R. 3815	10/1/03
13 VAC 5-51-132	Added	19:25 VA.R. 3816	10/1/03
13 VAC 5-51-133	Amended	19:25 VA.R. 3816	10/1/03
13 VAC 5-51-135	Amended	19:25 VA.R. 3816	10/1/03
13 VAC 5-51-136	Amended	19:25 VA.R. 3817	10/1/03
13 VAC 5-51-140	Amended	19:25 VA.R. 3817	10/1/03
13 VAC 5-51-150	Amended	19:25 VA.R. 3818	10/1/03
13 VAC 5-51-155	Added	19:25 VA.R. 3822	10/1/03
13 VAC 5-51-160	Repealed	19:25 VA.R. 3822	10/1/03
13 VAC 5-51-170	Repealed	19:25 VA.R. 3822	10/1/03
13 VAC 5-51-180	Repealed	19:25 VA.R. 3823	10/1/03
13 VAC 5-51-181	Repealed	19:25 VA.R. 3823	10/1/03
13 VAC 5-51-182	Repealed	19:25 VA.R. 3824	10/1/03
13 VAC 5-51-190	Repealed	19:25 VA.R. 3824	10/1/03
13 VAC 5-51-200	Repealed	19:25 VA.R. 3824	10/1/03
13 VAC 5-61-11 through 13 VAC 5-61-460	Repealed	19:25 VA.R. 3824	10/1/03
13 VAC 5-62-10 through 13 VAC 5-62-480	Added	19:25 VA.R. 3824	10/1/03
13 VAC 5-80-10	Amended	19:25 VA.R. 3796	10/1/03
13 VAC 5-80-20	Repealed	19:25 VA.R. 3796	10/1/03
13 VAC 5-80-30	Repealed	19:25 VA.R. 3796	10/1/03
13 VAC 5-80-40 through 13 VAC 5-80-140	Amended	19:25 VA.R. 3796	10/1/03
13 VAC 5-80-150	Repealed	19:25 VA.R. 3796	10/1/03
13 VAC 5-91-10	Amended	19:25 VA.R. 3825	10/1/03
13 VAC 5-91-40	Amended	19:25 VA.R. 3825	10/1/03
13 VAC 5-91-50	Amended	19:25 VA.R. 3825	10/1/03
13 VAC 5-91-60	Amended	19:25 VA.R. 3825	10/1/03
13 VAC 5-91-100	Amended	19:25 VA.R. 3825	10/1/03
13 VAC 5-91-110	Amended	19:25 VA.R. 3825	10/1/03
13 VAC 5-91-120	Amended	19:25 VA.R. 3825	10/1/03
13 VAC 5-91-140	Amended	19:25 VA.R. 3825	10/1/03
13 VAC 5-91-160	Amended	19:25 VA.R. 3825	10/1/03
13 VAC 5-91-180	Amended	19:25 VA.R. 3826	10/1/03
13 VAC 5-91-200	Amended	19:25 VA.R. 3826	10/1/03
13 VAC 5-91-210	Amended	19:25 VA.R. 3826	10/1/03
13 VAC 5-91-230	Repealed	19:25 VA.R. 3826	10/1/03
13 VAC 5-91-245	Added	19:25 VA.R. 3826	10/1/03
13 VAC 5-91-250 13 VAC 5-91-260	Amended	19:25 VA.R. 3826	10/1/03 10/1/03
13 VAC 5-91-270	Amended	19:25 VA.R. 3826 19:25 VA.R. 3826	10/1/03
13 VAC 10-10-10	Amended Amended	19:25 VA.R. 3826	8/1/03
13 VAC 10-10-10 13 VAC 10-10-20	Amended	19:25 VA.R. 3826	8/1/03
13 VAC 10-10-20 13 VAC 10-40-10	Amended	19:25 VA.R. 3827	8/1/03
13 VAC 10-40-10 13 VAC 10-40-30 through 13 VAC 10-40-70	Amended	19:25 VA.R. 3827	8/1/03
13 VAC 10-40-30 tillough 13 VAC 10-40-70	Amended	19:25 VA.R. 3827	8/1/03
13 VAC 10-40-90 13 VAC 10-40-100	Amended	19:25 VA.R. 3827	8/1/03
13 VAC 10-40-100 13 VAC 10-40-110	Amended	19:12 VA.R. 1892	1/24/03
13 VAC 10-40-110 13 VAC 10-40-120	Amended	19:25 VA.R. 3827	8/1/03
13 VAC 10-40-120 13 VAC 10-40-130	Amended	19:25 VA.R. 3827	8/1/03
13 VAC 10-40-130 13 VAC 10-40-140	Amended	19:25 VA.R. 3827	8/1/03
13 VAC 10-40-140 13 VAC 10-40-160	Amended	19:25 VA.R. 3827	8/1/03
13 VAC 10-40-100	Amended	19:25 VA.R. 3827	8/1/03
13 VAC 10-40-190 through 13 VAC 10-40-230	Amended	19:25 VA.R. 3827	8/1/03
13 VAC 10-40-220	Amended	19:12 VA.R. 1892	1/24/03
13 VAC 10-40-230	Amended	19:12 VA.R. 1892	1/24/03
10 1/10 10 10 200	, andrada	10.12 77.11. 1002	1,27,00

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13 VAC 10-180-10	Amended	19:16 VA.R. 2394	4/2/03
13 VAC 10-180-50	Amended	19:16 VA.R. 2394	4/2/03
13 VAC 10-180-60	Amended	19:16 VA.R. 2394	4/2/03
13 VAC 10-180-60	Amended	19:16 VA.R. 2404	1/1/04
Title 14. Insurance			
14 VAC 5-71 (Forms)	Amended	19:23 VA.R. 3409	
14 VAC 5-71-70	Erratum	19:22 VA.R. 3230	
14 VAC 5-71-80	Erratum	19:22 VA.R. 3231	
14 VAC 5-71-90	Erratum	19:22 VA.R. 3231	
14 VAC 5-71-91	Erratum	19:22 VA.R. 3232	
14 VAC 5-71-92	Erratum	19:22 VA.R. 3233	
14 VAC 5-200-20	Amended	19:12 VA.R. 1893	4/1/03
14 VAC 5-200-30	Amended	19:12 VA.R. 1893	4/1/03
14 VAC 5-200-40	Amended	19:12 VA.R. 1893	4/1/03
14 VAC 5-200-60	Amended	19:12 VA.R. 1893	4/1/03
14 VAC 5-200-75	Amended	19:12 VA.R. 1893	4/1/03
14 VAC 5-200-77	Added	19:12 VA.R. 1894	4/1/03
14 VAC 5-200-150	Amended	19:12 VA.R. 1894	4/1/03
14 VAC 5-200-153	Added	19:12 VA.R. 1894	4/1/03
14 VAC 5-200-200	Amended	19:12 VA.R. 1894	4/1/03
14 VAC 5-260 (Forms)	Amended	19:14 VA.R. 2169	
14 VAC 5-270-40	Amended	19:21 VA.R. 3071	7/1/03
14 VAC 5-270-80	Amended	19:21 VA.R. 3071	7/1/03
Title 15. Judicial			
15 VAC 5-80-50	Amended	19:17 VA.R. 2579	4/11/03
Title 16. Labor and Employment			
16 VAC 15-10-10	Amended	19:19 VA.R. 2867	7/2/03
16 VAC 15-10-20	Amended	19:19 VA.R. 2867	7/2/03
16 VAC 15-10-40	Amended	19:19 VA.R. 2867	7/2/03
16 VAC 15-10-50	Amended	19:19 VA.R. 2867	7/2/03
16 VAC 15-10-80	Amended	19:19 VA.R. 2867	7/2/03
16 VAC 15-10-90	Amended	19:19 VA.R. 2867	7/2/03
16 VAC 15-10-100	Amended	19:19 VA.R. 2867	7/2/03
16 VAC 15-40-50	Amended	19:21 VA.R. 3072	8/1/03
16 VAC 25-50-20	Amended	19:19 VA.R. 2867	7/2/03
16 VAC 25-50-150	Amended	19:19 VA.R. 2867	7/2/03
16 VAC 25-50-340	Amended	19:19 VA.R. 2867	7/2/03
16 VAC 25-50-440	Amended	19:19 VA.R. 2868	7/2/03
16 VAC 25-50-445 16 VAC 25-85-1904.10	Added Amended	19:19 VA.R. 2868 19:23 VA.R. 3359	7/2/03 1/1/04
16 VAC 25-65-1904.10 16 VAC 25-85-1904.12	Amended	19:23 VA.R. 3359	1/1/04
16 VAC 25-85-1904.12 16 VAC 25-85-1904.29	Amended	19:23 VA.R. 3359	1/1/04
16 VAC 25-90-1910.178	Amended	19:23 VA.R. 3359	9/1/03
16 VAC 30-50-30	Amended	19:18 VA.R. 2703	7/1/03
Title 18. Professional and Occupational Licensing	7 tinonaca	10.10 77.11. 2700	771700
18 VAC 5-21-20	Amended	19:12 VA.R. 1895	3/26/03
18 VAC 15-30	Erratum	19:26 VA.R. 3926	3/20/03
18 VAC 15-30-10 through 18 VAC 15-30-50	Amended	19:24 VA.R. 3565	10/1/03
18 VAC 15-30-41	Added	19:24 VA.R. 3565	10/1/03
18 VAC 15-30-60 through 18 VAC 15-30-90	Repealed	19:24 VA.R. 3565	10/1/03
18 VAC 15-30-100 through 18 VAC 15-30-180	Amended	19:24 VA.R. 3565	10/1/03
18 VAC 15-30-190 through 18 VAC 15-30-240	Repealed	19:24 VA.R. 3565	10/1/03
18 VAC 15-30-205	Added	19:24 VA.R. 3565	10/1/03
18 VAC 15-30-245	Added	19:24 VA.R. 3565	10/1/03
18 VAC 15-30-250 through 18 VAC 15-30-300	Amended	19:24 VA.R. 3565	10/1/03

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18 VAC 15-30-310	Repealed	19:24 VA.R. 3565	10/1/03
18 VAC 15-30-320	Repealed	19:24 VA.R. 3565	10/1/03
18 VAC 15-30-330 through 18 VAC 15-30-520	Amended	19:24 VA.R. 3565	10/1/03
18 VAC 15-30-530	Repealed	19:24 VA.R. 3565	10/1/03
18 VAC 15-30-540	Amended	19:24 VA.R. 3565	10/1/03
18 VAC 15-30-541	Added	19:24 VA.R. 3565	10/1/03
18 VAC 15-30-542	Added	19:24 VA.R. 3565	10/1/03
18 VAC 15-30-550	Amended	19:24 VA.R. 3565	10/1/03
18 VAC 15-30-560 through 18 VAC 15-30-600	Repealed	19:24 VA.R. 3565	10/1/03
18 VAC 15-30-610	Amended	19:24 VA.R. 3565	10/1/03
18 VAC 15-30-620	Amended	19:24 VA.R. 3565	10/1/03
18 VAC 15-30-630	Repealed	19:24 VA.R. 3565	10/1/03
18 VAC 15-30-640	Repealed	19:24 VA.R. 3565	10/1/03
18 VAC 15-30-650	Amended	19:24 VA.R. 3565	10/1/03
18 VAC 15-30-651	Added	19:24 VA.R. 3565	10/1/03
18 VAC 15-30-660 through 18 VAC 15-30-750	Repealed	19:24 VA.R. 3565	10/1/03
18 VAC 15-30-770 through 18 VAC 15-30-820	Amended	19:24 VA.R. 3565	10/1/03
18 VAC 15-30-830	Repealed	19:24 VA.R. 3565	10/1/03
18 VAC 15-30-840	Repealed	19:24 VA.R. 3565	10/1/03
18 VAC 15-40-10 through 18 VAC 15-40-190	Added	19:18 VA.R. 2706-2712	7/1/03
18 VAC 25-10-10 through 18 VAC 25-10-50	Amended	19:19 VA.R. 2868	7/3/03
18 VAC 25-10-90	Amended	19:19 VA.R. 2868	7/3/03
18 VAC 41-20-10 through 18 VAC 41-20-280	Added	19:18 VA.R. 2712-2714	7/1/03
18 VAC 41-40-10 through 18 VAC 41-40-260 emer	Added	19:23 VA.R. 3396-3403	7/1/03-6/30/04
18 VAC 60-20-10	Amended	19:20 VA.R. 2984	7/16/03
18 VAC 60-20-90	Amended	19:18 VA.R. 2714	6/18/03
18 VAC 60-20-106	Added	19:18 VA.R. 2714	6/18/03
18 VAC 60-20-200	Amended	19:20 VA.R. 2985	7/16/03
18 VAC 60-20-210	Amended	19:20 VA.R. 2985	7/16/03
18 VAC 60-20-220	Amended	19:20 VA.R. 2985	7/16/03
18 VAC 65-20-70	Amended	19:19 VA.R. 2869	7/2/03
18 VAC 65-20-130	Amended	19:19 VA.R. 2869	7/2/03
18 VAC 65-20-140	Amended	19:19 VA.R. 2869	7/2/03
18 VAC 65-20-150	Repealed	19:19 VA.R. 2869	7/2/03
18 VAC 65-20-151	Added	19:19 VA.R. 2869	7/2/03
18 VAC 65-20-152	Added	19:19 VA.R. 2869	7/2/03
18 VAC 65-20-153	Added	19:19 VA.R. 2869	7/2/03
18 VAC 65-20-154	Added	19:19 VA.R. 2869	7/2/03
18 VAC 65-20-500	Amended	19:19 VA.R. 2869	7/2/03
18 VAC 76-20-10 through 18 VAC 76-20-60	Added	19:24 VA.R. 3565	9/10/03
18 VAC 76-30-10 through 18 VAC 76-30-120	Added	19:19 VA.R. 2869-2870	7/2/03
18 VAC 76-40-10 emer	Added	19:25 VA.R. 3831	8/6/03-8/5/04
18 VAC 76-40-20 emer	Added	19:25 VA.R. 3831	8/6/03-8/5/04
18 VAC 76-40-30 emer	Added	19:25 VA.R. 3832	8/6/03-8/5/04
18 VAC 76-40-30 emer (Forms)	Added	19:25 VA.R. 3833	
18 VAC 80-20-10	Amended	19:24 VA.R. 3567	10/1/03
18 VAC 80-20-30	Amended	19:24 VA.R. 3568	10/1/03
18 VAC 80-20-40	Amended	19:24 VA.R. 3569	10/1/03
18 VAC 80-20-50	Amended	19:24 VA.R. 3569	10/1/03
18 VAC 80-20-60	Repealed	19:24 VA.R. 3569	10/1/03
18 VAC 80-20-70	Amended	19:24 VA.R. 3569	10/1/03
18 VAC 80-20-70	Amended	19:25 VA.R. 3827	10/1/03
18 VAC 80-20-80	Amended	19:24 VA.R. 3569	10/1/03
18 VAC 80-20-120 through 18 VAC 80-20-160	Amended	19:24 VA.R. 3569-3570	10/1/03
18 VAC 80-20-170	Repealed	19:24 VA.R. 3570	10/1/03
18 VAC 80-20-180	Amended	19:24 VA.R. 3570	10/1/03

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18 VAC 80-20-200 through 18 VAC 80-20-270	Amended	19:24 VA.R. 3570	10/1/03
18 VAC 85-20-22 emer	Amended	19:23 VA.R. 3404	7/15/03-7/14/04
18 VAC 85-20-122	Amended	19:21 VA.R. 3073	7/30/03
18 VAC 85-20-210	Amended	19:21 VA.R. 3074	7/30/03
18 VAC 85-20-225	Added	19:18 VA.R. 2715	6/18/03
18 VAC 85-20-280	Amended	19:19 VA.R. 2870	7/2/03
18 VAC 85-20-280	Amended	19:21 VA.R. 3074	7/30/03
18 VAC 85-20-285	Added	19:19 VA.R. 2871	7/2/03
18 VAC 85-20-290	Amended	19:19 VA.R. 2871	7/2/03
18 VAC 85-20-300	Amended	19:19 VA.R. 2871	7/2/03
18 VAC 85-20-310 through 18 VAC 85-20-390	Added	19:18 VA.R. 2719-2720	6/18/03
18 VAC 85-40-10	Amended	19:19 VA.R. 2873	7/2/03
18 VAC 85-40-35	Added	19:19 VA.R. 2873	7/2/03
18 VAC 85-40-40	Amended	19:19 VA.R. 2873	7/2/03
18 VAC 85-40-45	Amended	19:19 VA.R. 2873	7/2/03
18 VAC 85-40-50	Amended	19:19 VA.R. 2873	7/2/03
18 VAC 85-40-55	Added	19:18 VA.R. 2717	6/18/03
18 VAC 85-40-60	Amended	19:19 VA.R. 2873	7/2/03
18 VAC 85-40-61	Amended	19:19 VA.R. 2873	7/2/03
18 VAC 85-40-65	Amended	19:19 VA.R. 2873	7/2/03
18 VAC 85-40-66	Added	19:19 VA.R. 2873	7/2/03
18 VAC 85-40-80	Repealed	19:19 VA.R. 2873	7/2/03
18 VAC 85-50-10	Amended	19:18 VA.R. 2722	6/18/03
18 VAC 85-50-40	Amended	19:18 VA.R. 2722	6/18/03
18 VAC 85-50-59	Added	19:18 VA.R. 2722	6/18/03
18 VAC 85-50-101	Amended	19:18 VA.R. 2722	6/18/03
18 VAC 85-50-110	Amended	19:18 VA.R. 2722	6/18/03
18 VAC 85-50-115	Amended	19:18 VA.R. 2722	6/18/03
18 VAC 85-80-65	Added	19:18 VA.R. 2717	6/18/03
18 VAC 85-101-10	Amended	19:19 VA.R. 2873	7/2/03
18 VAC 85-101-25	Added	19:19 VA.R. 2873	7/2/03
18 VAC 85-101-30 through 18 VAC 85-101-60	Amended	19:19 VA.R. 2873	7/2/03
18 VAC 85-101-61	Added	19:19 VA.R. 2873	7/2/03
18 VAC 85-101-80	Repealed	19:19 VA.R. 2873	7/2/03
18 VAC 85-101-90	Repealed	19:19 VA.R. 2873	7/2/03
18 VAC 85-101-100	Amended	19:19 VA.R. 2873	7/2/03
18 VAC 85-101-130	Amended	19:19 VA.R. 2873	7/2/03
18 VAC 85-101-140	Amended	19:19 VA.R. 2873	7/2/03
18 VAC 85-101-150	Amended	19:19 VA.R. 2873	7/2/03
18 VAC 85-101-151	Amended	19:19 VA.R. 2873	7/2/03
18 VAC 85-101-160	Repealed	19:19 VA.R. 2873	7/2/03
18 VAC 85-101-145	Added	19:18 VA.R. 2717	6/18/03
18 VAC 85-110-145	Added	19:18 VA.R. 2718	6/18/03
18 VAC 85-120-85	Added	19:18 VA.R. 2718	6/18/03
18 VAC 90-20-30 emer	Amended	19:23 VA.R. 3406	7/15/03-7/14/04
18 VAC 90-20-271	Added	19:18 VA.R. 2722	6/18/03
18 VAC 90-20-360	Amended	19:13 VA.R. 1967	4/9/03
18 VAC 90-20-361	Added	19:13 VA.R. 1967	4/9/03
18 VAC 90-20-362	Added	19:13 VA.R. 1967	4/9/03
18 VAC 90-20-363	Added	19:13 VA.R. 1968	4/9/03
18 VAC 90-20-364	Added	19:13 VA.R. 1968	4/9/03
18 VAC 90-30-10	Amended	19:19 VA.R. 2874	7/2/03
18 VAC 90-30-70	Amended	19:19 VA.R. 2874	7/2/03
18 VAC 90-30-90	Amended	19:19 VA.R. 2874	7/2/03
18 VAC 95-20-10	Amended	19:19 VA.R. 2874	7/2/03
18 VAC 95-20-175	Amended	19:19 VA.R. 2875	7/2/03

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18 VAC 95-20-200	Amended	19:19 VA.R. 2875	7/2/03
18 VAC 95-20-220	Amended	19:19 VA.R. 2876	7/2/03
18 VAC 95-20-230	Amended	19:19 VA.R. 2876	7/2/03
18 VAC 95-20-290	Repealed	19:19 VA.R. 2876	7/2/03
18 VAC 95-20-300	Amended	19:19 VA.R. 2876	7/2/03
18 VAC 95-20-310	Amended	19:19 VA.R. 2876	7/2/03
18 VAC 95-20-330	Amended	19:19 VA.R. 2877	7/2/03
18 VAC 95-20-340	Amended	19:19 VA.R. 2877	7/2/03
18 VAC 95-20-380	Amended	19:19 VA.R. 2877	7/2/03
18 VAC 95-20-390	Amended	19:19 VA.R. 2877	7/2/03
18 VAC 100-20-53 emer	Added	19:24 VA.R. 3601	7/17/03-7/16/04
18 VAC 105-20-75	Added	19:19 VA.R. 2877	7/2/03
18 VAC 110-20-75	Added	19:19 VA.R. 2878	7/2/03
18 VAC 110-20-170	Amended	19:19 VA.R. 2878	7/2/03
18 VAC 110-20-240	Amended	19:20 VA.R. 2986	7/16/03
18 VAC 110-20-255	Added	19:20 VA.R. 2986	7/16/03
18 VAC 110-20-275	Added	19:20 VA.R. 2986	7/16/03
18 VAC 110-20-320	Amended	19:20 VA.R. 2986	7/16/03
18 VAC 110-20-330	Amended	19:19 VA.R. 2878	7/2/03
18 VAC 110-20-400	Amended	19:20 VA.R. 2986	7/16/03
18 VAC 110-20-411	Amended	19:19 VA.R. 2878	7/2/03
18 VAC 110-20-430	Repealed	19:20 VA.R. 2986	7/16/03
18 VAC 110-20-530	Amended	19:20 VA.R. 2986	7/16/03
18 VAC 110-20-730	Added	19:20 VA.R. 2986	7/16/03
18 VAC 115-30-10	Amended	19:18 VA.R. 2724	6/18/03
18 VAC 115-30-30	Amended	19:18 VA.R. 2724	6/18/03
18 VAC 115-30-40	Amended	19:18 VA.R. 2724	6/18/03
18 VAC 115-30-45	Amended	19:18 VA.R. 2724	6/18/03
18 VAC 115-30-50	Amended	19:18 VA.R. 2724	6/18/03
18 VAC 115-30-60	Amended	19:18 VA.R. 2724	6/18/03
18 VAC 115-30-61	Added	19:18 VA.R. 2724	6/18/03
18 VAC 115-30-62	Added	19:18 VA.R. 2724	6/18/03
18 VAC 115-30-70	Repealed	19:18 VA.R. 2724	6/18/03
18 VAC 115-30-90	Amended	19:18 VA.R. 2724	6/18/03
18 VAC 115-30-110	Amended	19:18 VA.R. 2724	6/18/03
18 VAC 115-30-140	Amended	19:18 VA.R. 2724	6/18/03
18 VAC 120-40-10	Amended	19:23 VA.R. 3361	8/27/03
18 VAC 120-40-20	Amended	19:23 VA.R. 3361	8/27/03
18 VAC 120-40-30	Repealed	19:23 VA.R. 3362	8/27/03
18 VAC 120-40-40 through 18 VAC 120-40-140	Amended	19:23 VA.R. 3362-3363	8/27/03
18 VAC 120-40-170 through 18 VAC 120-40-260	Amended	19:23 VA.R. 3363-3365 19:23 VA.R. 3365	8/27/03
18 VAC 120-40-290	Amended		8/27/03
18 VAC 120-40-350 18 VAC 120-40-380	Amended Amended	19:23 VA.R. 3365 19:23 VA.R. 3365	8/27/03 8/27/03
18 VAC 120-40-380 18 VAC 120-40-400		19:23 VA.R. 3366	8/27/03
18 VAC 120-40-400 18 VAC 120-40-430	Amended Amended	19:23 VA.R. 3366 19:23 VA.R. 3366	8/27/03
18 VAC 130-20-10	Amended	19:18 VA.R. 2724	7/1/03
18 VAC 130-20-10 18 VAC 130-20-30	Amended	19:18 VA.R. 2728	7/1/03
18 VAC 130-20-30 18 VAC 130-20-40	Amended	19:18 VA.R. 2729	7/1/03
18 VAC 130-20-40 18 VAC 130-20-50	Amended	19:18 VA.R. 2729	7/1/03
18 VAC 130-20-60	Amended	19:18 VA.R. 2730	7/1/03
18 VAC 130-20-60 18 VAC 130-20-70	Amended	19:18 VA.R. 2730	7/1/03
18 VAC 130-20-70 18 VAC 130-20-110	Amended	19:18 VA.R. 2730	7/1/03
18 VAC 130-20-110 18 VAC 130-20-170	Amended	19:18 VA.R. 2731	7/1/03
18 VAC 130-20-170 18 VAC 130-20-180	Amended	19:18 VA.R. 2731	7/1/03
18 VAC 130-20-100 18 VAC 130-20-200	Amended	19:18 VA.R. 2733	7/1/03
10 1/10 100 20 200	ATTIGITACA	10.10 VA.N. 2100	17 1700

SECTION NUMBER	ACTION	CITE	EFFECTIVE DATE
18 VAC 130-20-210	Amended	19:18 VA.R. 2733	7/1/03
18 VAC 130-20-220	Amended	19:18 VA.R. 2733	7/1/03
18 VAC 130-20-230	Amended	19:18 VA.R. 2734	7/1/03
18 VAC 135-20-10 through 18 VAC 135-20-80	Amended	19:12 VA.R. 1899-1901	4/1/03
18 VAC 135-20-30	Erratum	19:14 VA.R. 2177	
18 VAC 135-20-60	Erratum	19:14 VA.R. 2177	
18 VAC 135-20-100	Amended	19:12 VA.R. 1901	4/1/03
18 VAC 135-20-105	Added	19:12 VA.R. 1901	4/1/03
18 VAC 135-20-110 through 18 VAC 135-20-150	Amended	19:12 VA.R. 1901	4/1/03
18 VAC 135-20-155	Added	19:12 VA.R. 1901	4/1/03
18 VAC 135-20-160 through 18 VAC 135-20-180	Amended	19:12 VA.R. 1901	4/1/03
18 VAC 135-20-185	Added	19:12 VA.R. 1901	4/1/03
18 VAC 135-20-190	Amended	19:12 VA.R. 1901	4/1/03
18 VAC 135-20-200	Repealed	19:12 VA.R. 1903	4/1/03
18 VAC 135-20-220	Amended	19:12 VA.R. 1903	4/1/03
18 VAC 135-20-230	Repealed	19:12 VA.R. 1903	4/1/03
18 VAC 135-20-240 through 18 VAC 135-20-300	Amended	19:12 VA.R. 1903-1904	4/1/03
18 VAC 135-20-260	Erratum	19:14 VA.R. 2177	
18 VAC 135-20-320	Repealed	19:12 VA.R. 1904	4/1/03
18 VAC 135-20-330	Amended	19:12 VA.R. 1904	4/1/03
18 VAC 135-20-340	Amended	19:12 VA.R. 1904	4/1/03
18 VAC 135-20-360	Amended	19:12 VA.R. 1904	4/1/03
18 VAC 135-20-370	Amended	19:12 VA.R. 1904	4/1/03
18 VAC 135-20-410	Amended	19:12 VA.R. 1904	4/1/03
18 VAC 135-40-10	Repealed	19:19 VA.R. 2880	7/2/03
18 VAC 135-40-20	Amended	19:19 VA.R. 2880	7/2/03
18 VAC 135-40-30	Repealed	19:19 VA.R. 2880	7/2/03
18 VAC 135-40-40	Repealed	19:19 VA.R. 2880	7/2/03
18 VAC 135-40-50	Amended	19:19 VA.R. 2880	7/2/03
18 VAC 135-40-60	Amended	19:19 VA.R. 2880	7/2/03
18 VAC 135-40-00 18 VAC 135-40-70	Repealed	19:19 VA.R. 2880	7/2/03
18 VAC 135-40-80	Amended	19:19 VA.R. 2880	7/2/03
18 VAC 135-40-90	Repealed	19:19 VA.R. 2880	7/2/03
18 VAC 135-40-110	Amended	19:19 VA.R. 2880	7/2/03
18 VAC 135-40-120	Repealed	19:19 VA.R. 2880	7/2/03
18 VAC 135-40-130	Repealed	19:19 VA.R. 2880	7/2/03
18 VAC 135-40-140	Amended	19:19 VA.R. 2880	7/2/03
18 VAC 135-40-150	Amended	19:19 VA.R. 2880	7/2/03
18 VAC 135-40-160	Amended	19:19 VA.R. 2881	7/2/03
18 VAC 135-40-170 through 18 VAC 135-40-410	Repealed	19:19 VA.R. 2881	7/2/03
18 VAC 135-40-420	Amended	19:19 VA.R. 2881	7/2/03
18 VAC 135-40-430	Amended	19:19 VA.R. 2881	7/2/03
18 VAC 135-40-440 through 18 VAC 135-40-530	Repealed	19:19 VA.R. 2882	7/2/03
18 VAC 135-50-10	Amended	19:24 VA.R. 3571	9/10/03
18 VAC 135-50-30	Amended	19:24 VA.R. 3571	9/10/03
18 VAC 135-50-40	Repealed	19:24 VA.R. 3571	9/10/03
18 VAC 135-50-50	Amended	19:24 VA.R. 3571	9/10/03
18 VAC 135-50-70 through 18 VAC 135-50-110	Amended	19:24 VA.R. 3571-3572	9/10/03
18 VAC 135-50-140	Amended	19:24 VA.R. 3571-3572	9/10/03
18 VAC 135-50-140 18 VAC 135-50-150	Repealed	19:24 VA.R. 3573	9/10/03
18 VAC 135-50-150 18 VAC 135-50-190	Amended	19:24 VA.R. 3574	9/10/03
18 VAC 135-50-190 18 VAC 135-50-200	Amended	19:24 VA.R. 3574	9/10/03
18 VAC 135-50-210	Amended	19:24 VA.R. 3574 19:24 VA.R. 3577	9/10/03
18 VAC 135-50-210 18 VAC 135-50-212	Added	19:24 VA.R. 3577	9/10/03
18 VAC 135-50-212 18 VAC 135-50-215	Added	19:24 VA.R. 3577 19:24 VA.R. 3577	9/10/03
18 VAC 135-50-215 18 VAC 135-50-217	Added	19:24 VA.R. 3577 19:24 VA.R. 3577	9/10/03
10 1/10 100-00-21/	Audeu	19.24 VA.IV. 3011	a) 10/03

SECTION NUMBER	ACTION	CITE	EFFECTIVE DATE
18 VAC 135-50-220	Amended	19:24 VA.R. 3577	9/10/03
18 VAC 135-50-220	Repealed	19:24 VA.R. 3577	9/10/03
18 VAC 135-50-240	Repealed	19:24 VA.R. 3577	9/10/03
18 VAC 135-50-250	Repealed	19:24 VA.R. 3577	9/10/03
18 VAC 135-50-270	Amended	19:24 VA.R. 3577	9/10/03
18 VAC 135-50-290	Amended	19:24 VA.R. 3577	9/10/03
18 VAC 135-50-300	Amended	19:24 VA.R. 3577	9/10/03
18 VAC 135-50-330	Amended	19:24 VA.R. 3577	9/10/03
18 VAC 135-50-350	Amended	19:24 VA.R. 3578	9/10/03
18 VAC 135-50-390	Amended	19:24 VA.R. 3578	9/10/03
18 VAC 135-50-400	Amended	19:24 VA.R. 3578	9/10/03
18 VAC 135-50-420	Amended	19:24 VA.R. 3578	9/10/03
18 VAC 135-50-440 through 18 VAC 135-50-470	Amended	19:24 VA.R. 3578	9/10/03
18 VAC 135-50-510	Amended	19:24 VA.R. 3578	9/10/03
18 VAC 135-50-530	Amended	19:24 VA.R. 3578	9/10/03
18 VAC 135-50-560 through 18 VAC 135-50-590	Repealed	19:24 VA.R. 3579	9/10/03
18 VAC 135-60-10 through 18 VAC 135-60-60	Added	19:24 VA.R. 3579	9/10/03
18 VAC 140-20-30	Amended	19:14 VA.R. 2145	4/23/03
18 VAC 150-20-135	Added	19:22 VA.R. 3217	8/13/03
Title 19. Public Safety			
19 VAC 30-170-5	Repealed	19:23 VA.R. 3367	7/3/03
19 VAC 30-170-10	Repealed	19:23 VA.R. 3368	7/3/03
19 VAC 30-170-15	Added	19:23 VA.R. 3368	7/3/03
19 VAC 30-170-20	Repealed	19:23 VA.R. 3368	7/3/03
19 VAC 30-170-30	Amended	19:23 VA.R. 3369	7/3/03
19 VAC 30-170-40	Repealed	19:23 VA.R. 3370	7/3/03
19 VAC 30-170-50	Amended	19:23 VA.R. 3370	7/3/03
19 VAC 30-170-60	Repealed	19:23 VA.R. 3370	7/3/03
Title 20. Public Utilities and Telecommunications			
20 VAC 5-200	Erratum	19:20 VA.R. 2999	
20 VAC 5-312-20	Amended	19:17 VA.R. 2579	4/10/03
20 VAC 5-312-120	Amended	19:24 VA.R. 3579	1/1/04
20 VAC 5-400-180	Repealed	19:17 VA.R. 2583	4/10/03
20 VAC 5-417	Erratum	19:20 VA.R. 2999	
20 VAC 5-417-10 through 20 VAC 5-417-80	Added	19:17 VA.R. 2583-2587	4/10/03
20 VAC 5-429-10 through 20 VAC 5-429-60	Added	19:17 VA.R. 2587-2588	4/10/03
Title 21. Securities and Retail Franchising			
21 VAC 5-10-10	Amended	19:23 VA.R. 3373	7/1/03
21 VAC 5-20-70	Amended	19:23 VA.R. 3373	7/1/03
21 VAC 5-20-85	Amended	19:23 VA.R. 3373	7/1/03
21 VAC 5-20-155	Amended	19:23 VA.R. 3373	7/1/03
21 VAC 5-20-220	Amended	19:23 VA.R. 3373	7/1/03
21 VAC 5-20-225	Added	19:23 VA.R. 3373	7/1/03
21 VAC 5-20-240	Amended	19:23 VA.R. 3373	7/1/03
21 VAC 5-20-250	Repealed	19:23 VA.R. 3375	7/1/03
21 VAC 5-20-260	Amended	19:23 VA.R. 3375	7/1/03
21 VAC 5-20-270	Repealed	19:23 VA.R. 3375	7/1/03
21 VAC 5-20-280	Amended	19:23 VA.R. 3375 19:23 VA.R. 3379	7/1/03
21 VAC 5-30-10	Amended		7/1/03
21 VAC 5-30-40 21 VAC 5-30-70	Amended	19:23 VA.R. 3380	7/1/03 7/1/03
21 VAC 5-30-70 21 VAC 5-30-80	Repealed Amended	19:23 VA.R. 3380 19:23 VA.R. 3380	7/1/03
21 VAC 5-30-80 21 VAC 5-30-90	Repealed	19:23 VA.R. 3380 19:23 VA.R. 3380	7/1/03
21 VAC 5-30-90 21 VAC 5-40-30	Amended	19:23 VA.R. 3380	7/1/03
21 VAC 5-40-30 21 VAC 5-40-100	Amended	19:23 VA.R. 3381	7/1/03
21 VAO 0740-100	Amended	13.23 VA.N. 3301	1/1/03

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21 VAC 5-40-120	Repealed	19:23 VA.R. 3381	7/1/03
21 VAC 5-40-140	Amended	19:23 VA.R. 3381	7/1/03
21 VAC 5-40-150	Amended	19:23 VA.R. 3381	7/1/03
21 VAC 5-40-160	Added	19:23 VA.R. 3381	7/1/03
21 VAC 5-45-10	Added	19:23 VA.R. 3381	7/1/03
21 VAC 5-45-20	Added	19:23 VA.R. 3381	7/1/03
21 VAC 5-80-40	Amended	19:23 VA.R. 3381	7/1/03
21 VAC 5-80-190	Amended	19:23 VA.R. 3382	7/1/03
21 VAC 5-80-200	Amended	19:23 VA.R. 3382	7/1/03
21 VAC 5-80-210	Amended	19:23 VA.R. 3384	7/1/03
21 VAC 5-100-10	Amended	19:23 VA.R. 3384	7/1/03
21 VAC 5-120-50	Erratum	19:22 VA.R. 3233	
21 VAC 5-120-50	Amended	20:1 VA.R. 32	9/2/03
Title 22. Social Services			
22 VAC 30-20-10 through 22 VAC 30-20-40	Amended	19:14 VA.R. 2147-2154	4/24/03
22 VAC 30-20-60	Amended	19:14 VA.R. 2154	4/24/03
22 VAC 30-20-80	Amended	19:14 VA.R. 2154	4/24/03
22 VAC 30-20-90	Amended	19:14 VA.R. 2155	4/24/03
22 VAC 30-20-90	Amended	19:18 VA.R. 2736	6/18/03
22 VAC 30-20-95	Added	19:14 VA.R. 2155	4/24/03
22 VAC 30-20-100 through 22 VAC 30-20-130	Amended	19:14 VA.R. 2155-2164	4/24/03
22 VAC 30-20-150	Amended	19:14 VA.R. 2164	4/24/03
22 VAC 30-20-160	Amended	19:14 VA.R. 2164	4/24/03
22 VAC 30-20-170	Amended	19:14 VA.R. 2165	4/24/03
22 VAC 30-20-181	Amended	19:14 VA.R. 2166	4/24/03
22 VAC 30-20-200	Amended	19:14 VA.R. 2167	4/24/03
22 VAC 40-11-10	Amended	19:24 VA.R. 3581	9/10/03
22 VAC 40-11-30	Amended	19:24 VA.R. 3581	9/10/03
22 VAC 40-11-40	Amended	19:24 VA.R. 3581	9/10/03
22 VAC 40-11-50	Amended	19:24 VA.R. 3581	9/10/03
22 VAC 40-90-10	Amended	19:22 VA.R. 3218	9/19/03
22 VAC 40-220-10	Repealed	19:19 VA.R. 2882	7/2/03
22 VAC 40-220-20	Repealed	19:19 VA.R. 2882	7/2/03
22 VAC 40-293-10 emer	Added	19:19 VA.R. 2883	7/1/03-6/30/04
22 VAC 40-293-20 emer	Added	19:19 VA.R. 2883	7/1/03-6/30/04
22 VAC 40-375-10 through 22 VAC 40-375-60 22 VAC 40-685-10	Added	19:24 VA.R. 3582-3584 19:24 VA.R. 3584	9/10/03
22 VAC 40-685-10 22 VAC 40-685-20	Added Added	19:24 VA.R. 3584	9/1/03 9/1/03
22 VAC 40-665-20 22 VAC 40-685-30	Added	19:24 VA.R. 3584	9/1/03
22 VAC 40-903-30 22 VAC 40-910-10 through 22 VAC 40-910-110	Added	19:24 VA.R. 3584-3585	9/1/03
	Audeu	19.24 VA.N. 3384-3383	9/1/03
Title 24. Transportation and Motor Vehicles	A	40:40 \/A D. 0444	0/04/00
24 VAC 30-280-20	Amended	19:16 VA.R. 2414	3/24/03
24 VAC 30-280-40	Amended	19:16 VA.R. 2415	3/24/03
24 VAC 30-280-50	Amended	19:16 VA.R. 2415	3/24/03
24 VAC 30-280-60	Amended	19:16 VA.R. 2416	3/24/03
24 VAC 30-480	Repealed	19:22 VA.R. 3219	8/13/03

PETITIONS FOR RULEMAKING

TITLE 18. PROFESSIONAL AND OCCUPATIONAL LICENSING

BOARD OF DENTISTRY

Agency Decision

<u>Title of Regulation:</u> 18 VAC 60-20. Regulations Governing the Practice of Dentistry and Dental Hygiene.

Statutory Authority: §§ 54.1-2400 and 54.1-2729 of the Code of Virginia.

Name of Petitioner: Eric Reale of the American Safety and Health Institute.

Nature of Petitioner's Request: To amend 18 VAC 60-20-50 on continuing education to approve the American Safety and Health Institute as a provider of Cardiopulmonary Resuscitation (CPR) to dental personnel, as its program adhere to the same guidelines as those of the American Heart Association and the American Red Cross for its programs.

Agency Decision: Request Granted.

Statement of Reasons for Decision: The board has approved the American Safety and Health Institute as a provider for continuing education. It will also consider the petition as a comment on proposed regulations during the 60-day comment period and may act to add the institute to the listing of approved providers in regulation.

Agency contact: Elaine J. Yeatts, Agency Regulatory Coordinator, Department of Health Professions, 6603 W. Broad Street, 5th Floor, Richmond, VA 23230, telephone (804) 662-9918, FAX (804) 662-9114, or e-mail elaine.yeatts@dhp.state.va.us.

VA.R. Doc. No. R03-235; Filed September 17, 2003, 10:51 a.m.

Agency Decision

<u>Title of Regulation:</u> 18 VAC 60-20. Regulations Governing the Practice of Dentistry and Dental Hygiene.

Statutory Authority: §§ 54.1-2400 and 54.1-2724 of the Code of Virginia.

Name of Petitioner: James W. Jelinek, DDS.

Nature of Petitioner's Request: To amend 18 VAC 60-20-200, which establishes that no more than two dental hygienists may work under the supervision of a licensed dentist at any one time. The petitioner requests that the ratio be changed to three hygienists for each dentist since the current ratio limits his practice and ability to provide hygiene services to his patients.

Agency Decision: Request Denied.

<u>Statement of Reasons for Decision:</u> The board received four written comments on the petition, all of which were opposed to changing the ratio. At this time, the board believes that such a change would exacerbate the problem of too few hygienists in underserved areas of the state. Data is inadequate to

determine the potential effect of a change in the ratio, so the board has agreed to begin collecting workforce data. The board will continue to engage in study and dialogue on the issue.

Agency contact: Elaine J. Yeatts, Agency Regulatory Coordinator, Department of Health Professions, 6603 W. Broad Street, 5th Floor, Richmond, VA 23230, telephone (804) 662-9918, FAX (804) 662-9114, or e-mail elaine.yeatts@dhp.state.va.us.

VA.R. Doc. No. R03-234; Filed September 17, 2003, 10:51 a.m.

BOARD OF FUNERAL DIRECTORS AND EMBALMERS

Agency Decision

<u>Title of Regulation:</u> 18 VAC 65-20. Regulations of the Board of Funeral Directors and Embalmers.

Statutory Authority: §§ 54.1-2400 and 54.1-2810 of the Code of Virginia.

Name of Petitioner: Vanessa Harris.

<u>Nature of Petitioner's Request:</u> To amend regulations to allow a funeral service licensee who is the manager of a funeral establishment to also hold a full-time job elsewhere.

Agency Decision: Request Denied.

Statement of Reasons for Decision: Section 54.1-2810 of the Code of Virginia requires a licensed funeral establishment to have a full-time, licensed manager in charge. In its regulations, the board has interpreted "full time" to mean working 40 hours a week at the funeral establishment. Given the provision in law that a manager must be engaged full time at the establishment, the board determined that the 40-hour per week requirement was reasonable.

Agency contact: Elizabeth Young, Executive Director, Board of Funeral Directors and Embalmers, 6603 West Broad Street, Richmond, VA 23230-1712, telephone (804) 662-9907, FAX (804) 662-9523, or e-mail elizabeth.young@dhp.state.va.us.

VA.R. Doc. No. R03-168; Filed September 17, 2003, 10:50 a.m.

NOTICES OF INTENDED REGULATORY ACTION

Symbol Key

† Indicates entries since last publication of the Virginia Register

TITLE 8. EDUCATION

BOARD OF EDUCATION

Notice of Intended Regulatory Action

Notice is hereby given in accordance with § 2.2-4007 of the Code of Virginia that the Board of Education intends to consider promulgating regulations entitled **8 VAC 20-690**, **Regulations for Scoliosis Screening Program.** The purpose of the proposed action is to promulgate regulations for the implementation of scoliosis screenings for pupils in grades five through 10. The goals of the regulation will address (i) requirements and training for school personnel and volunteers who conduct the screenings, (ii) procedures for the notification of parents when evidence of scoliosis is detected, and (iii) other provisions as the board deems necessary.

The agency intends to hold a public hearing on the proposed action after publication in the Virginia Register.

Statutory Authority: § 22.1-273.1 of the Code of Virginia.

Public comments may be submitted until 5 p.m. on October 22, 2003.

Contact: Dr. Margaret N. Roberts, Office of Policy and Public Affairs, Department of Education, P.O. Box 2120, 101 N. 14th St., 25th Floor, Richmond, VA 23219, telephone (804) 225-2540, FAX (804) 225-2524 or e-mail mroberts@mail.vak12ed.edu.

VA.R. Doc. No. R04-5; Filed August 28, 2003, 12:31 p.m.

STATE COUNCIL OF HIGHER EDUCATION FOR VIRGINIA

Notice of Intended Regulatory Action

Notice is hereby given in accordance with § 2.2-4007 of the Code of Virginia that the State Council of Higher Education for Virginia intends to consider repealing regulations entitled 8 VAC 40-30, Regulations Governing the Approval of Certification of Certain Institutions to Confer Degree, Diplomas and Certificates, and promulgate regulations entitled 8 VAC 40-31, Regulations Governing the Approval of Certification of Certain Institutions to Confer Degree, Diplomas and Certificates. The purpose of the proposed action is to replace existing regulations with a new regulation that will provide institutions of higher education (IHE) with a set of specific and clearly defined criteria to confer degrees and degree credit in the Commonwealth. It will also make the certification process more efficient by eliminating the time and cost-consuming practice of individual program approval.

The agency does not intend to hold a public hearing on the proposed regulation after publication in the Virginia Register.

Statutory Authority: § 23-276.3 of the Code of Virginia.

Public comments may be submitted until 5 p.m. on October 22, 2003.

Contact: Rick Patterson, Coordinator, Private and Out-of-State Institutions, State Council of Higher Education for Virginia, 101 N. 14th St., 9th Floor, Richmond, VA 23219, telephone (804) 225-2609, FAX (804) 786-2027 or e-mail rickpatterson@schev.edu.

VA.R. Doc. No. R04-6; Filed September 3, 2003, 11:51 a.m.

TITLE 11. GAMING

VIRGINIA RACING COMMISSION

Notice of Intended Regulatory Action

Notice is hereby given in accordance with § 2.2-4007 of the Code of Virginia that the Virginia Racing Commission intends to consider amending regulations entitled 11 VAC 10-20, Regulations Pertaining to Horse Racing with Pari-Mutuel Wagering. The purpose of the proposed action is to amend the regulations to replace the emergency regulations pertaining to advanced-deposit account wagering. The proposed action will increase purses and days of the live racing at Colonial Downs, and address the interests of the Virginia Breeders Fund, Virginia horsemen, and unlimited licensee in otherwise unregulated pari-mutuel wagering.

The agency intends to hold a public hearing on the proposed action after publication in the Virginia Register.

Statutory Authority: § 59.1-369 of the Code of Virginia.

Public comments may be submitted until October 10, 2003.

Contact: William H. Anderson, Director of Policy and Planning, Virginia Racing Commission, P.O. Box 208, New Kent, VA 23124, telephone (804) 966-7404, FAX (804) 966-7418 or e-mail Anderson@vrc.state.va.us.

VA.R. Doc. No. R03-320; Filed August 13, 2003, 10:56 a.m.

TITLE 12. HEALTH

STATE BOARD OF HEALTH

Notice of Intended Regulatory Action

Notice is hereby given in accordance with § 2.2-4007 of the Code of Virginia that the State Board of Health intends to consider amending regulations entitled 12 VAC 5-585,

Notices of Intended Regulatory Action

Biosolids Use Regulations. The purpose of the proposed action is to provide standards by which biosolids may be stored, obviating the need for numerous administrative variances.

The agency does not intend to hold a public hearing on the proposed action after publication in the Virginia Register.

Statutory Authority: § 32.1-164 of the Code of Virginia.

Public comments may be submitted until 5 p.m. on October 22, 2003.

Contact: Cal Sawyer, Director, Division of Wastewater Engineering, Department of Health, 1500 E. Main St., Suite 109, Richmond, VA 23219, telephone (804) 371-3500, FAX (804) 786-5566 or e-mail csawyer@vdh.state.va.us.

VA.R. Doc. No. R04-4; Filed August 25, 2003, 10:25 a.m.

DEPARTMENT OF MEDICAL ASSISTANCE SERVICES

Notice of Intended Regulatory Action

Notice is hereby given in accordance with § 2.2-4007 of the Code of Virginia that the Department of Medical Assistance Services intends to consider amending regulations entitled 12 VAC 30-70, Methods and Standards for Establishing Payment Rates - Inpatient Hospital Services. The purpose of the proposed action is to reimburse Type One hospitals (the state teaching hospitals) with supplemental payments for services that these providers render in the DMAS managed care program (MEDALLION II).

The agency does not intend to hold a public hearing on the proposed action after publication in the Virginia Register.

Statutory Authority: §§ 32.1-324 and 32.1-325 of the Code of Virginia.

Public comments may be submitted until October 8, 2003, to Steven E. Ford, Manager, Division of Reimbursement, 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 Street, Suite 1300, Richmond, VA 23219, telephone (804) 786-7959, FAX (804) 786-1680, or e-mail vsimmons@dmas.state.va.us.

VA.R. Doc. No. R03-321; Filed August 13, 2003, 10:37 a.m.

TITLE 13. HOUSING

BOARD OF HOUSING AND COMMUNITY DEVELOPMENT

† Notice of Intended Regulatory Action

Notice is hereby given in accordance with § 2.2-4007 of the Code of Virginia that the Board of Housing and Community

Development intends to consider amending regulations entitled 13 VAC 5-111, Enterprise Zone Program Regulation. The purpose of the proposed action is to address legislative changes made to the Enterprise Zone Program enacted by the 2003 General Assembly and to clarify aspects of the regulations for more effective implementation and ease of use.

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

Statutory Authority: § 59.1-278 of the Code of Virginia.

Public comments may be submitted until November 6, 2003.

Contact: Stephen W. Calhoun, Senior Policy Analyst/Regulatory Coordinator, Department of Housing and Community Development, 501 N. 2nd St., Richmond, VA 23219, telephone (804) 371-7015, FAX (804) 371-7090 or e-mail scalhoun@dhcd.state.va.us.

VA.R. Doc. No. R04-7; Filed September 11, 2003, 3:16 p.m.

TITLE 22. SOCIAL SERVICES

STATE BOARD OF SOCIAL SERVICES

† Notice of Intended Regulatory Action

Notice is hereby given in accordance with § 2.2-4007 of the Code of Virginia that the State Board of Social Services intends to consider amending regulations entitled 22 VAC 40-170, Voluntary Registration of Family Day Homes-Requirements for Contracting Organizations. The purpose of the proposed action is to incorporate statutory changes that have occurred since the regulation became effective in April 1993. Other revisions will be made for clarity to assist affected organizations in understanding the regulatory requirements. Requirements that, through implementation, have been determined to be burdensome will be deleted. Statutory references throughout the regulation will be updated to reflect the recodification of Title 63.2.

The agency does not intend to hold a public hearing on the proposed regulation after publication in the Virginia Register.

Statutory Authority: § 63.2-1704 of the Code of Virginia.

Public comments may be submitted until November 5, 2003.

Contact: Doris Sherrod, Program Development Consultant, Department of Social Services, Division of Licensing Programs, 730 E. Broad St., Richmond, VA 23219, telephone (804) 692-1748, FAX (804) 692-2370 or e-mail dss7@dss.state.va.us.

VA.R. Doc. No. R04-11; Filed September 17, 2003, 9:57 a.m.

† Notice of Intended Regulatory Action

Notice is hereby given in accordance with § 2.2-4007 of the Code of Virginia that the State Board of Social Services intends to consider repealing regulations entitled **22 VAC 40** -

Notices of Intended Regulatory Action

180, Voluntary Registration of Family Day Homes--Requirements for Providers, and adopting regulations entitled 22 VAC 40-181, Voluntary Registration of Family Day Homes--Requirements for Providers. The purpose of the proposed action is to repeal 22 VAC 40-180 and adopt a new regulation (22 VAC 40-181). The number of changes that have occurred since this regulation became effective in April 1993 including, but not limited to, additions to the definition of a family day home, changes in background clearance requirements, and the addition of requirements for proof of a child's age and identity, all of which are statutory changes, makes replacement of the regulation necessary. Many of the requirements of 22 VAC 40-180 will be incorporated into 22 VAC 40-181. The new regulation will be clear and easy to follow, will incorporate all applicable requirements from the Code of Virginia, and will provide reasonable health and safety guidelines for the protection of children cared for in these small homes.

The agency does not intend to hold a public hearing on the proposed regulation after publication in the Virginia Register.

Statutory Authority: § 63.2-1704 of the Code of Virginia.

Public comments may be submitted until November 5, 2003.

Contact: Doris Sherrod, Program Development Consultant, Department of Social Services, Division of Licensing Programs, 730 E. Broad St., Richmond, VA 23219, telephone (804) 692-1748, FAX (804) 692-2370 or e-mail dss7@dss.state.va.us.

VA.R. Doc. No. R04-12 and R04-13; Filed September 17, 2003, 10 a.m.

† Notice of Intended Regulatory Action

Notice is hereby given in accordance with § 2.2-4007 of the Code of Virginia that the State Board of Social Services intends to consider amending regulations entitled 22 VAC 40-325, Fraud Reduction/Elimination Effort. The purpose of the proposed action is to amend the criteria for local departments of social services to receive full reimbursement for program costs, expand the responsibilities of local departments of social services fraud units and enhance the definitions section of the regulation.

The agency does not intend to hold a public hearing on the proposed regulation after publication in the Virginia Register.

Statutory Authority: § 63.2-526 of the Code of Virginia.

Public comments may be submitted until November 5, 2003.

Contact: S. Michelle Lauter, Manager, Fraud Unit, Department of Social Services, 730 E. Broad St., Richmond, VA 23219, telephone (804) 786-9170, FAX (804) 692-2431 or e-mail sml900@dss.state.va.us.

VA.R. Doc. No. R04-14; Filed September 17, 2003, 9:59 a.m.

PROPOSED REGULATIONS

For information concerning Proposed Regulations, see Information Page.

Symbol Key

Roman type indicates existing text of regulations. *Italic type* indicates proposed new text.

Language which has been stricken indicates proposed text for deletion.

TITLE 6. CRIMINAL JUSTICE AND CORRECTIONS

STATE BOARD OF JUVENILE JUSTICE

<u>Title of Regulation:</u> 6 VAC 35-30. Regulations for Approving Juvenile Residential Facilities and for State Reimbursement of Local Juvenile Residential Facility Costs (amending 6 VAC 35-30-10 through 6 VAC 35-30-40, 6 VAC 35-30-60 through 6 VAC 35-30-190; adding 6 VAC 35-30-35, 6 VAC 35-30-200, and 6 VAC 35-30-210; repealing 6 VAC 35-30-50.

Statutory Authority: §§ 16.1-249, 16.1-309.5 and 66-10 of the Code of Virginia.

Public Hearing Date: November 12, 2003 - 9 a.m.

Public comments may be submitted until 5 p.m. on December 5, 2003.

(See Calendar of Events section for additional information)

Agency Contact: Donald R. Carignan, Regulatory Coordinator, Department of Juvenile Justice, P.O. Box 1110, Richmond, VA 23218-1110, telephone (804) 371-0743, FAX (804) 371-0773, or e-mail carigndr@djj.state.va.us.

<u>Basis:</u> The general authority of the Board of Juvenile Justice to promulgate regulations is found in § 66-10 (6) of the Code of Virginia.

The specific legal authority of the board to promulgate regulations governing reimbursement of construction costs for juvenile residential facilities is found in § 16.1-309.5 C of the Code of Virginia.

Additional statutory authority for approval of juvenile residential facilities is provided in § 16.1-249 of the Code of Virginia.

<u>Purpose:</u> This regulation is needed to provide a clear, consistent process for evaluating requests from localities for state reimbursement of local juvenile residential facility construction costs, to establish criteria for assessing needs and for setting priorities for construction projects, and to provide guidelines determining appropriate costs. The regulation also provides the basis for the department's "Guidelines for Minimum Standards in Design and Construction of Juvenile Facilities," which address technical matters of construction and furnishings.

By linking the process for reimbursing construction costs to the process of approving juvenile residential facilities, the regulation treats all juvenile residential facilities equally, whether or not the facility's sponsor initially seeks reimbursement from the Commonwealth.

The goals of the regulation are to protect the public safety by securely confining those who are a threat to the public, to provide a safe and secure environment in which juveniles are protected from other inmates or from their own self destructive behavior, and to ensure that expenditures to be reimbursed by the Commonwealth represent reasonable cost to the taxpayers.

<u>Substance</u>: New 6 VAC 35-30-35 directs the department to publish guidelines governing submission of projects for review, the procedures for evaluating proposals and resolving differences between the sponsor and the department, and the procedure for submitting materials to the board.

Amended 6 VAC 35-30-40 (1) requires the department to publish annually the deadlines for each stage in the reimbursement request process. Incomplete or late submissions will not be submitted to the board or other applicable authority during the current review cycle.

6 VAC 35-30-40 (2) is amended to accommodate the approval of the Secretary of Public Safety on behalf of the Governor.

Amended 6 VAC 35-30-40 (3) clarifies that the next board action is based on the planning study, including architectural and engineering drawings at the 15% complete stage. Provision is made specifically for review by the Secretary of Public Safety.

6 VAC 35-30-60 D is amended to clarify that sponsors may meet the requirements of the needs assessment in phases (and be reimbursed as each phase is completed) only if they request such an arrangement when the planning study is submitted.

6 VAC 35-30-90, 6 VAC 35-30-100, 6 VAC 35-30-130 A, 6 VAC 35-30-130 C and 6 VAC 35-30-140 are amended to provide the regulatory basis for the department's approval of detention homes and group homes under § 16.1-249 A 3 of the Code of Virginia and other places designated by the court under § 16.1-249 A 4 of the Code of Virginia, whether or not the sponsor will seek reimbursement from the Commonwealth for the project.

Issues: The primary advantages to the public of adopting the proposed revisions are (i) the assurance that appropriately qualified personnel are reviewing construction and renovation plans to ensure that facilities meet minimum standards of construction and furnishings, so as to provide an appropriate, safe and secure environment to juvenile residents that is conducive to their treatment and rehabilitation and (ii) the assurance that facility construction and renovation costs are reasonable and necessary. There are no known disadvantages to the public.

The primary advantage to the agency is a consistent framework for reviewing and evaluating construction and renovation proposals, with clear delineation of authority and responsibility. The primary advantage to the Commonwealth is that the regulation provides a framework for controlling

construction and renovation costs that will ultimately be reimbursed from the state budget.

There are no known disadvantages to the general public. There is no significant disadvantage to sponsors of construction and renovation projects, who are accustomed to all kinds of regulatory oversight (e.g., for zoning and building code compliance) quite apart from the requirements of this regulation.

<u>Fiscal impact:</u> Adoption of the proposed revisions to the regulation will not increase or decrease the cost to the state to implement and enforce the regulation. The Department and Board of Juvenile Justice currently review and approve construction and renovation projects, and the proposed changes will not significantly change the costs of the processes already in place.

Adoption of the proposed revisions will not increase or decrease the costs to localities for complying with the regulation. Current processes are modified, but not to the point of affecting the cost.

Localities planning to build or renovate juvenile residential facilities, private providers planning to house juveniles who are served by Virginia's juvenile justice system, and architectural and engineering firms serving as sponsor's representatives will be affected by the proposed changes to the regulation.

There is no way to estimate how many juvenile residential facilities might be built or renovated during the lifetime of the proposed regulation. Historically, construction and renovation projects come in waves, often depending on the availability of funds, changes in a locality's juvenile population, and the condition of any existing facilities.

There may be a fiscal impact on sponsors if the department exercises its authority, given in 6 VAC 35-30-210 B to require an administrative fee. The administrative fee would be determined based on a similar fee that the Bureau of Capital Outlay Management (at the Department of General Services) assesses on the department for the administrative review that BCOM performs of the construction documents.

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 § 2.2-4007 H of the Administrative Process Act and Executive Order Number 21 (02). Section 2.2-4007 H 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 General Assembly allows the State Board of Juvenile Justice in § 66-10 of the Code of Virginia to promulgate regulations as may be necessary to carry out provisions of Title 66 (Youth Services)

and other laws of the Commonwealth administered by the director of the Department of Juvenile Justice. The General Assembly specifically mandates in § 16.1-309.5 of the Code of Virginia that the State Board of Juvenile Justice promulgate regulations that include criteria to serve as guidelines in evaluating requests for reimbursement of construction, enlargement, renovation, purchase, or rental costs for detention homes and other juvenile residential facilities incurred by a county, city, or any combination of the two.

The regulation proposes the following changes: facilities constructed, enlarged, or renovated with the intention of housing juveniles are required to have their preliminary design and construction documents reviewed and approved by the Department of Juvenile Justice (DJJ). Moreover, the city, county, or private entity that is constructing, enlarging, or renovating the facility is required to follow certain procedures during the construction process and upon completion of construction. Under existing policy, only entities seeking state reimbursement of construction costs have to fulfill these requirements. (2) All facilities being constructed, enlarged, or renovated to house juveniles are required to meet certain minimum standards for design and construction. standards are contained in a guidance document developed and maintained by DJJ. The proposed regulation specifies the minimum content requirements for the guidance The existing regulation does not include references to specific construction and design standards that have to be met by juvenile residential facilities. (3) Cities, counties, or private entities seeking state reimbursement will be required to submit a needs assessment and a completed planning study to the State Board of Juvenile Justice and to the Governor or the Governor's designee for approval prior to starting construction. Under existing policy, Governor's approval was not required at the needs assessment or at the planning stage. (4) The process for submitting reimbursement requests has been modified to allow for more flexibility in setting due dates for each stage of the reimbursement (5) The maximum area allowance per bed is process. changed from 900 square feet to 600 square feet. (6) Costs of furnishings and equipment that are included in the total cost of the project for which reimbursement is sought are to be calculated using the funding formula developed by the State Board of Juvenile Justice. Under existing policy, an itemized list of furnishings and equipment is required to be included in the total project costs. (7) The proposed regulation allows DJJ's Office of Capital Outlay Management to levy a fee for the review and approval of juvenile residential facility construction projects.

The proposed regulation requires that DJJ publish guidelines for the submittal, review, and evaluation of projects and for the resolution of any differences between the city, county, or private entity undertaking the construction and DJJ. The proposed regulation sets minimum content requirements for the guidance document. The regulation also requires DJJ to publish guidelines regarding the submission of a project proposal to the State Board of Juvenile Justice (including any issues that could not be resolved between the city, county, or private entity undertaking the construction and DJJ).

The proposed regulation also updates terminology and references, reflects changes in statute and agency

organization, adds clarifying language, and removes unnecessary language from the existing regulation.

Estimated Economic Impact. (1) The proposed regulation requires that a city, county, or private entity that is constructing, enlarging, or renovating a facility that is intended to house juveniles submit preliminary design documents to DJJ for approval. The city, county, or private entity is also required to submit construction documents to be reviewed and approved by DJJ and the fire official of the local authority having jurisdiction. Moreover, the entity undertaking the construction, enlargement, or renovation is required to meet certain notification, reporting, and inspection requirements during the construction process and upon completion of construction. Under existing policy, only localities seeking state reimbursement of project costs have to fulfill these requirements.

The proposed change is likely to impose additional costs on juvenile detention facility construction projects not seeking state reimbursement of project costs. These projects will now be required to comply with requirements of this regulation that were previously applicable only to projects seeking reimbursement. The requirements include having design and construction documents reviewed and approved by DJJ's Office of Capital Outlay Management, reporting and correcting any significant deviations from the approved design and construction plans, submitting monthly progress reports, allowing DJJ representatives access to the construction site for inspection purposes, and conducting a final inspection and obtaining final approval from all the relevant regulatory agencies upon completion of the construction project. However, the proposed change is also likely to produce economic benefits by ensuring at each stage that the facility is being constructed in compliance with DJJ and Code of Virginia requirements. As these facilities would have to be certified upon completion by DJJ before being allowed to house juveniles, oversight at the various stages of construction is likely to ensure that the facility is built according to specifications and prevent costly disagreements once the facility has been built between DJJ and the entity undertaking the construction. DJJ oversight is likely to reduce confusion arising from issues such as planned variations from specifications, and misunderstandings misapplications of these specifications by the entity undertaking the construction project.

The net economic impact will depend on whether the economic costs imposed by the regulation are outweighed by the economic benefits produced by it. There are no studies or data available at this time that would allow us to determine the precise economic impact of the proposed change. However, given the scale of these types of construction projects and the costs of making a mistake, it is not likely that the potential benefits will be outweighed by costs associated with going through the review and approval process. According to DJJ, there are 24 juvenile detention facilities and approximately 50 halfway houses and group homes currently in operation in All 24 existing detention facilities have been constructed with state reimbursement of some part of their Moreover, only one detention facility has undertaken an expansion project in recent years without seeking state reimbursement and that facility chose to have DJJ review and approve their construction plans even though it was not required to do so.

(2) The proposed regulation requires all facilities being constructed, enlarged, or renovated to house juveniles, regardless of whether they seek state reimbursement of project costs or not, to meet certain minimum standards for design and construction. The standards are contained in a guidance document developed and maintained by DJJ and entitled Guidelines for Minimum Standards in Design and Construction of Juvenile Facilities. While DJJ currently reviews and approves all juvenile residential facility design and construction plans for facilities claiming state reimbursement, the specific construction standards and requirements used to evaluate these plans are not publicly available. The proposed change requires DJJ to make these standards and requirements publicly available in a guidance document.

The proposed change is likely to produce some economic By publishing the design and construction requirements used to evaluate juvenile residential facility construction projects, the proposed regulation is likely to standardize the review and approval process and ensure that the standards are applied consistently. Moreover, by making the standards by which design and construction plans are to be reviewed and approved available to the entities undertaking the construction, the proposed change will streamline and make the process of constructing facilities that meet DJJ requirements more efficient. However, if the quidance document includes additional requirements not currently used in the evaluation of juvenile residential facility construction projects, it is likely to impose additional costs on facilities constructed after the effective date of this regulation. The net economic impact of the proposed change will depend on whether the guidance document includes additional construction standards and requirements not currently used in the evaluation of projects and whether the costs imposed by the additional requirements outweigh the economic benefits of the proposed change. The guidance document largely deals with construction standards as they relate to life safety, security, and suicide prevention. According to DJJ, the guidance document simply formalizes industry standards and practices currently used by DJJ in evaluating juvenile residential facility construction projects. Moreover, DJJ believes that, with the exception of one facility, all other juvenile detention facilities currently operating in Virginia meet the construction standards specified in the guidance document. Thus, the agency does not believe that the construction standards specified in the guidance document constitute a significant departure from existing criteria used to evaluate such projects and thus, are not likely to impose significant additional costs.

(3) The proposed regulation requires cities, counties, or private entities seeking state reimbursement to submit a needs assessment and a completed planning study to the State Board of Juvenile Justice and to the Governor (or the Governor's designee) for approval prior to starting construction. Under existing policy, the Governor's approval was not required at the needs assessment or the planning stage and decisions regarding the approval of projects and the amount of state reimbursement was made by DJJ. The

proposed change is required by § 16.1-309.5 the Code of Virginia. The law requires that no reimbursement for costs of construction can be made unless the plans and specifications, including the need for additional personnel, have been submitted and approved by the Governor.

The proposed change is likely to impose additional costs. In addition to DJJ approval, the needs assessment study and planning study for construction projects seeking state reimbursement have to be approved by the Governor or his designee prior to construction. However, the additional level of scrutiny required by the proposed regulation could produce some economic benefits. The additional review requirements will lead to greater scrutiny of such projects and a better chance of ensuring that facilities are built are on the basis of need and that the project costs are reasonable. The net economic impact will depend on whether the additional costs imposed by the proposed change are greater than or less than its potential benefits. There are no studies or data available at this time that would allow us to quantify the costs and benefits associated with the proposed change.

(4) The proposed regulation modifies the process for submitting reimbursement requests to allow for more flexibility in setting due dates for each stage of the reimbursement process. Rather than requiring the various stages of the reimbursement process to be completed by specific dates, the proposed regulation allows DJJ to determine a schedule for these submissions based on the budget review process. Existing policy requires that the entity undertaking construction submit a complete reimbursement request by April 1 of each year and that the Board of Juvenile Justice approve reimbursement requests by June 1 of each year.

The proposed change is likely to have a small net positive economic impact. By allowing flexibility in the submission dates, the proposed change will allow DJJ to incorporate any changes in the budget review process that might require a change in submission deadlines. The increased flexibility is provided at little or no additional cost. Interested parties will still be able to get information regarding the submission deadlines. The proposed regulation requires DJJ to publish an annual schedule detailing the submissions deadlines for entities seeking reimbursement and the dates by which the Board of Juvenile Justice must approve reimbursement requests.

(5) The proposed regulation reduces the maximum area allowance per bed for juvenile residential facilities from 900 square feet to 600 square feet. The maximum area allowance per bed is used to calculate the size of the facility to be constructed and project costs when state reimbursement of part of the costs is sought. Thus, size of juvenile residential facilities and hence the costs of construction for which reimbursement is sought will now be based on providing a maximum area of 600 square feet per bed rather than the existing maximum of 900 square feet.

The proposed change could produce some economic benefits. By reducing the maximum area allowance per bed, it could reduce the size of some juvenile residential facilities and hence the construction costs associated with building these facilities. However, the proposed change could also impose additional costs. By reducing the maximum area allowance

per bed, it could result in overcrowding and impose additional costs in terms of an increased risk to public safety, to the safety of correctional personnel, and to the health and safety juveniles housed in those facilities. DJJ does not believe that reducing the maximum area allowance per bed will increase the risk to public safety, to the safety of correctional personnel, or to the health of safety of the juvenile. According to DJJ, a maximum area allowance of 600 square feet is consistent with standards recommended by the American Correctional Association (an organization consisting of more than 20,000 correctional employees). Moreover, there is no data (in terms of the number of escapes, the number of correctional officers injured or killed, the number of incidents of juveniles injuring or killing themselves while incarcerated etc.) to indicate that facilities providing an area bed allowance less than 900 square feet pose an increased risk to public safety, and to the health and safety of individuals working and living at these facilities. DJJ is not aware of any facilities currently operating with a 900 square feet area allowance per bed and believes the 900 square feet requirements to be an error in the existing regulation.

(6) The proposed regulation requires the costs of furnishings and equipment included in the total cost of the project for which state reimbursement is sought to be calculated using a funding formula developed by the Board of Juvenile Justice. Currently, the funding formula provides for reimbursement of up to one-half of the cost of furnishings and equipment (not to exceed a maximum of \$3,000 per bed). Under the existing regulation, an itemized list of furnishings and equipment built into the facility at the time of construction is required to be included in the total project costs submitted for reimbursement. DJJ usually reimbursed up to one-half the total cost of furnishings and equipment.

The proposed change is not likely to have a significant economic impact. To the extent that it clarifies the process by which the exact amount or proportion furnishings and equipment costs are to be reimbursed, it will produce some economic benefit. It is not likely to impose any significant additional cost as it does not change DJJ's current practice in determining the amount to be reimbursed.

(7) The proposed regulation allows DJJ's Office of Capital Outlay Management to levy a fee for the review and approval of juvenile facility construction projects. The fees are to cover some or all of the administrative costs incurred in the review and approval process. Currently, only projects seeking state reimbursement are required to be reviewed and approved and are done so at the expense of DJJ and hence the taxpayer.

All residential juvenile facilities have to be certified by DJJ before they can be used to house juveniles. If a facility does not meet DJJ requirements, certification can be denied. By having DJJ review and approve construction and design plans, the cities, counties, and/or private entities undertaking construction will be more certain of meeting construction and design specifications and of eventually being certified. The amount of the fee charged will determine whether the benefits of having DJJ review and approve construction and design plans is greater than or less than the fees charged to so. However, the scale and money involved in these types of construction projects tend to be very large and mistakes at the

time of construction could prove to be very expensive and could lead to certification being denied. It is unlikely that any fees that DJJ charges to cover the administrative costs of the review and approval process are going to be larger that the costs associated correcting mistakes made during construction or having certification denied.

Businesses and entities affected. The proposed regulation will affect all juvenile residential facilities constructed, enlarged, or renovated in Virginia. This includes detention facilities, halfway houses, and group homes used to house juveniles. Facilities, regardless of whether they seek state reimbursement of construction costs or not, will be required to have their design and construction plans reviewed and approved by DJJ. A fee may be charged to cover the administrative costs of the review and approval process. All juvenile residential facilities will also be required to meet detailed design and construction standards specified in a guidance document developed and provided by DJJ. The proposed regulation also makes a number of changes to the procedure for obtaining approval of construction projects and for applying for state reimbursement of construction costs.

As the proposed regulation affects future construction, enlargement, and renovation of juvenile residential facilities, it is not possible to provide an estimate of the number of facilities that will be affected by this regulation. There are 24 juvenile detention facilities currently operating in Virginia and one detention facility expected to become operational in fiscal year 2005. In addition there are approximately 50 halfway houses and group homes operating in Virginia. According to DJJ, since fiscal year 2000, there have been 13 major juvenile residential facility construction projects and several smaller construction projects (such as upgrading or enhancing security at existing facilities). Given the current budget environment, DJJ does not expect many major construction projects in the near future.

Localities particularly affected. The proposed regulation will affect all localities in the Commonwealth.

Projected impact on employment. The proposed regulation is not likely to have a significant impact on employment.

Effects on the use and value of private property. The proposed regulation will affect all entities undertaking the construction of juvenile residential facilities. While some of the changes proposed in the regulation might increase costs for individuals and businesses involved in these projects, others are likely to reduce costs. There is not sufficient data available at this time to determine the net impact of the proposed changes on the asset values of these individuals and businesses. However, the overall impact of the changes is not likely to be very significant.

Agency's Response to the Department of Planning and Budget's Economic Impact Analysis: The Department of Juvenile Justice concurs with the findings of the Department of Planning and Budget in its Economic Impact Analysis of proposed changes to the Regulations for State Reimbursement of Local Juvenile Residential Facility Costs, but would make two observations:

1. Although the proposed revisions to the regulation would permit the department to charge a fee to review

construction documents, a final decision has not been made, and will depend in large measure on the comments received during the public comment period.

2. The "guidance document" referenced in the Economic Impact Analysis is itself currently being revised, and will be made available for public comment to ensure that its specifications are consistent with industry best practices.

Summary:

The fundamental change in the proposed amendments is the board's assertion of its right and duty to set construction standards for juvenile residential facilities, whether or not the locality or other sponsor intends to seek reimbursement from the Commonwealth, in keeping with the statutory authority of the board.

The proposed revisions to the regulation will provide an additional, clearly articulated and reasonable basis for the department to approve certain facilities whether or not the locality seeks reimbursement for the project from the Commonwealth.

In addition, the regulation is revised to accommodate statutory changes since the regulation was promulgated. Changes to the regulation provide a process that includes the Governor's approval of the board's endorsement of a reimbursement for construction costs.

CHAPTER 30.

REGULATIONS FOR APPROVING JUVENILE RESIDENTIAL FACILITIES AND FOR STATE REIMBURSEMENT OF LOCAL JUVENILE RESIDENTIAL FACILITY COSTS.

PART I. GENERAL INFORMATION.

6 VAC 35-30-10. Introduction.

The state Board of Youth and Family Services Juvenile Justice is charged by § 16.1-309.5 of the Code of Virginia with the responsibility for approving all requests from localities for financial assistance relative to the development and operation of new programs and services; for purchase of property; and for construction, enlargement, or renovation, purchase or rental of detention homes, group homes or other residential care facilities for children; whether publicly or privately constructed.

The department of Youth and Family Services exercises oversight responsibility in the establishment and maintenance of programs, services and residential care facilities for children, as provided in §§ 16.1-309.9 C and 16.1-322.1 of the Code of Virginia.

The Office of Capital Outlay Management within the department of Youth and Family Services is responsible for architectural and engineering review of residential care facilities which that are constructed, enlarged or renovated, and reimbursed with state funds with the intention of housing juveniles in accordance with § 16.1-249, 16.1-309.3 or § 66-13 of the Code of Virginia.

Section 16.1-309.5 C of the Code of Virginia requires that the Governor approve the plans and specifications of construction

projects governed by this regulation. Approval of projects for which state funding is requested is may be vested by the Governor in the Office of the Secretary of Public Safety or other designee. Such projects are best accomplished as a cooperative venture between a locality and the department-of Youth and Family Services. Using standards promulgated by the board-of Youth and Family Services (BYFS) approved and those published by the American Correctional Association (ACA) standards—and working together as partners from project planning to project implementation, the locality and the department ensure that an optimum number of children are provided high quality services at a minimum cost to the locality and to the Commonwealth.

As a basis for this regulation:

- 1. The Virginia Public Procurement Act applies generally to every public body in the Commonwealth, which § 41-37 2.2-4301 of the Code of Virginia defines to include any legislative, executive or judicial body, agency, office, department, authority, post, commission, committee, institution, board or political subdivision created by law to exercise some sovereign power or to perform some governmental duty. Therefore, the Commonwealth of Virginia Agency Procurement and Surplus Property Manual, current edition, will apply when construction of juvenile facilities is reimbursed by state funds.
- 2. The Agency Procurement and Surplus Property manual incorporates the Commonwealth of Virginia Capital Outlay manual Construction and Professional Services Manual for Agencies for policy and guidelines for guidance in managing Capital Outlay Projects. Generally, construction or renovation of iuvenile facilities would constitute Capital Outlay. The department of Youth and Family Services shall therefore apply the Commonwealth of Virginia Capital Outlay manual Construction and Professional Services for Agencies, current edition, Manual whenever reimbursement with state funds is requested. Special emphasis on Chapters V, VIII, and X shall be considered whenever reimbursement is requested.
- 3. The department of Youth and Family Services does not intend to replace or relieve responsibilities of the architectural and engineering firms and applicable regulatory authorities (i.e., building official, State Fire Marshal, etc.).

For the purposes of this chapter and Consistent with state law and the authority delegated by the Governor, the Department of Juvenile Justice will review local facility construction projects and make reimbursement recommendations to the Secretary and the Governor, the Department of Youth and Family Services (DYFS) or its designee shall be the reviewing authority or the Governor's designee.

PART II. DEFINITIONS AND LEGAL BASIS.

6 VAC 35-30-20. Definitions.

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

"ACA" means American Correctional Association.

"Architectural/Engineering (A/E) services" means an individual or firm that is licensed by the Virginia Department of Commerce to provide professional services appropriate for the specific project, and is hired by the owner to provide those specific services for the project.

"Area allowance per bed" means the gross square footage of the facility divided by the facility's design capacity, not to exceed 600 square feet per bed.

"Board" means the Virginia Board of Youth and Family Services *Juvenile Justice*.

"Board approved standards" means standards approved promulgated by the Board of Youth and Family Services Juvenile Justice. These standards include:

- 1. Chapter 50 of Title 6 (6 VAC 35-50-10 et seq.), Standards for Interdepartmental Regulation of Residential Facilities for Children (22 VAC 42-10); and
- 2. Chapter 100 of Title 6 (6 VAC 35-100-10 et seq.), Standards for Secure Detention; and Standards for Juvenile Residential Facilities (6 VAC 35-140).
- 3. Chapter 40 of Title 6 (6 VAC 35-40-10 et seq.), Standards for Predispositional and Post-Dispositional Group Homes.

"Department or DYFS" means the Department of Youth and Family Services Juvenile Justice.

"Enlargement" or "expansion" means to expand an existing local facility by constructing additional areas.

"Furnishings and equipment" means built-in equipment or fixtures normally included in a structure at the time of construction.

"Local facility" means a juvenile residential facility intended to house primarily juveniles who are before intake on complaints or before the court on petitions alleging that the juvenile is a child in need of services, child in need of supervision, or delinquent, which is owned, maintained, or operated by any political subdivision or combination of political subdivisions of the Commonwealth, or a privately owned or operated juvenile residential facility which has contracted with any political subdivision or combination of political subdivisions of the Commonwealth.

"Locality's representative" means an individual who is licensed by the Virginia Department of Commerce as an architect or engineer.

"Needs assessment" means an evaluation of trends and factors at the local or regional level which may affect current and future local facility needs, and the assessment of local facilities and nonresidential programs available to meet such needs.

"New construction" means to erect a new local facility or replace an outdated existing local facility.

"Operating capacity" means operating capacity as established by the Department of Youth and Family Services, based on "per bed area allowances." 6 VAC 35-30-60 C 2.

"Planning study" means an overall description of a proposed project consisting of new construction, renovation of existing facilities, or both *including projected building and operating costs*.

"Procedures" means the Department of Youth and Family Services Procedures for Receiving State Reimbursement for Local Facility Construction, Enlargement, Renovation, and Operating Funds, and for the Development and Operation of New Programs Juvenile Justice Step-By-Step Procedures for Approval and Reimbursement for Local Facility Construction, Enlargement and Renovation.

"Project" means any proposed or actual new construction, renovation, enlargement or expansion of a juvenile residential facility that is or will be subject to approval by the department or regulation by the board, whether or not the sponsor is seeking reimbursement from the Commonwealth.

"Renovation" means altering or otherwise modifying an existing local facility or piece of stationary equipment for the purpose of modernizing or changing its use or capability including security upgrades. Renovation does not include routine maintenance. Renovation renders the facility, item or area superior to the original.

"Replacement" means constructing a local facility in place of a like local facility or purchasing equipment to replace stationary equipment which cannot be economically renovated or repaired.

"Reviewing authority" means the department, division or agency to which the Governor has delegated authority to act in his behalf in reviewing local facility construction projects for reimbursement approval.

"Routine maintenance" means the normal and usual type of repair or replacement necessary as the result of periodic maintenance inspections or normal wear and tear of a local facility or equipment.

"Sponsor" means a county, city, commission or any combination thereof, or any private entity under contract or arrangement with any county, city, commission or any combination thereof, that is building, renovating, expanding or operating a facility, or proposing to do so.

"Sponsor's representative" means an individual who is licensed by the Virginia Board for Contractors as an architect or engineer.

"Substantive change" means user generated design changes affecting operational and functional performance of the facility.

6 VAC 35-30-30. Legal basis.

A. This chapter has been promulgated by the board to carry out the provisions of §§ 16.1-313 16.1-309.5, 16.1-309.9 and 16.1-322.5 through 16.1-322.7 of the Code of Virginia. This chapter:

- 1. Serves as a guideline in evaluating requests for reimbursement of local facility construction costs;
- 2. Includes criteria to assess need and establish priorities;

- 3. Ensures the fair and equitable distribution of state funds provided for reimbursing local facility construction costs; and
- 4. Provides criteria for private construction of detention or other residential facilities.
- B. The board is authorized to promulgate regulations pursuant to § 66-10 of the Code of Virginia.
- C. This chapter provides a basis for the department's approval, pursuant to § 16.1-249 A 3 and 4 of the Code of Virginia, of facilities in which juveniles may be detained or placed pending a court hearing.

PART III. REIMBURSEMENT REQUEST PROCEDURES.

6 VAC 35-30-35. Procedures for project approval.

The department shall publish guidelines governing the sponsors' submission of projects for review by the department, the department's procedures for evaluating project proposals, the process for resolving differences between the sponsor and the department, and the procedure for submitting the project proposal to the board, along with any issues that could not be resolved between the department and the sponsor.

6 VAC 35-30-40. Reimbursement request.

- A. Requests for reimbursement shall be submitted as follows:
 - 1. Requests for reimbursement shall be approved by the board by June 1 of each year for inclusion in the department's budget request to the Governor and consideration during the next General Assembly session. Annually, the department shall publish a schedule detailing the dates by which sponsors must submit materials required in connection with requests for reimbursement, and the dates by which the board must approve requests in order to meet deadlines required by the applicable authorities. When the department learns of any changes in the budget review process that might require an adjustment in the published deadlines, the department shall promptly notify all interested parties of the new dates by which materials will be due. Incomplete submissions, or submissions not received by the department prior to or on April 1 the published deadlines, will not be submitted to the board for inclusion in the department's budget request or other applicable authority during the current review cycle.
 - 2. The locality first submission by the sponsor shall direct a letter to the department requesting the board to recommend to the Governor reimbursement for construction, enlargement or renovation. The letter shall be accompanied by the information required by subsection B be a needs assessment developed in accordance with department board may approve the needs The procedures. assessment, reject the needs assessment, or suggest additional factors to be considered in a resubmitted needs assessment. If the board approves the needs assessment, the matter shall be referred to the Governor or the Governor's designee for approval as required by current state procedures. With the approval of the board and the Governor or the Governor's designee, the sponsor will be

authorized to proceed to the planning study stage for the project.

- 3. The department shall submit the completed request for reimbursement to the board for review and approval by the second board meeting or within 60 days following submission by the locality The next submission to the board shall be the completed planning study, including architectural and engineering drawings at the 15% complete stage and an estimate of the total cost of the project, the amount of reimbursement requested, and a resolution from the locality or localities requesting reimbursement.
- B. Requests for reimbursement of local facility construction, enlargement or renovation costs shall be accompanied by:
 - 1. A needs assessment as specified in the procedures;
 - A resolution from the locality or localities requesting reimbursement;
 - An estimate of the reimbursement amount being requested;
 - 4. A planning study as specified in the procedures; and
 - 6. 4. Requests for regional facilities shall also include a copy of the agreement between the participating localities including the allocation of financial and operational responsibilities.
 - 5. In reviewing the request, the board will apply the criteria outlined in 6 VAC 35-30-60. If the board approves the planning study, it shall recommend the amount of state reimbursement for the project and refer the matter to the Governor or the Governor's designee for approval.

6 VAC 35-30-50. Preliminary review (Repealed.)

Localities wishing a review of their needs assessment prior to formally submitting a reimbursement request may submit only the needs assessment as specified in 6VAC35-30-40 B. Upon review of the needs assessment, the board will notify the locality or localities as to whether it appears to the board that they are ready to proceed with the formal reimbursement request.

6 VAC 35-30-60. Criteria for board funding recommendation.

- A. Demonstrated need. The board will evaluate the need for the project as demonstrated by the information provided in the Needs Assessment and Planning Study.
- B. Operational cost efficiency. The board shall take into consideration the operational cost efficiency of the interior design of the facility with special concern for the number of staff required, *including requirements for sight and sound supervision*, functional layout, material selection and energy efficiency, with special emphasis on meeting the needs of youth and the mission of the facility. Design of the program facility shall meet the standards of the board and ACA shall take into account the standards published by the American Correctional Association and the Guidelines for Minimum Standards in Design and Construction of Juvenile Facilities.
- C. Construction cost. Construction economy shall be reviewed in relation to the adjusted median cost of local facilities. The

adjusted median cost of local facilities will be calculated by the department as a per bed cost using the following procedure:

- 1. A cost per square foot base figure will be the national median square-foot cost for jails (location factor applied), published in the latest edition of "Means Facilities Cost Data" published by R. S. Means Company, Inc. The "Means Facilities Cost Data" takes into consideration the "location factor" which is the materials and labor cost differential specific to a geographical location;
- 2. The adjusted square-foot costs will be converted to perbed costs using per-bed area allowances based on the average gross square footage of actual and proposed local facilities in Virginia; the area allowances must be in accordance with all applicable codes and standards, and shall take into account the Guidelines for Minimum Standards in Design and Construction of Juvenile Facilities, according to the following formula:

National cost per square foot (Means)

X Location Factor (Means)

- X Area allowance per bed (maximum 900 600 sq. ft. per bed)
- = Adjusted median construction cost of local facility;
- 3. The total project cost will include:
 - a. Construction (subdivision C 2 above);
 - b. Site and utilities (Means);
 - c. Architectural and engineering (Virginia Capital Outlay Manual Construction and Professional Services Manual for Agencies);
 - d. Furnishings and equipment (as itemized);
 - e. d. Project inspection (Virginia Capital Outlay Manual Construction and Professional Services Manual for Agencies);
 - f. e. Contingency (3.0% of the cost of construction and site utilities);
 - g. f. Property purchased specifically for this facility; and
 - h. Other. g. Furnishings and equipment as provided for in the board's "funding formula."
- D. Phased reimbursement of projects. When localities wish a sponsor formally requests, at the time the planning study is submitted, to meet the requirements outlined in the needs assessment receive portions of the total project reimbursement based upon completion of the project in phases, the board may approve reimbursement based on the total estimated cost of the project as if it were to be completed as a single endeavor; however, reimbursement will be in amounts proportional to the phases of construction and payment will be made only as each approved phase is completed and that portion of the building is placed in service.

6 VAC 35-30-70. Funding priorities.

- A. The following criteria, as determined by the needs assessment, shall serve as a guide for determining the level of priority given to requests for reimbursement:
 - 1. New construction or renovation is needed because the existing facility is closed by the court, Board of Youth and Family Services or the local governing authority, or because the Board of Juvenile Justice has prohibited the placement of juveniles in the facility due to its failure to meet state or local operating standards or to adequately satisfy the physical plant considerations as detailed in the Guidelines for Minimum Standards in Design and Construction of Juvenile Facilities:
 - 2. An unsafe physical plant which fails to meet life, health, safety standards, or a court-ordered renovation, expansion, or new construction:
 - 3. Replacement or renovation of bedspace lost due to fire, earthquake or other disaster;
 - 4. An existing local facility is experiencing overcrowding which is expected to continue based on population forecasts:
 - 5. A locality with no existing local facility;
 - 6. An addition to or renovation of support facilities;
 - 7. Phased projects; and
 - 8. Cost overruns.
- B. Regional projects. The board will ordinarily give preference to requests for reimbursement for regionalized local facilities. Regionalized local facilities shall normally serve three or more localities as determined by the needs assessment.

6 VAC 35-30-80. Board recommendations to the Governor.

- A. The department will direct a letter to the locality notifying the governing body notify the sponsor by letter of the board's decision to recommend or not to recommend a project for reimbursement, and the rationale for the decision.
- B. The board shall submit to the Governor, or his designee (i) its recommendations with respect to reimbursement requests and the rationale therefor; and (ii) such information as the Governor may require with respect to a request for approval of reimbursements.
- C. Final appropriations are subject to the Governor's approval and legislative enactment. Sections 16.1-313 16.1-309.5 and 16.1-322.7 of the Code of Virginia authorize the board to establish, within statutory limits, the rate of reimbursement to localities for construction, enlargement or renovation.

PART IV. PROJECT DEVELOPMENT.

6 VAC 35-30-90. Preliminary design.

A. The locality To facilitate the department's approval of detention homes and group homes as required by § 16.1-249 A 3 of the Code of Virginia and other places that may be designated by the court pursuant to § 16.1-249 A 4 of the Code of Virginia for detention or shelter care, the sponsor of

- any such facility shall submit preliminary design documents to the department, as specified in the procedures and the Virginia Capital Outlay manual Construction and Professional Services Manual for Agencies. This requirement shall apply whether or not the locality or combination of localities will seek reimbursement from the Commonwealth for the project. The locality sponsor may also be required to submit preliminary design documents to other regulatory agencies.
- B. Preliminary design documents shall be approved by the Office of Capital Outlay Management and other designated department personnel based on compliance with the Standards for the Interdepartmental Regulation of Residential Facilities for Children (22 VAC 42-10) and in consideration of the Guidelines for Minimum Standards in Design and Construction of Juvenile Facilities.
 - 1. If the department requires changes to the preliminary design documents, all such required changes will be communicated in writing to the locality sponsor.
 - 2. The locality's sponsor's representative, or its A/E, shall respond in writing to the department to all comments in the preliminary design review. Necessary revisions to the project documents may be incorporated in the submission of the construction documents; however, all issues in question between the locality's sponsor's representative, or A/E, and the department shall be resolved before the construction document phase is begun.

6 VAC 35-30-100. Construction documents required whether or not reimbursement is sought.

A. Lecalities Sponsors shall submit construction documents to the department as specified in the department procedures and the Virginia Capital Outlay manual whether or not reimbursement will be sought for the project. The locality sponsor may also be required to submit construction documents to other regulatory agencies. The fire official of the local authority having jurisdiction over the proposed facility shall conduct a review the plans review and approve the construction.

- B. The department will review construction documents for compliance with board standards, and Code requirements, and in consideration of the Guidelines for Minimum Standards in Design and Construction of Juvenile Facilities, and incorporation of all changes required by the department at the preliminary document review stage. This review in no way releases the A/E from his responsibilities and requirements.
 - 1. If the department requires changes to the construction documents, all such required changes will be communicated in writing to the locality sponsor.
 - 2. The locality's sponsor's representative, or its A/E, shall respond in writing to the department to all comments in the construction document review. All issues in question between the architect, the locality sponsor and the department shall be resolved before the project is bid.
- C. Upon satisfactory resolution of all review comments, the department shall approve construction documents and advise the locality sponsor in writing within 10 working days.

6 VAC 35-30-110. Changes during project development when reimbursement is sought.

If, during the project development stage, any substantive change in the scope of the project, any increase in the estimated cost of construction, or any change in the operational staff requirements occurs, the review process will be suspended until the project is resubmitted to the board for further review and possible change in the status of reimbursement recommendation.

PART V. PROJECT CONSTRUCTION.

6 VAC 35-30-120. Bids for projects for which reimbursement is sought.

After bids for construction have been received and opened, and the locality sponsor has determined to proceed with the project, the locality sponsor shall require its A/E to submit to the department a bid tabulation, analysis and recommendation as to the award of the contract. Any comments by the department shall be forwarded to the locality sponsor within 10 working days of receipt and the sponsor shall respond to the comments in writing.

6 VAC 35-30-130. Construction.

- A. During construction of all projects, whether or not reimbursement is sought, the locality sponsor shall require its architect to submit monthly inspection or progress reports to the department. The department must respond in writing within 10 working days after receipt if there are any problems. The department's failure to do so serves as acceptance of the inspection and progress report. If reimbursement is sought for the project, the architect's failure to submit timely monthly inspection or progress reports may jeopardize reimbursement.
- B. If reimbursement is sought for the project, any substantive changes, single change orders of \$10,000 or more, and accumulative change orders exceeding the board-approved project contingency budget during the construction phase shall be submitted in writing to the department for review and approval before they are executed. Only those changes that are approved through this procedure shall be eligible for reimbursement.
- C. For all projects, whether or not reimbursement is sought, a representative of the department may visit the project site during the construction period to observe the work in progress. Any observed deviations from approved documents having the effect of voiding or reducing compliance with board standards or Code requirements, or any reduction in the quality of material or workmanship, shall be reported in writing to the locality sponsor within 10 working days and shall be corrected. Failure to correct reported deviations may result in the denial of reimbursement, if requested.

6 VAC 35-30-140. Final inspection.

A. Upon construction completion of all projects, whether or not reimbursement is sought, the locality's sponsor's representative, or the A/E, shall establish a schedule for final inspection of the project as follows:

- 1. The lecality sponsor shall notify the department and all regulatory agencies which reviewed preliminary design or construction documents of the schedule for final inspection. The fire official of the authority having jurisdiction shall conduct a plan review and approve the construction:
- 2. The locality sponsor shall request personnel or agencies involved in the final inspection to submit comments or recommendations in writing to the locality sponsor and forward copies to the department.
- 3. The locality sponsor shall require its architect to take necessary corrective action on all deficiencies noted in the comments and submit a report of completed actions to the appropriate reviewing agencies and forward a copy of the report to the department.
- B. For all projects, whether or not reimbursement is sought, upon completion of the final inspection and corrective actions as required, the locality sponsor shall provide to the department copies of all regulatory agency letters verifying approval of the completed project. The A/E shall certify to the department the completion of the project.

6 VAC 35-30-150. Record documents.

The locality sponsor shall require its architect to modify original drawings and specifications to reflect the condition of the project as actually constructed and such documents shall be marked "Record." The record documents shall be prepared in accordance with procedures.

PART VI. PRIVATE CONSTRUCTION OF JUVENILE FACILITIES.

6 VAC 35-30-160. Legal basis for private construction of juvenile facilities.

Section 16.1-322.5 of the Code of Virginia provides for the Board of Youth and Family Services Juvenile Justice to authorize a county or city or any combination of counties, cities or towns established pursuant to § 16.1-315 of the Code of Virginia to contract with a private entity for the financing, site selection, acquisition or construction of a local or regional detention home or other secure facility. Localities authorized to contract for private construction of a juvenile detention facility shall receive state reimbursement authorized by § 16.1-313, 16.1-309.5 of the Code of Virginia, in accordance with Parts I through VI of this chapter.

6 VAC 35-30-170. Contract authorization requirements.

Prior to receiving the Board of Youth and Family Services Juvenile Justice authorization to enter into a contract for private construction, localities shall certify and submit documentation demonstrating that all requirements mandated by § 16.1-322.5 of the Code of Virginia have been met by both the locality and the contractor.

6 VAC 35-30-180. Request for final reimbursement of all projects.

A. Upon completion of the project, the locality sponsor shall submit the documentation specified by the procedures to the department.

- B. If the final amount of reimbursement requested is no more than the reimbursement amount initially recommended, including the contingency, the department will authorize reimbursement within 90 days of receiving a complete reimbursement request. The reimbursement request shall be in the form specified by the department.
- C. If the final amount of reimbursement requested is more than the reimbursement amount initially recommended, the sponsor shall justify the cost increase shall be justified by the locality and resubmitted shall submit the adjusted reimbursement request to the board and the Governor, or his designee, for approval.

6 VAC 35-30-190. Compliance.

Failure to comply with these regulations will delay the review process and recommendation for disbursement of funds, and may result in the denial of reimbursement, and may result in failure to obtain board certification or department approval to house juveniles in the facility.

PART VII. DESIGN AND CONSTRUCTION GUIDELINES.

6 VAC 35-30-200. Guidelines for design and construction.

- A. The department is authorized to develop guidelines establishing minimum standards for the design and construction of juvenile residential facilities in the Commonwealth's juvenile justice system, including state, local and private projects. The guidelines shall identify acceptable means for achieving the goals set out in this regulation and shall provide written advance information to all parties involved with the construction or renovation of juvenile justice facilities in the Commonwealth of Virginia. Specifically, the guidelines shall:
 - 1. Identify appropriate construction methods, materials, and design and layout features to ensure a safe, humane and secure environment for staff and juveniles; restrict unauthorized movement of residents; deter unwanted activity; reduce risks of suicide and self-mutilation; provide an environment that facilitates treatment; and protect the public from escapes;
 - 2. Prescribe minimal conditions of confinement and the elements required for the appropriate housing of juveniles, including but not limited to minimal requirements for living areas, food preparation and dining areas, educational areas, indoor and outdoor recreational areas, and provision for the delivery of health care and visitation.
 - 3. Facilitate cost effective construction and renovation that is efficient, durable, economical on a life-cycle cost basis, and easy to maintain, while reducing the inefficient use of space in terms of floor area, building volume, and staffing requirements.
 - 4. Provide flexibility to address differences in management philosophies and differing, acceptable levels of security, and the unique needs or geographical context of the locality that the facility is intended to serve.
- B. To the greatest extent possible, consistent with the encouragement of local initiative and responsibility, the

construction, renovation and expansion of juvenile residential facilities shall be consistent with, or substantially equivalent to, the requirements set out in the guidelines. The department may permit variations from the guidelines when the goals stated in 6 VAC 35-30-200 A can be achieved through an alternative construction feature that is consistent with or substantially equivalent to the requirements set out in the guidelines, or through staffing or programming provisions.

- C. The guidelines shall be applied in such a way as to ensure:
 - 1. Adequate space for all activities involving residents, staff or visitors;
 - 2. Operational, custodial, administrative and support functions to meet the daily demands of juveniles and staff;
 - 3. Opportunities for regular and routine interaction between residents and staff.

6 VAC 35-30-210. Review and approval process.

- A. The department shall publish and follow a process for reviewing and approving construction and renovation of juveniles residential facilities serving Virginia's juvenile justice system. The review and approval process shall be designed to encourage local initiative and responsibility provided minimum requirements are met. The review and approval process shall provide at a minimum for the following:
 - 1. An opportunity for the sponsor to meet with designated department personnel to discuss any technical review comments or other design issues;
 - 2. The opportunity to appeal to the director or the director's designee any issue that cannot be resolved between the sponsor and the designated department personnel;
 - 3. A written response to any appeal within 30 days;

The opportunity to appeal to the board any issue that is not resolved to the sponsor's satisfaction.

B. Consistent with the policies of the Bureau of Capital Outlay Management at the Department of General Services, the department's Office of Capital Outlay Management may require an administrative fee to support the review and approval process.

DOCUMENTS INCORPORATED BY REFERENCE

Procedures for Receiving State Reimbursement for Local Facility Construction, Enlargement, Renovation, and Operating Funds, and for the Development and Operation of New Programs.

VA.R. Doc. No. R03-50; Filed September 15, 2003, 1:42 p.m.

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TITLE 12. HEALTH

DEPARTMENT OF MEDICAL ASSISTANCE SERVICES

<u>Title of Regulation:</u> 12 VAC 30-120. Waiver Services (amending 12 VAC 30-120-140 through 12 VAC 30-120-190; adding 12 VAC 30-120-165, 12 VAC 30-120-195, 12 VAC 30-120-201; repealing 12 VAC 30-120-200).

Statutory Authority: §§ 32.1-324 and 32.1-325 of the Code of Virginia.

Public Hearing Date: N/A

Public comments may be submitted until December 5, 2003.

(See Calendar of Events section for additional information)

Agency Contact: Vivian Horn, Department of Medical Assistance Services, LTC Analyst, Division of Long Term Care, 600 E. Broad Street, Suite 1300, Richmond, VA 23219, telephone (804) 786-0527, FAX (804) 786-1680, or e-mail vhorn@dmas.state.va.us.

<u>Basis:</u> The Department of Medical Assistance Services (DMAS) derives its authority for this waiver program from § 1915 (c) of the Social Security Act, which permits the states to establish and pay for, with approval of the Centers for Medicare and Medicaid Services (the federal funding agency), community-based services that enable eligible individuals to avoid institutionalization.

The addition of consumer-directed services to the HIV/AIDS waiver was mandated by the General Assembly in the 2002 Acts of Assembly, Chapter 899, Item 325 X. This provision directed DMAS to add consumer-directed services to the HIV/AIDS waiver in an emergency regulation action.

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 DMAS the authority to administer and amend the Plan of Medical Assistance in lieu of board action pursuant to the board's requirements.

<u>Purpose:</u> The purpose of this action is to add the coverage of consumer-directed personal assistance services and consumer-directed respite care services (12 VAC 30-120-165) to the HIV/AIDS waiver program (12 VAC 30-120-140 through 12 VAC 30-120-200). The addition of consumer-directed personal assistance and consumer-directed respite care allows individuals to have more options regarding their care. The two new consumer-directed services will be two of the seven services offered under the HIV/AIDS waiver. The other five existing services include case management, agency-directed personal care, agency-directed respite care, private duty nursing, and nutritional supplements.

This proposal recommends changes to DMAS' permanent regulations, to supersede the existing emergency regulations. This regulatory action is expected to help protect the health, safety, and welfare of participants in this waiver. These

regulations will provide services that enable recipients to live successfully in their homes and communities.

<u>Substance:</u> With the implementation of this regulatory change, two new services (consumer-directed personal assistance and consumer-directed respite care) will be added to the HIV/AIDS waiver. This new regulation outlines the requirements for consumer-directed services as well as the requirements that the personal/respite care assistant must follow in order to receive reimbursement from the Department of Medical Assistance Services (DMAS).

In the summer of 2002, DMAS convened a workgroup to assist with the development of the waiver renewal application to CMS, HIV/AIDS waiver manual and regulations. The workgroup is comprised of DMAS staff, other state agencies, provider agencies, and two consumers. In order to make the changes to the waiver program that the workgroup and DMAS agreed upon and to permanently add the two new services to the waiver, new permanent regulations are required. Without these regulations, DMAS lacks the regulatory authority to require the provider to adhere to the agreed upon changes.

If consumers who require personal care and respite care services utilize consumer-directed personal assistance and consumer-directed respite care instead of agency-directed personal care and respite care services, more aides employed by agencies will be available to provide direct services to consumers who require or prefer agency-directed personal care and respite care services. The effect of this will be to delay or prevent institutionalization of those consumers who require agency-directed personal care and/or respite care services.

For a variety of reasons, it has become difficult for personal/respite care agencies to provide these needed services to waiver recipients. As a result, many recipients who need personal and respite care services are not receiving them at all, putting their personal welfare at risk, and leaving such recipients at increased risk of institutionalization.

Consumer-directed services are services for which the recipient or family/caregiver agrees to be responsible for hiring, training, supervising, and firing the personal assistant. These consumer-directed services are being added to this existing waiver program at the specific requests of recipients and family/caregivers. Recipients or family/caregivers who prefer to remain with the existing service model of agency-directed care will continue to have this as an available service option. No recipients or family/caregivers will be forced to use consumer-directed services.

A consumer-directed services facilitator is a DMAS-enrolled provider who is responsible for supporting the recipient and family/caregiver by ensuring the development and monitoring of the consumer-directed plan of care, providing employee management training, and completing ongoing review activities as required by DMAS for consumer-directed personal assistance services and respite care services.

This regulatory change will also affect the agency-directed personal care services. It changes the requirement of supervisory visits from every 30 days in general to every 90 days for noncognitively impaired recipients, which will allow recipients more freedom and privacy in their homes. This

change would not affect those recipients with a cognitive impairment as the requirement for the supervisory visit remains at every 30 days. DMAS also included a safeguard in these regulations that states that if a recipient's personal care aide is supervised by the provider's registered nurse less often than every 30 days and DMAS determines that the recipient's health, safety or welfare is in jeopardy, DMAS or the designated preauthorization contractor may require the provider's registered nurse to supervise the personal care aide every 30 days or more frequently, as indicated by the recipient's condition.

Adding facility-based respite care to this waiver, changing the definition of family members, and adding that recipients may work or attend post-secondary school while receiving services under this waiver are consistent with federal approval. Adding that DMAS must perform waiver desk reviews is also consistent with federal approval. The addition of information concerning criminal records checks is consistent with § 32.1-162.9:1 of the Code of Virginia.

The primary advantage for the Commonwealth's citizens regarding the addition of consumer-directed personal assistance and consumer-directed respite care is that it could greatly improve consumers' autonomy and ability to remain in the community without relying on a personal care agency to schedule aides' services. Also, most aides employed by personal care agencies are employed during the day. Some consumers who live on their own require assistance at other times than just during the day. Some consumers will be able to remain with their families instead of being institutionalized. To the extent of their abilities, consumers will be able to function in their communities, attend school and continue employment. Another advantage is that since recipients who utilize agency-directed personal care services for their needs can utilize consumer-directed personal assistance or consumer-directed respite care, the agency-directed personal care aides would be more available to provide the direct personal care and respite care services to recipients who prefer or require this mode of service delivery in order to avoid institutionalization.

All of the changes proposed in these regulations are intended to protect the recipient from abuse, to prevent the recipient from receiving services from unqualified staff, and to promote the recipient's independence in the community.

There are no disadvantages to the public or the Commonwealth with these regulation changes.

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 § 2.2-4007 H of the Administrative Process Act and Executive Order Number 21 (02). Section 2.2-4007 H 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 regulations will make available to the HIV/AIDS waiver recipients consumer-directed personal and respite care services in addition to the agency-directed services that are currently provided. Other proposed changes include conducting desk reviews for waiver eligibility, allowing agency-directed respite care to be provided in nursing homes or in long-term care facilities, reducing the frequency of registered nurse supervisory visits of the personal care aides, requiring that personal care aides be able to communicate effectively in English, and incorporating statutory background check (criminal record checks) requirements into the regulations.

These regulations apply to Estimated economic impact. services provided under the Medicaid HIV/AIDS waiver. Approximately 400 people receive case management, personal care, respite care, private duty nursing services and enteral nutrition products from this program. The most important proposed change is the provision of optional consumer-directed personal assistance and respite care services to the waiver recipients in addition to the services directed by a provider agency. With the proposed changes, recipients (without a cognitive impairment) and a family member/caregiver (if a recipient has a cognitive impairment) will be able to hire personal assistants (except spouses and parents), will maintain time sheets for the personal assistants to be paid by the Department of Medical Assistance Services (the department), and will receive regular visits from a service facilitator for training and monitoring the plan of care. Since recipients will use optional consumer-directed services in lieu of agency-directed services only if it provides net benefits, a positive effect on recipients is expected.

In the traditional agency-directed service delivery model, the provider makes the key service decisions. Usually, the providers are regulated, licensed, and have contractual agreements with the public financing programs. They also have the responsibility for and authority over their employees. In contrast, in the consumer-directed service delivery model, recipients have considerable choice and control over how services are provided and by whom, including hiring assistants, defining the duties, and deciding when and how specific tasks or services are performed. This model assumes that most supportive services are nonmedical, low technology services that do not require extensive training or external monitoring.

Proponents of the consumer-directed model anticipate better outcomes because of expanded consumer choice and control in service delivery while the proponents of agency-directed model argue that professional supervision is necessary for quality assurance. The comparison of the two service delivery models with respect to client and worker outcomes have been the subject of extensive research. Most of the available evidence from aged and disabled populations suggest that

¹ Doty, et al., 1999, "In-home Supportive Services for the Elderly and Disabled: A comparison of Client-directed and Professional Management Models of Service Delivery, U.S. Department of Health and Human Services.

consumer-directed services produce at least as good outcomes on several key measures of client satisfaction, empowerment, and quality of life as those from the agency-directed service delivery, if not better. Although these studies do not indicate whether the consumer-directed services are provided on an optional or mandatory basis, making these services available on an optional basis, as proposed, is a significant assurance for positive outcomes.

Another question is whether the consumer-directed model of service delivery will improve access of recipients to personal assistance and respite care services. It is almost certain that the availability of consumer-directed services will improve access. First, the recipients will have access to resources the agency providers may not have. Recipients will be allowed to hire relatives and friends they know who may not be willing to work for an agency provider. There is ample evidence indicating that most recipients tend to hire relatives or friends.³ Second, recipients will have an additional option to arrange for a more flexible work schedule or for a backup care with relatives, friends, or neighbors if a provider cannot meet their special needs. Third, recipients will be able to find more assistants who are not afraid of providing services to an individual with HIV/AIDS in addition to those available from an agency provider. Given the significant shortage of front line workers, 4 the proposed changes will provide greater access to these services.

The most uncertain effect of the provision of these services is on fiscal costs. There is some support suggesting that consumer-directed care may be less expensive than the agency-directed care, perhaps, because of the elimination of providers' administrative overhead costs and/or employee benefits. Under this program, reimbursement for consumer-directed services is about 30% - 38% lower than the

reimbursement for agency-directed services. This suggests a reduction in the program costs for the same amount of services provided. On the other hand, if the proposed changes increase utilization of these services or public payment provides incentives to currently unpaid caregiving relatives to request payment, an increase in expenditures under this program would result. In short, the net fiscal effect of this change is not known at this time.

Pursuant to a requirement by the Centers for Medicare and Medicaid, the department also proposes to conduct desk reviews for waiver eligibility. While this requirement will likely consume some staff time, the department does not plan to hire additional staff, but plans to absorb the required staff time with the currently available resources. It is likely that this function will help the department to reduce potential abuse.

Another proposed change will allow provision of agencydirected respite care in nursing homes or in long-term care facilities. This could potentially cause an increase in the hours of respite care provided under this waiver, but it is anticipated that only a few recipients will receive this service in a facility since a lot of nursing homes do not set aside beds for this purpose.

The other significant proposed changes include reducing the required frequency of visits by a supervisor from 30 days to up to 90 days for recipients who do not have a cognitive impairment and requiring that aides be able to communicate effectively in English. Although in the opposite directions, both of these changes could affect the compliance costs and welfare of clients, but the significance of these potential effects are not known.

Finally, pursuant to the Code of Virginia, the department proposes to incorporate in the regulations the statutory requirement for criminal background checks for all compensated employees of personal care and respite care The main purpose of the background check requirement for these employees is to reduce potential risk of harm and exploitation to recipients. The rationale is that persons with certain criminal convictions are more likely to harm clients than other persons without such backgrounds, and background checks would probably increase protection of the recipients. Although the objective of background checks is clear, there is no available study assessing potential risks. Thus, the significance and types of risks that may be present, as well as the success of background checks in reducing potential risks, are not well known. Other likely economic effects of this change are possible termination of some of the employees and a higher turnover rate, and an increase in provider costs because of the background check costs. However, since this change is a mere incorporation of the statutory requirements that have been already enforced in practice, no significant economic effect is expected upon promulgation.

Businesses and entities affected. The proposed regulations apply to Medicaid HIV/AIDS waiver that serves approximately 400 recipients.

Caldwell and Teller, 2003, "Management of Respite and Personal Assistance Services in a Consumer-directed Family Support Programme," Journal of Intellectual Disability Research, vol. 47, pp. 352-366.

Doty, et al., 1996, "Consumer-directed Models of Personal Care: Lessons from Medicaid," The Milbank Quarterly, vol. 74:3, pp. 377-

Beatty, et al., 1998, "Personal Assistance for People with Physical Disabilities: Consumer-direction and Satisfaction with Services," Archives of Physical Medicine and Rehabilitation, vol. 79, pp. 674-677.

Prince, et al., 1995, "Self-managed Versus Agency-provided Personal Assistance Care for Individuals with High Level Tetraplegia," Archives of Physical Medicine and Rehabilitation, vol. 76, pp. 919-923.

Benjamin, et al., 2000, "Comparing Consumer-directed and Agency Models for Providing Supportive Services at Home," Health Services Research, vol. 35:1, pp. 351-366.

³ (Caldwell, 2003), (Doty, 1996)

² Tilly and Wiener, 2001, "Consumer-directed Home and Community Services: Policy Issues," Occasional Paper No. 44, Urban Institute. Foster, et al., 2003, "Does Consumer Direction Affect Quality of Medicaid Personal Assistance in Arkansas?" Mathematica Policy Research, Inc.

⁴ Source: The Department of Medical Assistance Services and Benjamin, 2001, "Consumer Directed Services at Home: A new Model for Persons with Disabilities," Health Affairs, vol. 20:6, pp. 80-95. ⁵ (Prince, 1995), (Benjamin, 2000), (Benjamin, 2001), (Tilly and Wiener, 2001)

⁶ § 37.1-183.3 of the Code of Virginia.

Localities particularly affected. The proposed regulations are not expected affect any locality more than others.

Projected impact on employment. The proposed addition of consumer-directed personal and respite care services is anticipated to expand the available pool of assistants for the recipients. It is found that recipients using this option tend to hire relatives and friends. There is also increased probability that public payment may cause some previously unpaid assistants to request compensation. Thus, it seems that the proposed changes would increase the demand for labor.

Effects on the use and value of private property. Unless the proposed changes significantly decrease the demand for agency-directed services and affect their businesses, no significant effect on the use and value of property is anticipated.

Agency's Response to the Department of Planning and Budget's Economic Impact Analysis: The Department of Medical Assistance Services has reviewed the economic impact analysis prepared by the Virginia Department of Planning and Budget and is in agreement with the overall conclusions of the report.

The department believes that one statement in the economic impact analysis is incorrect. The statement that "recipients will use optional consumer-directed services in lieu of agency-directed services..." is incorrect. A recipient may receive both consumer-directed and agency-directed services if the total amount of services is included in the approved plan of care and there is no duplication of services.

Summary:

The proposed amendments add coverage of consumer-directed personal assistance services and consumer-directed respite care services to the HIV/AIDS waiver program. The two new consumer-directed services will be two of the seven services offered under the HIV/AIDS waiver. The other five previously existing services are case management, agency-directed personal care, agency-directed respite care, private duty nursing, and nutritional supplements.

The other changes made to these proposed regulations include (i) adding language regarding waiver eligibility desk reviews, which the Centers for Medicare and Medicaid Services mandated that DMAS perform; (ii) requiring criminal records checks for all compensated employees of personal care and respite care agencies; (iii) adding language that states that personal care recipients may continue to work or attend post-secondary school, or both, while receiving services under this waiver; (iv) changing the requirement of supervisory visits from every 30 days to every 30 days for recipients with a cognitive impairment and up to every 90 days for recipients who do not have a cognitive impairment; (v) requiring that the personal care aide be able to communicate effectively in English; (vi) adding the requirements of the qualifications for licensed practical nurses providing respite care; and (vii) making editorial clarifications and corrections to the existing language.

12 VAC 30-120-140. Definitions.

"Activities of daily living" means assistance with personal care tasks (i.e., bathing, dressing, toileting, etc.).

"Acquired Immune Deficiency Syndrome" or "AIDS" means the most severe manifestation of infection with the Human Immunodeficiency Virus (HIV). The Centers for Disease Control and Prevention (CDC) lists numerous opportunistic infections and cancers that, in the presence of HIV infection, constitute an AIDS diagnosis.

"Acquired immunodeficiency syndrome (AIDS)" means the set of symptoms related to specific opportunistic diseases indicative of an immune deficiency state in the absence of any other cause of reduced resistance reported to be associated with at least one of those opportunistic diseases. Individuals diagnosed with AIDS may experience symptoms associated with severe dementia, HIV encephalopathy, HIV wasting syndrome and rare forms of pneumonia (pneumocystic carinii (PCP)) and cancer (Kaposi's Sarcoma (KS)).

"AIDS-Related Complex (ARC)" means the lesser disease response to the HIV infection which may, nonetheless, have many of the devastating effects of the AIDS virus, but not the specific conditions used to define a case of AIDS. This term shall be applied to those individuals with HIV infection experiencing symptoms related to the infection.

"Aids Service Organizations (ASOs)" means the regional and local service organizations developed to provide education, prevention and health and social services to individuals infected with the HIV virus.

"Activities of daily living" or "ADL" means personal care tasks, e.g., bathing, dressing, toileting, transferring, and eating/feeding. An individual's degree of independence in performing these activities is part of determining appropriate level of care and service needs.

"Agency-directed services" means services for which the provider agency is responsible for hiring, training, supervising, and firing of the staff.

"Appeal" means the process used to challenge DMAS when it takes action or proposes to take action that will adversely affect, reduce, or terminate the receipt of benefits.

"Asymptomatic" means without symptoms. This term is usually used in the HIV/AIDS literature to describe an individual who has a positive reaction to one of several tests for HIV antibodies but who shows no clinical symptoms of the disease.

"Case management" means continuous reevaluation of need, monitoring of service delivery, revisions to the plan of care and coordination of services for AIDS individuals receiving home and community-based services in order to assure effective and efficient delivery of direct services enrolled in the HIV/AIDS waiver.

"Case manager" means the person who provides services to individuals who are enrolled in the waiver that enable the continuous assessment, coordination, and monitoring of the needs of the individuals who are enrolled in the waiver. The case manager must possess a combination of work

experience and relevant education that indicates that the case manager possesses the knowledge, skills, and abilities at entry level, as established by the Department of Medical Assistance Services in 12 VAC 30-120-170 to conduct case management.

"Cognitive impairment" means a severe deficit in mental capability that affects areas such as thought processes, problem solving, judgment, memory, or comprehension and that interferes with such things as reality orientation, ability to care for self, ability to recognize danger to self or others, or impulse control.

"Consumer-directed services" means services for which the individual or family/caregiver is responsible for hiring, training, supervising, and firing of the staff.

"Consumer-directed (CD) services facilitator" means the DMAS-enrolled provider who is responsible for supporting the individual and family/caregiver by ensuring the development and monitoring of the consumer-directed plan of care, providing employee management training, and completing ongoing review activities as required by DMAS for consumer-directed personal assistance and respite care services. The CD services facilitator cannot be the individual, the individual's case manager, direct service provider, spouse, or parent of the individual who is a minor child, or a family/caregiver who is responsible for employing the assistant.

"Current functional status" means the individual's degree of dependency in performing activities of daily living.

"DMAS" means the Department of Medical Assistance Services.

"DMAS-96 form" means the Medicaid Funded Long-Term Care Service Authorization Form, which is a part of the preadmission screening packet and must be completed by a Level One screener on a Preadmission Screening Team. It designates the type of service the individual is eligible to receive.

"DMAS-122 form" means the Patient Information Form used by the provider and the local DSS to exchange information regarding the responsibility of a Medicaid-eligible individual to make payment toward the cost of services or other information that may affect the eligibility status of an individual.

"DSS" means the Department of Social Services.

"Designated preauthorization contractor" means the entity that has been contracted by DMAS to perform preauthorization of services.

"Enteral nutrition products" means enteral nutrition listed in the durable medical equipment manual that is prescribed by a physician to be necessary as the primary source of nutrition for the individual's health care plan (due to the prevalence of conditions of wasting, malnutrition, and dehydration) and not available through any other food program.

"Episodic respite care" means in home services specifically designed to provide relief to the caregiver for a nonroutine, short-term period of time for a specified reason (e.g., respite care offered for 7 days, 24 hours a day while the caregiver takes a vacation).

"Fiscal agent" means an agency or organization that may be contracted by DMAS to handle employment, payroll, and tax responsibilities on behalf of the individual who is receiving consumer-directed personal assistance services and consumer-directed respite services.

"HIV-symptomatic" means having the diagnosis of HIV and having symptoms related to the HIV infection.

"Home and community-based care" means a variety of inhome and community-based services reimbursed by DMAS (case management, personal care, skilled private duty nursing, respite care consumer-directed personal assistance, consumer-directed respite care, and nutritional supplements enteral nutrition products) authorized under a Social Security Act § 1915 (c) AIDS Waiver designed to offer individuals an alternative to inpatient hospital or nursing facility care placement. Individuals may be preauthorized to receive one or more of these services either solely or in combination, based on the documented need for the service(s) service or services to avoid inpatient hospital or nursing facility placement. An individual may only receive home and community-based services up to the amount which would be equal to or less than the cost of hospital care. The preadmission screening team or DMAS, or the designated preauthorization contractor, shall give prior authorization for any Medicaid-reimbursed home and community-based care.

"Human Immunodeficiency Virus (HIV)" means the virus which leads to acquired immune deficiency syndrome (AIDS). The virus weakens the body's immune system and, in doing so, allows "opportunistic" infections and diseases to attack the body.

"Instrumental activities of daily living" or "IADL" means tasks such as meal preparation, shopping, housekeeping, laundry, and money management.

"Nutritional supplements" means nonlegend drug nutritional supplements covered under this waiver which are deemed by a physician to be necessary as the primary source of nutrition for the AIDS/ARC individual's health care plan (due to the prevalence of conditions of wasting, malnutrition and dehydration) and not available through any other food program.

"Preadmission screening" means the process to: (i) evaluate the medical, nursing, and social needs of individuals referred for prescreening; (ii) analyze what specific services the individuals need; (iii) evaluate whether a service or a combination of existing community services are available to meet the individuals' needs, and (iv) authorize Medicaid funded community-based care for those individuals who meet hospital or nursing facility level of care and require such care.

"Preadmission screening team" means the multidisciplinary team contracted with DMAS to perform preadmission screening. DMAS will contract with regional and local AIDS Service Organizations (ASO) to perform the prescreening assessment, level of care determination and Plan of Care development for Medicaid-eligible individuals with AIDS/ARC. Preadmission screening teams for individuals with AIDS/ARC may also be the nursing home preadmission screening teams contracted with DMAS to perform preadmission screening for Medicaid-eligible individuals at risk of placement in a nursing

facility. At a minimum, the preadmission screening team must be comprised of the recipient, nursing and social work staff and a physician.

"Program" means medical assistance services as administered by the Department of Medical Assistance Services-

"Participating provider" means an *individual*, institution, facility, agency, partnership, corporation, or association that has a valid contract with DMAS and meets the standards and requirements set forth by DMAS and has a current, signed provider participation agreement with DMAS to provide Medicaid waiver services.

"Personal assistant" means a domestic servant for purposes of this part and exemption from Worker's Compensation.

"Personal care services" or "PAS" means long-term maintenance or support services necessary to enable the an individual to remain at or return home rather than enter a an inpatient hospital or a nursing facility. Personal care services include assistance with personal hygiene, nutritional support, and the environmental maintenance necessary for recipients to remain in their homes. Personal assistance services include care specific to the needs of a medically stable. physically disabled individual. Personal assistance services include, but are not limited to, assistance with ADLs. bowel/bladder programs, range of motion exercises, routine wound care that does not include sterile technique, and external catheter care. Supportive services are those that substitute for the absence, loss, diminution, or impairment of a physical function. When specified, supportive services may include assistance with IADLs that are incidental to the care furnished or that are essential to the health and welfare of the individual. Personal assistance services shall not include either practical or professional nursing services as defined in Chapters 30 and 34 of Title 54.1 of the Code of Virginia, as appropriate.

"Personal care agency" means a participating provider that renders services designed to offer an alternative to institutionalization by providing eligible individuals with personal care aides who provide personal care services.

"Personal care services" means long-term maintenance or support services necessary to enable the individual to remain at or return home rather than enter an inpatient hospital or a nursing facility. Personal care services are provided to individuals in the areas of activities of daily living, instrumental activities of daily living, access to the community, monitoring of self-administered medications or other medical needs, and the monitoring of health status and physical condition. It shall be provided in home and community settings to enable an individual to maintain the health status and functional skills necessary to live in the community or participate in community activities.

"Plan of care" means the written plan of services certified by the screening team physician as needed developed by the provider related solely to the specific services required by the individual to ensure optimal health and safety for the delivery of home and community-based care.

"Preadmission Screening Authorization Form" means a part of the preadmission screening packet that must be filled out by a Level One screener on a preadmission screening team. It gives preadmission authorization to the provider and the individual for Medicaid services, and designates the type of service the individual is authorized to receive.

"Preadmission screening committee/team" or "PAS committee" or "PAS team" means the entity contracted with DMAS that is responsible for performing preadmission screening. For individuals in the community, this entity is a committee comprised of a nurse from the local health department and a social worker from the local department of social services. For individuals in an acute care facility who require preadmission screening, this entity is a team of nursing and social work staff. A physician must be a member of both the local committee and the acute care team.

"Preadmission screening" or "PAS" means the process to (i) evaluate the functional, nursing, and social needs of individuals referred for preadmission screening; (ii) analyze what specific services the individuals need; (iii) evaluate whether a service or a combination of existing community services are available to meet the individuals' needs; and (iv) develop the service plan.

"Private duty nursing" means individual and continuous nursing care provided by a registered nurse or a licensed practical nurse under the supervision of a registered nurse.

"Program" means the Virginia Medicaid program as administered by the Department of Medical Assistance Services.

"Reconsideration" means the supervisory review of information submitted to DMAS or the designated preauthorization contractor in the event of a disagreement of an initial decision that is related to a denial in the reimbursement of services already rendered by a provider.

"Respite care" means in-home services specifically designed to provide a temporary, periodic relief to the primary caregiver of an individual who is incapacitated or dependent due to AIDS or ARC. Respite care services include assistance with personal hygiene, nutritional support and environmental maintenance authorized as either episodic, temporary relief or as a routine periodic relief of the caregiver.

"Respite care agency" means a participating provider that renders services designed to prevent or reduce inappropriate institutional care by providing eligible individuals with respite care aides who provide respite care services.

"Routine respite care" means in-home services specifically designed to provide relief from continuous care to the caregiver on a periodic basis over an extended period of time (i.e., respite care offered regularly one day a week for six hours).

"Service plan" means the written plan of services certified by the PAS team physician as needed by the individual to ensure optimal health and safety for the delivery of home and community-based care.

"Skilled nursing" means professional nursing care provided by a registered nurse or licensed practical nurse in the

individual's home or other community setting and necessary to avoid institutionalization of the individual with AIDS by assessment and monitoring of the medical condition, providing interventions, and communicating with the physician regarding changes in the patient's status.

"State Plan for Medical Assistance" or "the Plan" or "the State Plan" means the document containing the covered groups, covered services and their limitations, and provider reimbursement methodologies as provided for under Title XIX of the Social Security Act.

"Uniform Assessment Instrument" or "UAI" means the standardized multidimensional questionnaire that assesses an individual's social, physical health, mental health, and functional abilities.

12 VAC 30-120-150. General coverage and requirements for home and community-based care services for individuals with AIDS.

A. Coverage statement.

- 1. Coverage shall be provided under the administration of the Department of Medical Assistance Services DMAS for individuals with HIV infection, who have been diagnosed and are experiencing the symptoms associated with AIDS or ARC, who would otherwise require the level of care provided in a an inpatient hospital or nursing facility.
- 2. These services shall be medically appropriate, $\frac{1}{1}$ east-effective and necessary to maintain these individuals in the community.

B. Patient eligibility requirements.

1. DMAS will apply the financial eligibility criteria contained in the State Plan for the categorically needy and the medically needy. Virginia has elected to cover the optional categorically needy group under 42 CFR 435.211, 435.231 and 435.217. The income level used for 435.211, 435.231 and 435.217 is 300% of the current Supplemental Security Income payment standard for one person.

Under this waiver, the coverage groups authorized under § 1902(a)(10)(A)(ii)(VI) of the Social Security Act will be considered as if they were institutionalized for the purpose of applying institutional deeming rules. The medically needy individuals participating in the waiver will also be considered as if they were institutionalized for the purpose of applying the institutional deeming rules.

2. Virginia will reduce its payment for home and community-based services provided to an individual who is eligible for Medicaid services under 42 CFR 435.217 by that amount of the individual's total income (including amounts disregarded in determining eligibility) that remains after allowable deductions for personal maintenance needs, deductions for other dependents and medical needs have been made, according to the guidelines in 42 CFR 435.735 and § 1915(c)(3) of the Social Security Act as amended by the Consolidated Omnibus Budget Reconciliation Act of 1986. DMAS will reduce its payment for home and community-based services provided to an individual eligible for home and community-based waiver services by the

amount that remains after deducting the following amounts in the following order from the individual's income:

- a. For individuals to whom § 1924(d) applies:
 - (1) An amount for the maintenance needs of the individual which that is equal to 300% of the categorically needy income standard for a noninstitutionalized individual.
 - (2) For an individual with only a spouse living at home, the community spousal income allowance determined in accordance with § 1924(d) of the Social Security Act, the same as that applied for the institutionalized patient.
 - (3) For an individual with a family at home, an additional amount for the maintenance needs of the family determined in accordance with § 1924(d) of the Social Security Act, the same as that applied for the institutionalized patient.
 - (4) Amounts for incurred expenses for medical or remedial care that are not subject to payment by a third party including:
 - (a) Medicare and other health insurance premiums, deductibles, or coinsurance charges; and
 - (b) Necessary medical or remedial care recognized under state law, but not covered under the state's Medicaid Plan.

b. For all other individuals:

- (1) An amount for the maintenance needs of the individual which is equal to 300% of the categorically needy income standard for a noninstitutionalized individual.
- (2) For an individual with a family at home, an additional amount for the maintenance needs of the family which shall be equal to the medically needy income standard for a family of the same size.
- (3) Amounts for incurred expenses for medical or remedial care that are not subject to payment by a third party including:
 - (a) Medicare and other health insurance premiums, deductibles, or coinsurance charges; and
 - (b) Necessary medical or remedial care recognized under state law, but not covered under the state's Medicaid Plan.
- C. Assessment and authorization of home and community-based care services for individuals with AIDS/ARC on the HIV/AIDS waiver.
 - 1. The individual's status as an AIDS/ARC individual in need of home and community-based care services shall be determined by the preadmission screening team after completion of a thorough assessment of the individual's needs and available support. Screening by the preadmission screening team and preauthorization of home and community-based care services by DMAS staff is

mandatory before Medicaid will assume payment responsibility of home and community-based care services.

- 2. An essential part of the preadmission screening team's assessment process is determining the level of care required by applying existing criteria for hospital or nursing facility care according to the Virginia Medicaid Hospital Criteria or the Virginia Medicaid Nursing Facility Criteria.
- 1. To ensure that Virginia's home and community-based care waiver programs serve only individuals who would otherwise be placed in an inpatient hospital or nursing facility, home and community-based care services shall be considered only for individuals who meet DMAS' inpatient hospital or nursing facility criteria or for individuals who are at imminent risk, defined as within one month, of nursing facility admission. Home and community-based care services shall be the critical service that enables the individual to remain at home rather than being placed in an inpatient hospital or nursing facility.
- 2. The individual's eligibility for home and community-based care services shall be determined by the preadmission screening team after completion of a thorough assessment of the individual's needs and available supports. If an individual meets nursing facility or inpatient hospital criteria, the PAS team shall give the individual the choice of receiving community-based care or care in a nursing facility. In order to meet inpatient hospital criteria, the individual must have had an inpatient hospital admission within three months of the request for waiver services for an HIV-symptomatic or AIDS-related reason.
- 3. Before Medicaid will assume payment responsibility of home and community-based care services, preauthorization must be obtained from the designated preauthorization contractor on all services requiring preauthorization. Providers must submit the required information to the designated preauthorization contractor within 10 business days of initiating care. If the provider submits all required information to the designated preauthorization contractor within 10 business days of initiating care, services may be authorized beginning from the date the provider initiated services but not preceding the date of the physician's signature on the Medicaid Funded Long-Term Care Service Authorization Form (DMAS-96). If the provider does not submit the required information to the designated preauthorization contractor within 10 business days of initiating care, the services may be authorized beginning from the date all required information was received by the designated preauthorization contractor, but not preceding the date of the PAS team physician's signature on the DMAS-96.
- 3.4. The PAS team shall explore alternative settings and/or services to provide the care needed by the individual. If hespital nursing facility placement or a combination of other services are determined to be appropriate, the screening team shall initiate referrals for service. If Medicaid-funded home and community-based care services are determined to be the critical service services to delay or avoid inpatient hospital or nursing facility placement, the screening PAS team shall develop an appropriate Plan of Care, compute

- cost-effectiveness and make a recommendation for waiver services service plan and initiate referrals for service.
- 4.5. Virginia's home and community-based care services for individuals with AIDS/ARC may only be recommended The individual may be determined to be eligible to receive services through the HIV/AIDS waiver by the preadmission screening team if:
 - a. The physician who is part of the designated preadmission screening team specifically states the individual has a diagnosis of AIDS or ARC, is HIV symptomatic.
 - b. The preadmission screening team can document that the individual is experiencing medical and functional symptoms associated with AIDS or ARC which that would, in the absence of waiver services, require the level of care provided in a hospital, or nursing facility, the cost of which would be reimbursed under the State Medicaid Plan₇. Individuals who would revert to a nursing facility level of care without continuation of waiver services will be allowed to continue to participate in the waiver.
 - c. The individual requesting waiver services is not an inpatient of a nursing facility or hospital,
 - d. Waiver services can reasonably be expected to cost equal to or less than institutional services and ensure the individual's safety and welfare in the home and community.
- 5. The preadmission screening team must submit all preadmission screening information and a recommendation to DMAS for final determination of level of care and authorization for home and community-based care services. DMAS authorization must be obtained prior to referral and Medicaid reimbursement for waiver services.
- 6. Home and community-based care services shall not be provided to any individual who resides in a nursing facility, an intermediate care facility for the mentally retarded, a hospital, an assisted living facility licensed or certified by DSS, or a group home licensed by the Department of Mental Health, Mental Retardation and Substance Abuse Services. Additionally, home and community-based care services shall not be provided to any individual who resides outside of the physical boundaries of the Commonwealth, with the exception of brief periods of time as approved by DMAS or the designated preauthorization contractor. Brief periods of time may include, but are not necessarily restricted to, vacation or illness.
- 7. The average annual cost of care for home and community-based care services shall not exceed the average annual cost of inpatient hospital or nursing facility care. For purposes of this subdivision, the average annual cost of care for home and community-based care services shall include all costs of all Medicaid covered services that would actually be received by individuals. The average annual cost of nursing facility care shall be determined by DMAS and shall be updated annually.
- 8. Individuals should not be screened multiple times within a short period of time for the same type of service. Preadmission screenings are valid for the following periods

- of time: (i) months 0 up to 6 no updates needed; (ii) months 6 up to 12 update needed (do not submit for reimbursement); and (iii) over 12 months old new screening must be completed (submit for reimbursement).
- D. Appeals. Recipient appeals shall be considered pursuant to 12 VAC 30-110-10 through 12 VAC 30-110-380. Provider appeals shall be considered pursuant to 12 VAC 30-10-1000 and 12 VAC 30-20-500 through 12 VAC 30-20-560.
- 12 VAC 30-120-160. General conditions and requirements for all participating providers for home and community-based care services for individuals with AIDS/ARC participating providers.
- A. All providers must meet the general requirements and conditions for provider participation. In addition, there are specific requirements for each of the service providers (case management, personal care, respite care and skilled private duty nursing, enteral nutrition, consumer-directed personal assistance services, and consumer-directed respite care services) which are set forth in 12 VAC 30-120-170 12 VAC 30-120-155 through 12 VAC 30-120-200 12 VAC 30-120-201.
- A. B. General requirements. All Providers approved for participation shall, at a minimum, perform the following activities:
 - 1. Immediately notify DMAS, in writing, of any change in the information which the provider previously submitted to DMAS to include the provider's physical and mailing addresses, executive staff and officers, and contact person's name, telephone number, and fax number.
 - 2. Assure freedom of choice to recipients individuals in seeking medical care from any institution, pharmacy, practitioner, or other provider qualified to perform the service(s) service or services required and participating in the Medicaid Program at the time the service was or services were performed.
 - Assure the recipient has individual's freedom to reject medical care and treatment.
 - 4. Accept referrals for services only when staff is available to initiate services.
 - 5. Provide services and supplies to recipients individuals in full compliance with (i) Title VI of the Civil Rights Act of 1964 which prohibits discrimination on the grounds of race, color, religion, or national origin and of (42 USC § 2000 et seq.); (ii) § 504 of the Rehabilitation Act of 1973 which prohibits discrimination on the basis of a handicap (29 USC § 70 et seq.); (iii) Title II of the Americans with Disabilities Act of 1990 (42 USC § 126 et seq.); and (iv) all other applicable state and federal laws and regulations.
 - Provide services and supplies to recipients individuals in the same quality and mode of delivery as provided to the general public.
 - 7. Charge DMAS for the provision of services and supplies to recipients individuals in amounts not to exceed the provider's usual and customary charges to the general public.
 - 8. Accept Medicaid payment from the first day of eligibility.

- 9. Accept as payment in full the amount established by the DMAS
- 10. Use program-designated billing forms for submission of charges.
- 11. Maintain and retain business and professional records sufficient to document fully and accurately the nature, scope and details of the health care provided.
 - a. Such records shall be retained for at least five years from the last date of service or as provided by applicable federal or state laws, whichever period is longer. If an audit is initiated within the required retention period, the records shall be retained until the audit is completed and every exception resolved. Records of minors shall be kept for at least five years after such minor has reached the age of 18 years.
 - b. Policies regarding retention of records shall apply even if the provider discontinues operation. DMAS shall be notified in writing of storage, location, and procedures for obtaining records for review should the need arise. The location, agent, or trustee shall be within the Commonwealth of Virginia.
- 12. Furnish to authorized state and federal personnel, in the form and manner requested, access to records and facilities.
- 13. Disclose, as requested by DMAS, all financial, beneficial ownership, equity, surety, or other interests in any and all firms, corporations, partnerships, associations, business enterprises, joint ventures, agencies, institutions, or other legal entities providing any form of health care services to recipients of Medicaid.
- 14. Hold confidential and use for authorized DMAS purposes only all medical assistance information regarding recipients. Comply with all Health Insurance Portability and Accountability Act (HIPAA) guidelines.
- 15. Change of ownership. When ownership of the provider agency changes, DMAS shall be notified within 15 calendar days *prior to the date of the change*.
- B. C. Requests for participation. Requests will be screened by DMAS or the designated contractor to determine whether the provider applicant meets the basic requirements for participation.
- C. D. Provider participation standards. For DMAS to approve contracts with home and community-based care providers the following standards as defined in the provider manuals shall be met:, providers must meet staffing, financial solvency, disclosure of ownership and assurance of comparability of services requirements.
 - 1. Staffing requirements;
 - 2. Financial solvency;
 - 3. Disclosure of ownership; and
 - 4. Assurance of comparability of services.
- D. E. Adherence to provider contract and special participation conditions. In addition to compliance with the general

- conditions and requirements, all providers enrolled by the Department of Medical Assistance Services DMAS shall adhere to the conditions of participation outlined in their individual provider contracts agreements and in the applicable DMAS provider service manual.
- F. DMAS is responsible for assuring continued adherence to provider participation standards. DMAS shall conduct ongoing monitoring of compliance with provider participation standards and DMAS policies.
- E. G. Recipient Individual choice of provider agencies. If there is more than one approved provider agency offering services in the community, the individual will have the option of selecting the provider agency of his choice from among those agencies that can appropriately meet the individual's needs.
- H. If a participating provider wishes to voluntarily terminate his participation in Medicaid, the provider must give DMAS written notification 30 days prior to the desired termination date.
- F. I. Termination of provider participation. DMAS may administratively terminate a provider from participation upon 60 30 days' written notification. DMAS may also cancel a contract provider agreement immediately or may give notification in the event of a breach of the contract provider agreement by the provider as specified in the DMAS contract provider agreement. Such action precludes further payment by DMAS for services provided recipients subsequent to the date specified in the termination notice. Payment by DMAS is prohibited for services provided to individuals subsequent to the date specified in the termination notice.
- G. J. Reconsideration of adverse actions. Adverse actions may include, but are shall not be limited to disallowed payment of claims for services rendered which that are not in accordance with DMAS policies and procedures, caseload restrictions, and contract limitation or termination. The following procedures will be available to all providers when DMAS takes adverse action which includes termination or suspension of the provider agreement.
 - 1. The reconsideration process shall consist of three phases:
 - a. A written response and reconsideration to the preliminary findings,:
 - b. An The informal conference-; and
 - c. A The formal evidentiary hearing.
 - 2. The provider shall have 30 days to submit information for written reconsideration, 45 30 days from the date of the notice to request an the informal conference, and 45 30 days from the date of the initial agency decision to request a the formal evidentiary hearing.
 - 3. An appeal of adverse actions shall be heard in accordance with the Administrative Process Act (§ 9-6.14:1 et seq. of the Code of Virginia) and the State Plan. Judicial review of the final agency determination shall be made in accordance with the Administrative Process Act 12 VAC 30-10-1000 and Part XII (12 VAC 30-20-500 et seq.) of 12 VAC 30-20.

- K. Section 32.1-325 of the Code of Virginia mandates that "Any such (Medicaid) agreement or contract shall terminate upon conviction of the provider of a felony." A provider convicted of a felony in Virginia or in any other of the 50 states or the District of Columbia must, within 30 days, notify the Virginia Medicaid Program of this conviction and relinquish its provider agreement. Reinstatement will be contingent upon provisions of the laws of the Commonwealth. Additionally, termination of a provider contract will occur as may be required for federal financial participation.
- H. L. Participating provider agency's responsibility for the Recipient Patient Information Form (DMAS-122). It is the responsibility of the provider agency to notify DMAS and the DSS or the designated preauthorization contractor, in writing, when any of the following circumstances occur:
 - 1. Home and community-based care services are implemented.
 - 2. A recipient An individual receiving services dies.; or
 - 3. A recipient An individual is discharged or terminated from services.
 - 4. Any other circumstances (including hospitalization) which cause home and community-based care services to cease or be interrupted for more than 30 days.
- M. Participating provider agency's responsibility for the Patient Information Form (DMAS-122). It is the responsibility of the provider agency to notify the local DSS, in writing, when any circumstances (including hospitalization) cause home and community-based care services to cease or be interrupted for more than 30 days.
- H. N. Changes or termination of care. Agencies providing direct service are responsible for revisions to their individual service plan but must have any change which increases the amount of service or any change not agreed to by the recipient authorized by the case manager (refer to 12 VAC 30-120-170).
 - 1. Decreases in *the* amount of authorized care by the provider agency.
 - a. The provider agency may decrease the amount of authorized care enly if the recipient agrees with the provider that a decrease in care is needed and that the amount of care in the revised Plan of Care is appropriate if the newly developed plan of care is appropriate and based on the needs of the individual. If the individual disagrees with the proposed decrease, the individual has the right to appeal to DMAS.
 - b. The *participating* provider is responsible for devising developing the new plan of care and calculating the new hours of service delivery.
 - c. The provider shall discuss the decrease in care with the recipient and/or family, document the conversation in the recipient's record, and shall notify the recipient or family and the recipient's case manager of the change by letter. The participating provider shall give the recipient and/or family 10 days written notification of the intent to decrease services. The letter shall provide the reasons

for and effective date of the decrease. The effective date of the decrease in service shall be at least five days from the date of the decrease notification letter. The person responsible for supervising the individual's care shall discuss the decrease in care with the individual or family, document the conversation in the individual's record, and shall notify the designated preauthorization contractor and the individual or family of the change by letter. This letter shall give the individual the right to appeal.

- d. If the recipient disagrees with the decrease proposed, the provider shall contact the case manager to review the recipient's service needs and authorize the needed level of service.
- 2. Increases in the amount of authorized personal care. If a change in the recipient's individual's condition (physical, mental, or social) necessitates an increase in care, the participating provider shall develop a Plan of Care for services to meet the changed needs and contact the case manager assigned to the recipient who will, if appropriate, authorize the increase in service. The provider may implement the increase in hours once approval from the case manager is obtained shall assess the need for increase and, if appropriate, develop a plan of care for services to meet the changed needs. The provider may implement the increase in hours without approval from DMAS or the designated preauthorization contractor, if the amount of service does not exceed the amount established by DMAS or the designated preauthorization contractor, as the maximum for the level of care designated for that individual. Any increase to an individual's plan of care that exceeds the number of hours allowed for that individual's level of care or any change in the individual's level of care must be preauthorized by DMAS or the designated preauthorization contractor.
- 3. Nonemergency termination of home and community-based care services by the *participating* provider. The *participating* provider shall give the recipient and/ individual or family, or both, five days' written notification of the intent to terminate services. The letter shall provide the reasons for and effective date of the termination. The effective date of services termination shall be at least five days from the date of the termination notification letter. This includes a provider's voluntary termination of its provider agreement with DMAS.
- 4. Emergency termination of home and community-based care services by the participating provider. In an emergency situation when the health and safety of the recipient individual or provider agency personnel is endangered the, DMAS or the designated preauthorization contractor must be notified prior to termination. The five-day written notification period shall not be required. If appropriate, the local DSS Adult or Child Protective Services must be notified immediately.
- 5. Nonemergency termination of home and community-based care services for a recipient by the case by DMAS, or the designated preauthorization contractor. The effective date of termination will be at least 10 days from the date of the termination notification letter. The case manager DMAS, or the designated preauthorization contractor, has

the responsibility and the authority to terminate *the receipt* of home and community-based care services to the recipient by the individual for any of these reasons:

- a. The home and community-based care services are no longer the critical alternative to prevent or delay institutional placement.;
- b. The recipient individual no longer meets the level-of-care criteria-;
- c. The recipient's individual's environment does not provide for his health, safety, and welfare, or
- d. An appropriate and cost-effective plan of care cannot be developed.
- 6. If the individual disagrees with the service termination decision, DMAS Appeals Division shall conduct a review of the individual's service need as part of the appeals process. The individual, when requesting an appeal, should submit documentation to indicate why the decision to deny was incorrect. As a result of this review, DMAS Appeals Division will either uphold or overturn the termination decision. If the termination decision is upheld, the individual has the right to file a formal appeal to the local circuit court. The individual filing the appeal shall have a right to the continuation of services pending the final appeal decision pursuant to 12 VAC 30-110-100.
- J. O. Suspected abuse or neglect. Pursuant to § 63.1-55.3 §§ 63.2-1509 and 63.2-1606 through 63.2-1610 of the Code of Virginia, if a participating provider agency knows or suspects that a an individual receiving home and community-based care recipient services is being abused, neglected, or exploited, the party having knowledge or suspicion of the abuse/neglect/exploitation abuse, neglect, or exploitation shall report this immediately to the local DSS Adult Protective Services or Child Protective Services, as appropriate, and to DMAS.
- K. P. DMAS is responsible for assuring continued adherence to provider participation standards. DMAS shall conduct ongoing monitoring of compliance with provider participation standards and DMAS policies and annually recertify each provider for contract renewal with DMAS to provide home and community-based services. A provider's noncompliance with DMAS regulations, policies, and procedures, as required in the provider's contract agreement with DMAS, may result in a written request from DMAS for a corrective action plan which details the steps the provider will take and the length of time required to achieve full compliance with deficiencies which have been cited a denial of Medicaid payment or termination of the provider agreement.
- Q. Waiver desk reviews. DMAS will request, on an annual basis, information on every individual, that is used to assess the individual's ongoing need for Medicaid-funded long-term care. With this request, the provider will receive a list that specifies the information that is being requested. If an individual is identified as not meeting criteria for the waiver, the individual will be given 10 days' notice of termination from services and be terminated from the waiver and will also be given appeal rights.

12 VAC 30-120-165. Consumer-directed services: personal assistance and respite care services.

A. Service definition.

- 1. Consumer-directed personal assistance services are care of either a supportive or health-related nature and may include, but are not limited to, assistance with activities of daily living, access to the community, monitoring of self-administration of medication or other medical needs, monitoring health status and physical condition, and work-related personal assistance. When specified on the plan of care, such supportive services may include assistance with instrumental activities of daily living (IADLs). Personal assistance does not include either practical or professional nursing services or those practices regulated in Chapters 30 (§ 54.1-3000 et seq.) and 34 (§ 54.1-3400 et seq.) of Subtitle III of Title 54.1 of the Code of Virginia, as appropriate.
- 2. Consumer-directed respite care services are specifically designed to provide temporary, periodic, or routine relief to the unpaid primary caregiver of an individual. Respite services include, but are not limited to, assistance with personal hygiene, nutritional support, and environmental support. This service may be provided in the individual's home or other community settings.
- 3. DMAS shall either provide for fiscal agent services or contract for the services of a fiscal agent for consumerdirected personal assistance services and consumerdirected respite care services. The fiscal agent will be reimbursed by DMAS (if the service is contracted) to perform certain tasks as agent an individual/employer who is receiving consumer-directed services. The fiscal agent will handle responsibilities for the individual for employment taxes. The fiscal agent will seek and obtain all necessary authorizations and approvals of the Internal Revenue Service in order to fulfill all of these duties.
- 4. Individuals choosing consumer-directed services must receive support from a CD services facilitator. This is not a separate waiver service, but is required in conjunction with consumer-directed personal assistance services or consumer-directed respite care services. The CD service facilitator is responsible for assessing the individual's particular needs for a requested CD service, assisting in the development of the plan of care, providing training to the individual and family/caregiver on his responsibilities as an employer, and providing ongoing support of the consumer-directed services.

B. Criteria.

- 1. In order to qualify for consumer-directed personal assistance services, the individual must demonstrate a need for personal assistance in activities of daily living, community access, self-administration of medication or other medical needs, or monitoring health status or physical condition.
- 2. Consumer-directed respite care services may only be offered to individuals who have an unpaid primary caregiver living in the home who requires temporary relief to avoid institutionalization of the individual. Respite services are

- designed to focus on the need of the unpaid caregiver for temporary relief and to help prevent the breakdown of the unpaid caregiver due to the physical burden and emotional stress of providing continuous support and care to the individual.
- 3. Individuals who are eligible for consumer-directed services must have the capability to hire and train their own personal assistants and supervise the assistant's performance or, if an individual is unable to direct his own care or is under 18 years of age, a family/caregiver may serve as the employer on behalf of the individual.
- 4. The individual, or if the individual is unable, then a family/caregiver, shall be the employer of consumer-directed services, and therefore shall be responsible for hiring, training, supervising, and firing assistants. Specific employer duties include checking of references of personal assistants, determining that personal assistants meet basic qualifications, training assistants, supervising the assistant's performance, and submitting timesheets to the fiscal agent on a consistent and timely basis. The individual or family/caregiver must have a back-up plan for the provision of services in case the assistant does not show up for work as expected or terminates employment without prior notice.
- 5. Assistants may not be the parents of individuals who are minors or the individuals' spouses. Payment may not be made for services furnished by other family/caregivers living under the same roof as the individual being served unless there is objective written documentation as to why there are no other providers available to provide the care.

C. Service units and service limitations.

- 1. The unit of service for consumer-directed respite services is one hour. Consumer-directed respite services are limited to a maximum of 720 hours per calendar year. Individuals who receive either consumer-directed respite care or agency-directed respite care services, or both, may not receive more than 720 hours combined in a calendar year.
- 2. No more than two unrelated individuals who live in the same home are permitted to share the authorized work hours of the personal assistant.
- 3. The unit of service for consumer-directed personal assistance services is one hour.
- D. Provider qualifications. In addition to meeting the general conditions and requirements for home and community-based services, participating providers as specified in 12 VAC 30-120-150 and 12 VAC 30-120-160, the CD services facilitator must meet the following qualifications:
 - 1. To be enrolled as a Medicaid CD services facilitator and maintain provider status, the CD services facilitator must have sufficient resources to perform the required activities. In addition, the CD services facilitator must have the ability to maintain and retain business and professional records sufficient to document fully and accurately the nature, scope, and details of the services provided.
 - 2. It is preferred that the CD services facilitator possess a minimum of an undergraduate degree in a human services field or be a registered nurse currently licensed to practice

in the Commonwealth of Virginia. The CD services facilitator must possess a combination of work experience and relevant education that indicates possession of the following knowledge, skills, and abilities. Such knowledge, skills, and abilities must be documented on the provider's application form, found in supporting documentation, or be observed during the job interview. Observations of knowledge, skills, and abilities demonstrated during the interview must be documented. The knowledge, skills, and abilities include:

a. Knowledge of:

- (1) Types of functional limitations and health problems that may occur in persons with HIV/AIDS, as well as strategies to reduce limitations and health problems:
- (2) Physical assistance that may be required by persons with HIV/AIDS, such as transferring, bathing techniques, bowel and bladder care, and the approximate time those activities normally take;
- (3) Equipment and environmental modifications that may be required by persons with HIV/AIDS that reduce the need for human help and improve safety;
- (4) Various long-term care program requirements, including nursing facility and assisted living facility placement criteria; Medicaid waiver services; and other federal, state and local resources that provide personal assistance and respite care services;
- (5) DMAS HIV/AIDS waiver requirements, as well as the administrative duties for which the recipient will be responsible;
- (6) Conducting assessments (including environmental, psychosocial, health, and functional factors) and their uses in care planning;
- (7) Interviewing techniques;
- (8) The individual's right to make decisions about, direct the provisions of, and control his CD personal assistance and respite services, including hiring, training, managing, approving time sheets, and firing an assistant:
- (9) The principles of human behavior and interpersonal relationships; and
- (10) General principles of record documentation.

b. Skills in:

- (1) Negotiating with individuals and service providers;
- (2) Assessing, supporting, observing, recording, and reporting behaviors;
- (3) Identifying, developing, or providing services to individuals with HIV/AIDS: and
- (4) Identifying services within the established services system to meet the individual's needs.
- c. Abilities to:

- (1) Report findings of the assessment or onsite visit, either in writing or an alternative format for individuals who have visual impairments;
- (2) Demonstrate a positive regard for individuals and their families:
- (3) Be persistent and remain objective;
- (4) Work independently, performing position duties under general supervision;
- (5) Communicate effectively, verbally and in writing; and
- (6) Develop a rapport and communicate with different types of individuals from diverse cultural backgrounds.
- 3. If the CD services facilitator is not a registered nurse, the service facilitator must inform the primary health care provider that CD services are being provided and to request consultation as needed.

E. Service facilitator responsibilities.

- 1. The CD service facilitator shall maintain a personal assistant registry. The registry shall contain names of persons who have experience with providing personal assistance services or who are interested in providing personal assistance services. The registry shall be maintained as a supportive source for the individual who may use the registry to obtain the names of potential personal assistants. The CD service facilitator shall note on the plan of care what constitutes the individual's back-up plan in case the personal assistant does not report for work as expected or terminates employment without prior notice.
- 2. Upon the individual's request, the CD service facilitator shall provide the individual with a list of persons on the personal assistant registry who can provide temporary assistance until the assistant returns or the individual is able to select and hire a new personal assistant. If an individual is consistently unable to hire and retain the employment of an assistant to provide personal assistance services, the CD service facilitator must make arrangements with the case manager to have the services transferred to an agency-directed services provider or to discuss with the individual or family/caregiver other service options.
- 3. For consumer-directed services, the CD services facilitator must make an initial comprehensive home visit to collaborate with the individual and family/caregiver to identify the needs, assist in the development of the plan of care with the individual or family/caregiver, and provide management training. emplovee Individuals family/caregivers who cannot receive management training at the time of the initial visit must receive management training within seven days of the initial visit. The initial comprehensive home visit is done only once upon the individual's entry into the service. If a waiver individual changes CD services facilitators, the new CD services facilitator must complete a reassessment visit in lieu of a comprehensive visit.
- 4. After the initial visit, two routine onsite visits must occur in the individual's home within 60 days of the initiation of care

or the initial visit to monitor the plan of care. The first onsite visit shall occur within 30 days and the second onsite visit shall occur no later than 30 days after the first onsite visit. The CD service facilitator will continue to monitor the plan of care on an as needed basis, not to exceed a maximum of one routine onsite visit every 30 days but no less than the minimum of one routine onsite visit every 90 days per individual. If additional onsite visits are required, the provider must have documentation to show the necessity for these extra visits. After the first two routine onsite visits, the CD services facilitator and individual can decide on the frequency of the routine onsite visits.

- 5. After the initial visit, the CD services facilitator will continue to monitor the assistant's plan of care quarterly and on an as-needed basis. The CD services facilitator will review the utilization of consumer-directed respite services, either every six months or upon the use of 300 respite services hours, whichever comes first.
- 6. A face-to-face meeting with the individual must be conducted at least every 90 days to ensure appropriateness of any CD services received by the individual.
- 7. During visits with the individual, the CD services facilitator must observe, evaluate, and consult with the individual or family/caregiver, and document the adequacy and appropriateness of consumer-directed services with regard to the individual's current functioning and cognitive status, medical, and social needs. The CD services facilitator's written summary of the visit must include, but is not necessarily limited to:
 - a. Discussion with the individual or family/caregiver whether the service is adequate to meet the individual's needs:
 - b. Any suspected abuse, neglect, or exploitation and who it was reported to;
 - c. Any special tasks performed by the assistant and the assistant's qualifications to perform these tasks;
 - d. Individual's or family/caregiver's satisfaction with the service;
 - e. Any hospitalization or change in medical condition, functioning, or cognitive status;
 - f. The presence or absence of the assistant in the home during the CD services facilitator's visit; and
 - g. Other services received and the amount.
- 8. The CD services facilitator must be available to the individual by telephone.
- 9. Prior to a personal assistant providing services, the CD services facilitator must submit a criminal record check pertaining to the assistant on behalf of the individual and report findings of the criminal record check to the individual or the family/caregiver and the fiscal agent. If the individual is a minor, the assistant must also be screened through the DSS Child Protective Services Central Registry. Personal assistants will not be reimbursed for services provided to the individual on or after the date that the criminal record

check confirms an assistant has been found to have been convicted of a crime as described in § 32.1-162.9:1 of the Code of Virginia or if the personal assistant has a confirmed record on the DSS Child Protective Services Registry. DMAS will reimburse for up to six criminal record checks per individual within a six-month period.

- 10. The CD services facilitator, during routine visits, shall verify bi-weekly timesheets signed by the individual or the family/caregiver and the personal assistant to ensure that the number of plan of care approved hours are not exceeded. If discrepancies are identified, the CD services facilitator must contact the individual to resolve the discrepancies and must notify the fiscal agent. If an individual is consistently being identified as having discrepancies in his timesheets, the CD services facilitator must contact the case manager to resolve the situation. The CD services facilitator shall not verify timesheets for personal assistants whose criminal record checks have confirmed that they have been convicted of a crime described in § 32.1-162.9:1 of the Code of Virginia or in the case of a minor recipient have a confirmed case with the DSS Child Protective Services Registry and must notify the fiscal agent.
- 11. The CD services facilitator must maintain records of each individual. At a minimum these records must contain:
 - a. All copies of the completed Uniform Assessment Instrument (UAI), all documentation of previous inpatient hospital admissions, the Long-Term Care Preadmission Screening Authorization (DMAS-96), the Screening Team Service Plan (DMAS-97), the Consent to Exchange Information (DMAS-20), all Consumer-Directed Personal Assistance Plans of Care (DMAS-97B), all Patient Information Forms (DMAS-122), the Outline and Checklist for Consumer-Directed Recipient Comprehensive Training, and the Service Agreement Between the Consumer and the Service Facilitator;
 - b. Reassessments made during the provision of services;
 - c. All individual progress reports;
 - d. Results of the initial comprehensive home visit completed prior to or on the date services are initiated and subsequent reassessments and changes to the supporting documentation;
 - e. The plan of care goals and activities must be reviewed at least annually by the CD services facilitator, the individual and family/caregiver receiving the services, and the case manager. In addition, the plan of care must be reviewed by the CD services facilitator quarterly, modified as appropriate, and submitted to the case manager;
 - f. CD service facilitator's dated notes documenting any contacts with the individual, family/caregiver, and visits to the individual's home;
 - g. All correspondence to the individual, case manager, the designated preauthorization contractor, and DMAS;
 - h. Records of contacts made with family/caregiver, physicians, formal and informal service providers, and all professionals concerning the individual;

- i. All training provided to the assistants on behalf of the individual or family/caregiver;
- j. All employee management training provided to the individual or family/caregiver, including the individual's or family/caregiver's receipt of training on their responsibility for the accuracy of the assistant's timesheets;
- k. All documents signed by the individual or the individual's family/caregiver that acknowledge the responsibilities as the employer; and
- I. Documentation that indicates the efforts taken by the CD service facilitator to obtain the most recently completed DMAS-122 from the case manager.
- 12. The CD service facilitator is required to submit to DMAS biannually, for every individual, an individual progress report, an updated UAI, documentation of any inpatient hospital admissions, and any monthly visit/progress reports. This information is used to assess the individual's ongoing need for Medicaid-funded long-term care and appropriateness and adequacy of services rendered.
- 13. For consumer-directed personal assistance and consumer-directed respite services, individuals or family/caregivers will hire their own personal assistants and manage and supervise their performance. Assistant qualifications include, but shall not necessarily be limited to, the following requirements. The assistant must:
 - a. Be 18 years of age or older;
 - b. Have the required skills to perform consumer-directed services as specified in the individual's plan of care;
 - c. Possess basic math, reading, and writing skills;
 - d. Possess a valid Social Security number;
 - e. Submit to a criminal records check and, if the individual is a minor, consent to a search of the DSS Child Protective Services Central Registry. The assistant will not be compensated for services provided to the individual if either of these records checks verifies the assistant has been convicted of crimes described in § 32.1-162.9:1 of the Code of Virginia or if the assistant has a founded complaint confirmed by the DSS Child Protective Services Central Registry;
 - f. Be willing to attend training at the individual's or family/ caregiver's request;
 - g. Understand and agree to comply with the DMAS AIDS waiver requirements;
 - h. Be willing to register in a personal assistant registry, which will be maintained by the provider agency chosen by the individual; and
 - i. Receive yearly tuberculosis (TB) screening, cardiopulmonary resuscitation (CPR) training and an annual flu shot (unless these procedures are medically contraindicated).
- 14. Family members who are reimbursed to provide consumer-directed services must meet the assistant qualifications.

- F. Individual responsibilities.
 - 1. The individual must be authorized for consumer-directed services and successfully complete management training performed by the service facilitator before the individual can hire a personal assistant for Medicaid reimbursement. Individuals who are eligible for consumer-directed services must have the capability to hire and train their own personal assistants and supervise assistants' performance. Individuals with cognitive impairments will not be able to manage their own care. If an individual is unable to direct his own care, a family caregiver may serve as the employer on behalf of the individual. Individuals are permitted to share hours for no more than two individuals living in the same home.
 - 2. The individual or family/caregiver is the employer and is responsible for hiring, training, supervising, and firing personal assistants. Specific duties include checking references of personal assistants, determining that personal assistants meet basic qualifications, training personal personal assistants. supervising the assistant's performance, and submitting timesheets to the fiscal agent on a consistent and timely basis. The individual must have an emergency back-up plan in case the personal assistant does not show up for work as expected or terminates employment without prior notice.
 - 3. The individual shall cooperate with the development of the plan of care with the service facilitator, who monitors the plan of care and provides supportive services to the individual. The individual shall also cooperate with the fiscal agent that handles fiscal responsibilities on behalf of the individual. Individuals who do not cooperate with the service facilitator or fiscal agent may be disenrolled from consumer-directed services and may be considered for enrollment in agency-directed services.
 - 4. Individuals will acknowledge that they will not knowingly continue to accept consumer-directed personal assistance services when the services are no longer appropriate or necessary for their care needs and will inform the service facilitator. If consumer-directed services continue after services have been terminated by DMAS or the designated preauthorization contractor, the individual will be held liable for employee compensation.
 - 5. The individual's right to make decisions about, direct the provisions of, and control his consumer-directed personal assistance care and consumer-directed respite care services, including hiring, training, managing, approving time sheets, and firing an assistant, shall be preserved.
- G. Fiscal agent responsibilities.
 - 1. DMAS may contract for the services of a fiscal agent for consumer-directed services. The fiscal agent will be reimbursed by DMAS to perform certain tasks as an agent for the recipient/employer who is receiving consumer-directed services. The fiscal agent will handle certain responsibilities for the individual, including but not limited to, employment taxes. The fiscal agent will seek and obtain all necessary authorizations and approvals of the Internal Revenue Service in order to fulfill all of these duties.

- 2. A fiscal agent may be a state agency or other organization, and will sign a contract with DMAS that defines the roles and tasks expected of the fiscal agent and DMAS and enroll as a provider of consumer-directed services. Roles and tasks that will be deemed for the fiscal agent in the contract will consist of, but not necessarily be limited to, the following:
 - a. The fiscal agent will file for and obtain employer agent status with the federal and state tax authorities;
 - b. Once the individual has been authorized to receive consumer-directed services, the fiscal agent will register the individual as an employer and provide assistance to the individual in completing forms required to obtain employer identification numbers from federal agencies, state agencies, and unemployment insurance agencies;
 - c. The fiscal agent will prepare and maintain original and file copies of all forms needed to comply with federal, state, and local tax payment of unemployment compensation insurance premiums, and all other reporting requirements of employers;
 - d. Upon receipt of the required completed forms from the individual, the fiscal agent will remit the required forms to the appropriate agency and maintain copies of the forms in the individual's file. The fiscal agent will return copies of all forms to the individual for the individual's permanent personnel records;
 - e. The fiscal agent will prepare all unemployment tax filings on behalf of the individual as an employer, and make all deposits of unemployment taxes withheld according to the appropriate schedule;
 - f. The fiscal agent will receive and verify that the assistant's biweekly timesheets do not exceed the maximum hours approved for the individual and will process the timesheets;
 - g. The fiscal agent will prepare and process the payroll for the individual's assistants, and make all appropriate deposits of income tax, FICA, and other withholdings according to federal and state regulations. Withholdings include, but are not limited to, all judgments, garnishments, tax levies, or any related holds on the funds of the personal assistants as may be required by local, state, or federal law;
 - h. The fiscal agent will prepare payrolls for the individual's personal assistant according to approved time sheets and after making appropriate deductions and withholding deposits;
 - i. The fiscal agent will make payments on behalf of the individual for FICA (employer and employee shares), unemployment compensation taxes, and other payments and taxes required by applicable federal or state laws or regulations;
 - j. The fiscal agent will distribute biweekly payroll checks to the individual's personal assistants on behalf of the individuals;

- k. The fiscal agent will maintain accurate payroll records by preparing and submitting to DMAS, at the time the fiscal agent bills DMAS for personal assistance services, an accurate accounting of all payments on personal assistants to whom payments for services were made, including a report of FICA payments for each covered assistant;
- The fiscal agent will maintain such other records and information as DMAS may require, in the form and manner prescribed by DMAS;
- m. The fiscal agent will generate W-2 forms for all personal assistants who meet statutory threshold amounts during the tax year;
- n. The fiscal agent will establish a customer service mechanism in order to respond to calls from individuals and personal assistants regarding lost or late checks, or other questions regarding payments that are not related to the authorization amounts generated from DMAS;
- o. The fiscal agent will keep abreast of all applicable state and federal laws and regulations relevant to the responsibilities it has undertaken with regard to these filings;
- p. The fiscal agent will use program-designated billing forms or electronic billing to bill DMAS, if this service is contracted; and
- q. The fiscal agent will be capable of requesting electronic transfer of funds from DMAS.
- 3. The fiscal agent and all subcontracting bookkeeping firms, as appropriate, will maintain the confidentiality of Medicaid information in accordance with the following:
 - a. The fiscal agent agrees to comply with HIPAA requirements. The fiscal agent shall take measures to prudently safeguard and protect unauthorized disclosure of the Medicaid information in its possession. The fiscal agent shall establish internal policies to ensure compliance with federal and state laws and regulations regarding confidentiality. In no event shall the fiscal agent provide, grant, allow, or otherwise give access to Medicaid information to anyone without the express written permission of either the individual or the DMAS Director. The fiscal agent shall assume all liabilities under both state and federal law in the event that the information is disclosed in any manner.
 - b. Upon the fiscal agent receiving any written requests for Medicaid information from any individual, entity, corporation, partnership, or otherwise, the fiscal agent must notify DMAS of such requests within 24 hours of receipt of such requests. The fiscal agent shall ensure that there will be no disclosure of the data except by and through DMAS. DMAS will treat such requests in accordance with DMAS policies.
 - c. In cases where the information requested by outside sources can be released under the Freedom of Information Act (FOIA), as determined by DMAS, the fiscal agent shall provide support for copying and invoicing such documents.

4. A contract between the fiscal agent and the individual will be used to set forth those aspects of the employment relationship that are to be handled by the fiscal agent, and which are to be handled by the individual. The contract will reflect that the fiscal agent is performing these tasks on behalf of the individual who is the actual employer of the assistant. Before the individual begins receiving services, the fiscal agent must have a signed contract with the individual prior to the reimbursement of personal assistance services.

12 VAC 30-120-170. Case management services.

The following are specific requirements governing the provision of case management services. Case management is one of five services covered under the home and community based care program for individuals with AIDS/ARC.

A. General. Case management services are offered to enable continuous assessment, coordination and monitoring of the needs of the persons diagnosed with AIDS or ARC throughout the term of the individual's receipt of waiver services HIV/AIDS waiver individuals. Every AIDS/ARC HIV/AIDS waiver individual authorized for home and community-based services shall be offered case management services as an adjunct to other offered services. A Medicaid-eligible individual may not be authorized for home and community-based services unless that individual is both diagnosed with AIDS or ARC HIV and is experiencing symptoms which that require delivery of a home and community-based service other than case management. An individual authorized for home and community-based services for conditions of AIDS/ARC may continue to receive case management services during periods when other home and community-based services are not being utilized as long as receipt of case management services can be shown to continue to prevent the individual's institutionalization. In instances where a case management provider cannot be located, one of the other providers (personal/respite care provider, private duty nursing provider, or consumer-directed service facilitation provider) may act as the case management provider as long as he meets the case management provider qualifications and is enrolled with DMAS to provide case management services. If an AIDS waiver individual requires case management services, this service shall be provided as a part of the AIDS waiver. There shall be no duplication of AIDS waiver case management services with other Medicaid state plan case management services.

- B. Special provider participation conditions. To be a participating case management provider the following conditions shall be met:
 - The case management provider shall employ case management staff responsible for the reevaluation of need, monitoring of service delivery, revisions to the plan of care and coordination of services. This staff Each case manager shall possess, at a minimum:
 - a. A baccalaureate bachelor's degree in human services (i.e., social work, psychology, sociology, counseling, or a related field) or nursing;
 - b. Knowledge of the infectious disease process (specifically HIV) and the needs of the terminally-ill population, knowledge of the community service network

- and eligibility requirements and *the* application procedures for applicable assistance programs;
- c. Ability to access other health and social work professionals in the community to serve as members of a multidisciplinary team for reevaluation and coordination of services activities, ability to organize and monitor an integrated service plan for individuals with multiple problems and limited resources, ability to access (or have expertise in) medical and clinical expertise related to HIV infection and ability to demonstrate liaisons with clinical facilities providing diagnostic evaluation and/or treatment for persons individuals with HIV; and
- d. Skills in communication, service plan development, client advocacy and monitoring of a continuum of managed care.

Documentation of all staffs' credentials shall be maintained in the provider agency's provider's personnel file for review by DMAS staff. Providers of case management may utilize the services of volunteers or employees who do not meet this these criteria to perform the day-to-day interactions with recipients individuals commonly included in the case management process. There shall be, however, a case manager responsible for supervision of these volunteers or employees to include at a minimum weekly case consultations, decision-making related to the individual's plan of care and appropriateness for waiver services and training of the volunteers or employees interacting with the waiver recipient individual. The use of volunteers or other employees to perform the day-to-day interactions does not relieve the case manager from responsibility for direct contact (as defined below) with the recipient individual and overall responsibility for care management.

- 2. Designate a qualified staff person as case manager who shall:
 - a. Complete a comprehensive initial assessment.
 - a. b. Contact the waiver recipient individual, at a minimum, once every 30 days. If the waiver recipient individual has a volunteer(s) volunteer or volunteers or other staff assigned for regular face-to-face contact, this contact by the case manager may be a telephone contact. Otherwise, the contact by the case manager shall be a face-to-face interaction. At a minimum, the case manager must have face-to-face contact with the individual quarterly.
 - b. c. Contact the providers of direct waiver service(s) service or services, at a minimum, once every 30 days. Collateral contacts with other supports shall be made periodically, as determined by the needs of the recipient individual and extent of the support system. Contacts must be documented in the individual's record.
 - e. d. Maintain a file for each recipient which individual that includes:
 - (1) An ongoing progress report which that documents all communications between the case manager and recipient individual, providers, and other contacts. This must include the amount of time the case manager interacted with the individual on the telephone or face

to face. If the case manager is supervising a volunteer or employee who is assigned to provide day-to-day case management interactions with the recipient individual, the volunteer or employee must submit to the case manager a monthly summary of all interactions between the volunteer or employee and the recipient, individual;

- (2) The recipient's individual's assessment documentation and documentation of reassessments of level of care and need for services conducted quarterly by the case manager and the individual's case management team,
- (3) The initial plan of care and all subsequent revisions; and
- (4) Communication from DMAS, physician, service providers, and any other parties *related to the individual's Medicaid services or medical care.*
- d. Reviews e. Review of the plan of care every three months, or more frequently if necessary, and continue any revisions indicated by the changed needs or support of the recipient individual. These reviews shall be documented in the recipient's individual's file. The documentation shall note all members of the case management team who provided input to the plan of care.
- 3. Maintain a ratio of case manager staff to recipient individual caseload which that allows optimum monitoring and reevaluation ability. The caseload ability of the case manager may vary according to other duties, availability of resources, stage of recipients individuals in caseload, and utilization of volunteers. A ratio of one case manager to a caseload size of 25 waiver recipients is deemed desirable, but can be exceeded as long as quality of case management services are not affected.
- Nutritional supplement authorization. Nutritional supplements which do not contain a legend drug may be purchased for the recipient of waiver services for conditions of AIDS/ARC when the nutritional supplements are certified by the physician as the primary source of nutrition and necessary for the successful implementation of the individual's health care plan and the individual is not able to purchase these food supplements through other available means. The amount of nutritional supplements shall be limited by medical necessity and cost effectiveness. Case management providers shall authorize the purchase of physician-ordered nutritional supplements through the Plan of Care approved by DMAS. The case management provider shall complete an invoice authorizing the purchase which the recipient can use to purchase the nonlegend drug nutritional supplements from an approved Medicaid provider.

12 VAC 30-120-180. Agency-directed personal care services.

The following requirements govern the provision of personal care services:

A. General. Agency-directed personal care services are may be offered to individuals in their homes as long-term maintenance or support services which are necessary in order to enable the individual to remain at or return home rather

than enter a hospital or nursing facility. Personal care services provide eligible individuals with personal care aides who perform basic health-related services, such as helping with activities of daily living, assisting with ambulation, exercises, assisting with normally self-administered medications, reporting changes in recipient's conditions and needs, and/or providing household services essential to health in the home. Generally, personal care services include assistance with personal hygiene, nutritional support, and the environmental maintenance necessary for recipients to remain in their homes waiver individuals. Personal care may be offered either as the sole home and community-based care service that avoids institutionalization or in conjunction with the other AIDS waiver services. Individuals may continue to work or attend postsecondary school, or both, while they receive services under this waiver. The personal care assistant who assists the individual may accompany the individual to work or school or both and may assist the individual with personal needs while the individual is at work or school or both. DMAS will also pay for any personal care services that the assistant gives to the individual to assist him in getting ready for work or school or both or when he returns home. DMAS or the designated preauthorization contractor will review the individual's needs and the complexity of the disability when determining the services that will be provided to the individual in the workplace or school or both.

- B. DMAS will not duplicate services that are required as a reasonable accommodation as a part of the Americans with Disabilities Act (ADA) (42 USC §§ 12131 through 12165) or the Rehabilitation Act of 1973. For example, if the individual's only need is for assistance during lunch, DMAS would not pay for the assistant to be with the individual for any hours extending beyond lunch. For an individual whose speech is such that he cannot be understood without an interpreter (not translation of a foreign language), or the individual is physically unable to speak or make himself understood even with a communication device, the assistant's services may be necessary for the length of time the individual is at work or school or both. Workplace or school supports through the HIV/AIDS waiver are not provided if the services are an employer's responsibility under the Americans with Disabilities Act or § 504 of the Rehabilitation Act.
- C. The provider agency must develop an individualized plan of care that addresses the individual's needs at home, at work or school and in the community. DMAS will not pay for the assistant to assist the enrolled individual with any functions related to the individual completing his job or school functions or for supervision time during work, school, or both.
- B. D. Special provider participation conditions. The personal care provider shall:
 - 1. Demonstrate a prior successful delivery of health care services.
 - 2. 1. Operate from a business office.
 - 3. 2. Employ (or subcontract with) and directly supervise at least a registered nurse (RN) who will provide ongoing supervision of all personal care aides.
 - a. The RN registered nurse shall be currently licensed to practice in the Commonwealth of Virginia and have at

least two years of related clinical nursing experience (which may include work in a an acute care hospital, public health clinic, home health agency, or rehabilitation hospital, nursing home facility, or as a licensed practical nurse (LPN)).

- b. The registered nurse shall have a satisfactory work record, as evidenced by references from prior job experience, including no evidence of abuse, neglect, or exploitation of incapacitated or older adults and children. Providers are responsible for complying with § 32.1-162.9:1 of the Code of Virginia regarding criminal record checks. The criminal record check documentation shall be available for review by DMAS staff who are authorized by the agency to review these files, as a part of the utilization review process.
- b. c. The RN registered nurse supervisor shall make an initial assessment home visit prior to home assessment on or before the start of care for all new recipients individuals admitted to personal care, when individuals are readmitted after being discharged from services, or are transferred from another personal care provider.
- e. d. The RN registered nurse supervisor shall make supervisory visits as often as needed to ensure both quality and appropriateness of services. A minimum frequency of these visits is every 30 days, but no fewer visits than provided as follows, to ensure both quality and appropriateness of services.
 - (1) A minimum frequency of these visits is every 30 days for individuals with a cognitive impairment, as defined herein, and every 90 days for individuals who do not have a cognitive impairment.
 - (2) The initial home assessment visit by the registered nurse shall be conducted to create the plan of care and assess individuals' needs. The registered nurse shall return for a follow-up visit within 30 days after the initial visit to assess the individual's needs and make a final determination that there is no cognitive impairment. This determination must be documented in the individual's record by the registered nurse. Individuals who are determined to have a cognitive impairment will continue to have supervisory visits every 30 days.
 - (3) If there is no cognitive impairment, the registered nurse may give the individual or caregiver or both the option of having the supervisory visit every 90 days or any increment in between, not to exceed 90 days. The registered nurse must document this conversation in the individual's record and the option that was chosen.
 - (4) The provider has the responsibility of determining if 30-day registered nurse supervisory visits are appropriate for the individual. The provider may offer the extended registered nurse supervisory visits, or the agency may choose to continue the 30-day supervisory visits based on the needs of the individual. The decision must be documented in the individual's record.
 - (5) If an individual's personal care assistant is supervised by the provider's registered nurse less often than every 30 days and DMAS or the designated

- preauthorization contractor determines that the individual's health, safety, or welfare is in jeopardy, DMAS or the designated preauthorization contractor may require the provider's registered nurse to supervise the personal care aide every 30 days or more frequently than what has been determined by the registered nurse. This will be documented and entered in the individual's record.
- d. e. During visits to the recipient's individual's home, the RN registered nurse shall observe, evaluate, and document the adequacy and appropriateness of personal care services with regard to the recipient's individual's current functioning status, medical, and social needs. The personal care aide's record shall be reviewed and the recipient's (or family's) satisfaction with the type and amount of service discussed. The RN registered nurse summary shall note:
 - (1) Whether personal care services continue to be appropriate.
 - (2) Whether the plan is adequate to meet the need or changes are indicated in the plan individual's needs or if changes need to be made in the plan of care.
 - (3) Any special tasks performed by the aide and the aide's qualifications to perform these tasks.
 - (4) Recipient's Individual's satisfaction with the service.
 - (5) Hospitalization or change in *the* medical condition or functioning status *of the individual*.
 - (6) Other services received and their amount by the individual and the amount; and
 - (7) The presence or absence of the aide in the home during the RN's registered nurse's visit.
- e. The f. A registered nurse shall be available to the personal care aide for conference pertaining to individuals being served by the aide and shall be available to aide aides by telephone at all times that the aide is providing services to personal care recipients individuals.
- f. g. The RN registered nurse supervisor shall evaluate the aide's aides' performance and the recipient's individual individual's needs to identify any gaps insufficiencies in the aide's abilities to function competently and shall provide training as indicated. This shall be documented in the individual's record.
- h. If there is a delay in the registered nurses' supervisory visits, because the individual was unavailable, the reason for the delay must be documented in the individual's record.
- 4. 3. Employ and directly supervise personal care aides who will provide direct care to personal care recipients individuals. Each aide hired by the provider agency shall be evaluated by the provider agency to ensure compliance with minimum qualifications as required by DMAS. Each aide shall:
 - a. Shall be Be able to read and write.

- b. Shall complete Complete a minimum of 40 hours of training consistent with DMAS standards. Prior to assigning an aide to a recipient an individual, the provider agency shall ensure that the aide has satisfactorily completed a training program consistent with DMAS standards.
- c. Shall be Be physically able to do the work.
- d. Shall have Have a satisfactory work record, as evidenced by references from prior job experience, including no evidence of possible abuse, neglect or exploitation of incapacitated or older adults and children. Providers are responsible for complying with § 32.1-162.9:1 of the Code of Virginia regarding criminal record checks. The criminal record check shall be available for review by DMAS staff who are authorized by the agency to review these files; and
- e. Shall not be a member of the recipient's family (e.g., family is defined as parents, spouses, children, siblings, grandparents, and grandchildren). Not be (i) the parents of minor children who are receiving waiver services or (ii) spouses of individuals who are receiving waiver services.

Payment may be made for services furnished by other family members when there is objective written documentation as to why there are no other providers available to provide the care. These family members must meet the same requirements as aides who are not family members.

- C. Provider inability to render services and substitution of aides.
 - 1. When a personal care aide is absent and the agency has no other aide available to provide services, the provider agency is responsible for ensuring that services continue to recipients. The agency may either obtain a substitute aide from another agency, if the lapse in coverage is to be less than two weeks in duration, or may transfer the recipient to another agency. If no other provider agency is available, the provider agency shall notify the recipient or family so they may contact the local health department to request a nursing home preadmission screening if nursing home placement is desired.
 - 2. During temporary, short-term lapses in coverage (not to exceed two weeks in duration), the following procedure shall apply:
 - a. The personal care agency having recipient responsibility shall provide the registered nurse supervision for the substitute aide.
 - b. The agency providing the substitute aide shall send to the personal care agency having recipient care responsibility a copy of the aide's signed daily records signed by the recipient.
 - e. The provider agency having recipient responsibility shall bill DMAS for services rendered by the substitute aide. The two agencies involved shall negotiate the financial arrangements of paying the substitute aide.

- 3. If a provider agency secures a substitute aide, the provider agency shall be responsible for ensuring that all DMAS requirements continue to be met, including documentation of services rendered by the substitute aide and documentation that the substitute aide's qualifications meet DMAS requirements.
- D. C. Required documentation in recipients' for individuals' records. The provider agency shall maintain all records of each personal care recipient. These records shall be separate from those of nonhome and community-based care services, such as companion or home health services. These records shall be reviewed periodically by the DMAS staff who are authorized by DMAS to review these files during utilization review. At a minimum these records shall contain:
 - 1. The most recently updated Long Term Care Uniform Assessment Instrument (UAI), documentation of any inpatient hospital admissions, the **Prescreening** Authorization Medicaid-Funded Long-Term Care Service Authorization form (DMAS-96), the Screening Team Plan of Care Service Plan for Medicaid-Funded Long-Term Care (DMAS-97), the Consent to Exchange Information (DMAS-20), all provider agency plans of care, and Provider Agency Plans of Care (DMAS - 97A), all Community-Based Care Recipient Assessment Reports (DMAS-99), all Patient Information Forms (DMAS-122), and the Service Agreement Between the Consumer and the Service Facilitator.
 - 2. All DMAS Utilization Review forms and plans of care.
 - 3. 2. The initial assessment by the RN supervisory a registered nurse completed prior to or on the date that services are initiated.
 - 4- 3. Registered nurses' notes recorded and dated during any significant contacts with the personal care aide and during supervisory visits to the recipient's individual's home.
 - 5. 4. All correspondence to the recipient and to individual, DMAS, the designated preauthorization contractor.
 - 6. 5. Reassessments made during the provision of services.
 - 7. 6. Significant contacts made with family, physicians, DMAS, the designated preauthorization contractor, formal, and informal service providers and all professionals concerning the recipient related to the individual's Medicaid services or medical care.
 - 8. 7. All personal care aide records. The personal care aide record Provider Aide/LPN Records (DMAS-90). The Provider Aide/LPN Record shall contain:
 - a. The specific services delivered to the recipient individual by the aide and the recipient's responses individual's response to this service;
 - b. The aide's daily arrival and departure times,;
 - c. The aide's weekly comments or observations about the recipient to include individual, including observations of the recipient's individual's physical and emotional condition, daily activities, and responses to services rendered; and

- d. The aide's and recipient's individual's, or responsible caregiver's, weekly signature signatures, including the date, to verify that personal care services during that week have been rendered during that week as documented in the record. An employee of the provider cannot sign for the individual unless he is a family member or legal guardian of the individual.
- e. Signatures, times and dates shall not be placed on the aide record prior to the last date of the week that the services are delivered.
- 8. All individual progress reports.

12 VAC 30-120-190. *Agency-directed* respite care services.

These requirements govern the provision of respite care services.

- A. General. Agency-directed respite care services may be offered to individuals in their homes as an alternative to more costly institutional care. Respite care may be offered to individuals in their homes or places of residence, in a Medicaid-certified nursing facility, or in a licensed respite care facility. Respite care is distinguished from other services in the continuum of long-term care because it is specifically designed to focus on the need of the unpaid primary caregiver for temporary relief. Respite care may only be offered to individuals who have a an unpaid primary caregiver living in the home who requires temporary relief to avoid institutionalization of the individual. The authorization of respite care is limited to 30 24-hour days over a 12-month period. Reimbursement shall be made on an hourly basis. The authorization of respite care is limited to 720 hours per calendar year per individual. An individual who transfers to a different provider or is discharged and readmitted into the HIV/AIDS waiver program within the same calendar year will not receive an additional 720 hours of respite care. Reimbursement shall be made on an hourly basis not to exceed a total of 720 hours per calendar year. If an individual is receiving both agency directed and consumer directed respite care, the total number of respite care hours cannot exceed a total of 720 hours combined per calendar year.
- B. Special provider participation conditions. To be approved for respite care contracts with DMAS, the respite care provider shall:
 - 1. Demonstrate prior successful health care delivery.
 - 2. 1. Operate from a business office.
 - 3. 2. Employ (or subcontract) with and directly supervise a registered nurse (RN) who will provide ongoing supervision of all respite care aides.
 - a. The RN registered nurse shall be currently licensed to practice in the Commonwealth and have at least two years of related clinical nursing experience which may include work in an acute care hospital, public health clinic, home health agency, rehabilitation hospital, or nursing home facility or as an LPN.
 - b. The registered nurse shall have a satisfactory work record, as evidenced by references from prior job

- experience, including no evidence of abuse, neglect, or exploitation of incapacitated or older adults and children. Providers are responsible for complying with § 32.1-162.9:1 of the Code of Virginia regarding criminal record checks. The criminal record check shall be available for review by DMAS staff who are authorized by the agency to review these files.
- b. c. Based on continuing evaluations of the aides' performance and the recipients' individual individuals' needs, the RN a registered nurse supervisor shall identify any gaps insufficiencies in the aides' abilities to function competently and shall provide training as indicated.
- e. d. The RN A registered nurse supervisor shall make an initial home assessment visit prior to on or before the start of care for any recipient individual admitted to respite care.
- d. e. The RN A registered nurse supervisor shall make supervisory visits as often as needed to ensure both quality and appropriateness of services.
 - (1) When respite care services are received on a routine basis, the minimum acceptable frequency of these visits shall be every 30 days.
 - (2) When respite care services are not received on a routine basis, but are episodic in nature, the RN supervisor a registered nurse shall not be required to conduct a supervisory visit every 30 days. Instead, the RN supervisor a registered nurse shall conduct the initial home visit with the respite care aide immediately preceding on or before the start of care and make a second home visit within the respite care period during the second respite care visit.
 - (3) When respite care services are routine in nature and offered in conjunction with personal care, the 30-day supervisory visit conducted for personal care services may serve as the RN registered nurse supervisory visit for respite care. However, the RN registered nurse supervisor shall document supervision of respite care separately from the personal care documentation. For this purpose, the same recipient individual record can be used with a separate section for respite care documentation.
- e. f. During visits to the recipient's individual's home, the RN registered nurse shall observe, evaluate, and document the adequacy and appropriateness of respite care services with regard to the recipient's individual's current functioning status, medical, and social needs. The respite care aide's record shall be reviewed and the recipient's or family's satisfaction with the type and amount of service discussed. The RN registered nurse shall document in a summary note:
 - (1) Whether respite care services continue to be appropriate-;
 - (2) Whether the plan of care is adequate to meet the recipient's individual's needs or if changes need to be made in it the plan of care.;

- (3) The recipient's individual's satisfaction with the service .:
- (4) Any hospitalization or change in the medical condition or functioning status of the individual-;
- (5) Other services received and their amount by the individual and the amount of services received; and
- (6) The presence or absence of the aide in the home during the *registered nurse*'s visit.
- f. g. In all cases, the RN A registered nurse shall be available to the respite care aide to discuss the recipients being served by the aide for conference pertaining to individuals being served by the aide and shall be available to the aides by telephone at all times that aides are providing services to respite care individuals.
- g. The RN providing supervision to respite care aides shall be available to them by telephone at all times that services are being provided to respite care recipients. Any lapse in RN coverage shall be reported immediately to DMAS.
- h. If there is a delay in the registered nurse's supervisory visits because the individual is unavailable, the reason for the delay must be documented in the individual's record.
- 4. 3. Employ and directly supervise respite care aides who provide direct care to respite care recipients individuals. Each aide hired by the provider agency shall be evaluated by the provider agency to ensure compliance with minimum qualifications as required by DMAS. Each aide must.
 - a. Shall Be able to read and write in English to the degree necessary to perform the tasks expected.
 - b. Shall Have completed a minimum 40 hours of training consistent with DMAS standards. Prior to assigning an aide to a recipient an individual, the provider agency shall ensure that the aide has satisfactorily completed a training program consistent with DMAS standards.
 - c. Shall Be evaluated in *his* job performance by the RN registered nurse supervisor.
 - d. Shall have the physical ability Be physically able to do the work.
 - e. Shall Have a satisfactory work record, as evidenced by references from prior job experience, including no evidence of possible abuse er, neglect, or exploitation of incompetent—and/or incapacitated individuals or older adults and children. Providers are responsible for complying with § 32.1-162.9:1 of the Code of Virginia regarding criminal record checks. The criminal record check documentation shall be available for review by DMAS staff who are authorized by the agency to review these files.
 - f. Shall not be a member of a recipient's family (e.g., family is defined as parents, spouses, siblings, grandparents, and grandchildren) Not be (i) the parents of minor children who are receiving waiver services or (ii) the spouses of individuals who are receiving waiver services.

- Payment may be made for services furnished by other family members when there is objective written documentation as to why there are no other providers available to provide the care. These family members must meet the same requirements as aides who are not family members.
- 5. 4. The respite care agency may employ a licensed practical nurse (LPN) to deliver perform skilled respite care services which shall be reimbursed by DMAS under the following circumstances:
 - a. The LPN shall be currently licensed to practice in the Commonwealth. The LPN must have a satisfactory work record, as evidenced by references from prior job experience, including no evidence of abuse, neglect, or exploitation of incapacitated or older adults and children. Providers shall be responsible for complying with § 32.1-162.9:1 of the Code of Virginia regarding criminal record checks. The criminal record check documentation shall be available for review by DMAS staff who are authorized by the agency to review these files.
 - a. b. The individual receiving care has a need for routine skilled care which that cannot be provided by unlicensed personnel. These individuals This individual would typically require a skilled level of care if in a nursing home facility (i.e., recipients individuals on a ventilator, recipients individuals requiring nasogastric or gastrostomy feedings, etc.).
 - b. c. No other individual person in the recipient's individual's support system is able to supply the skilled component of the recipient's individual's care during the caregiver's absence.
 - e. d. The recipient individual is unable to receive skilled nursing visits from any other source which could provide the skilled care usually given by the caregiver.
 - d. e. The agency ean must document in the individual's record the circumstances which require the provision of services by an LPN.
 - f. A physician's order for the skilled respite service, on the Home Health Certification and Plan of Care (CMS-485) is obtained prior to the initiation of service and is updated every six months. This order must specifically identify the skilled tasks to be performed.

The registered nurse shall review the medications and treatments rendered by the LPN every 60 days and verify the physician's orders.

- C. Inability to provide services and substitution of aides. When a respite care aide is absent and the respite care provider agency has no other aide available to provide services, the provider agency is responsible for ensuring that services continue to recipients.
 - 1. If a provider agency cannot supply a respite care aide to render authorized services, the agency may either obtain a substitute aide from another agency, if the lapse in coverage is to be less than two weeks in duration, or may transfer the recipient's care to another agency.

- 2. If no other provider agency is available who can supply an aide, the provider agency shall notify the recipient or family and case manager.
- 3. If a substitute aide is secured from another respite care provider agency or other home care agency, the following procedures apply:
 - a. The respite care agency having recipient responsibility shall be responsible for providing the RN supervision for the substitute aide.
 - b. The agency providing the substitute aide shall send to the respite care agency having recipient care responsibility a copy of the aide's daily records signed by the recipient, and the substitute aide. All documentation of services rendered by the substitute aide shall be in the recipient's record. The documentation of the substitute aide's qualifications shall also be obtained and recorded in the personnel files of the agency having recipient care responsibility.
 - c. The provider agency having recipient responsibility shall bill DMAS for services rendered by the substitute aide. The two agencies involved shall negotiate the financial arrangements of paying the substitute aide.
- 4. Substitute aides obtained from other agencies may be used only in cases where no other arrangements can be made for recipient respite care services coverage and may be used only on a temporary basis. If a substitute aide is needed for more than two weeks, the case shall be transferred to another respite care provider agency that has the aide capability to serve recipients.
- 5. If a provider agency secures a substitute aide it is the responsibility of the provider agency having recipient care responsibility to ensure that all DMAS requirements continue to be met, including documentation of services rendered by the substitute aide and documentation that the substitute aide's qualifications meet DMAS requirements.
- D. C. Required documentation for recipients individuals' records. The provider agency shall maintain all records of each respite care recipient individual. These records shall be separated separate from those of ether nonhome and community-based care services, such as companion services or home health services. These records shall be reviewed periodically by the DMAS staff who are authorized by the agency to review these files during utilization review. At a minimum these records shall contain:
 - 1. The most recently updated Long Term Care Uniform Assessment Instrument (UAI), documentation of any inpatient hospital admissions, the Prescreening Authorization, all Respite Care Assessment and Plans of Care, and all DMAS-122s. Medicaid-Funded Long-Term Care Service Authorization form (DMAS-96), the Screening Team Service Plan for Medicaid-Funded Long-Term Care (DMAS-97), all Community-Based Care Assessment Reports (DMAS-99), all Provider Agency Plans of Care (DMAS-97A and CMS-485), and all Patient Information Forms (DMAS-122);
 - 2. All DMAS Utilization Review Forms and Plans of Care.

- 3. 2. The initial assessment by the RN supervisor a registered nurse completed prior to or on the date services are initiated.
- 4. 3. Registered nurse's notes recorded and dated during significant contacts with the respite care aide or LPN and during supervisory visits to the recipient's individual's home.
- 5. 4. All correspondence to the recipient and to individual, DMAS, and the designated preauthorization contractor.
- 6. 5. Reassessments made during the provision of services.
- 7- 6. Significant contacts made with family, physicians, DMAS, the designated preauthorization contractor, formal and informal service providers, and all professionals concerning the recipient related to the individual's Medicaid services or medical care.
- 8. 7. Respite care aide record of services rendered and recipient's responses. All Provider Aide/LPN Records (DMAS-90). The aide provider aide/LPN record shall contain:
 - a. The specific services delivered to the recipient individual by the respite care aide, or LPN, and the recipient's individual's response to this service.
 - b. The *daily* arrival and departure times of the aide *or LPN* for respite care services only.
 - c. Comments or observations recorded weekly about the recipient individual. Aide or LPN comments shall include but not be limited to observation of the recipient's individual's physical and emotional condition, daily activities, and the recipient's individual's response to services rendered.
 - d. The signature by signatures of the aide, or LPN, and the recipient individual once each week to verify that respite care services have been rendered.
 - e. Signature Signatures, times, and dates shall not be placed on the aide record prior to the last date of the week that the services are delivered. If the individual is unable to sign the aide record, it must be documented in the individual's record how or who will sign in his place. An employee of the provider shall not sign for the individual unless he is a family member or legal guardian of the individual and has direct knowledge of the care received by the individual.
- 9. 8. Copies of all aide records shall be subject to review by state and federal Medicaid representatives. All recipient progress reports.
- 10. If a respite care recipient is also receiving any other service (meals on wheels, companion, home health services, etc.), the respite care record shall indicate that these services are also being received by the recipient.

12 VAC 30-120-195. Enteral nutrition products.

- A. General requirements and conditions.
 - 1. Enteral nutrition products shall only be provided by enrolled durable medical equipment (DME) providers.

- 2. DME providers shall adhere to all applicable DMAS policies, laws, and regulations for enteral nutrition products. DME providers shall also comply with all other applicable Virginia laws and regulations requiring licensing, registration, or permitting. Failure to comply with such laws and regulations shall result in denial of coverage for enteral nutrition that is regulated by such licensing agency or agencies.
- B. Service units and service limitations.
 - 1. DME and supplies must be furnished pursuant to the AIDS Waiver Enteral Nutrition Evaluation Form (DMAS-116).
 - 2. A DMAS-116 shall be required for all AIDS waiver recipients receiving enteral nutrition products. Enteral nutrition products that do not contain a legend drug may be obtained for the individual receiving waiver services for conditions of AIDS and HIV-symptomatic when the enteral nutrition product is certified by the physician as the primary source of nutrition, is administered orally or through a nasogastric or gastrostomy tube, and is necessary for the successful implementation of the individual's health care plan and the individual is not able to purchase enteral nutrition products through other means. Coverage of enteral nutrition products does not include the provision of routine infant formula. The amount of enteral nutrition products that shall be reimbursed by Medicaid shall be limited by medical necessity and cost effectiveness.
 - 3. "Primary source" means that enteral nutrition products are medically indicated for the treatment of the individual's condition if the individual is unable to tolerate other forms of nutrition. The individual may either be unable to take any oral nutrition or the oral intake that can be tolerated is inadequate to sustain life. The focus must be on the maintenance of weight and strength commensurate with the individual's medical condition.
 - 4. The DMAS-116 shall contain a physician's order for the enteral nutrition products that are medically necessary to treat the diagnosed condition and the individual's functional limitation. The order for enteral nutrition products must be justified in the written documentation either on the DMAS-116 or attached thereto. The DMAS-116 shall be valid for a maximum period of six months. The validity of the DMAS-116 shall terminate when the individual's medical need for the prescribed enteral nutrition products either ends or when the enteral nutrition products are no longer the primary source of nutrition.
 - 5. A face-to-face nutritional assessment completed by trained clinicians (e.g., physician, physician assistant, nurse practitioner, registered nurse, or a registered dietitian) must be completed as required documentation of the need for enteral nutrition products for both the initial order and every six months. The DMAS-116 is required every six months.
 - 6. The DMAS-116 shall not be changed, altered, or amended after the physician has signed it. As indicated by the individual's condition, if changes are necessary in the ordered enteral nutrition products, the DME provider must obtain a new DMAS-116. New DMAS-116s must be signed and dated by the physician within 60 days from the time the

- ordered enteral nutrition products are furnished by the DME provider. The order cannot be back-dated to cover prior dispensing of enteral nutrition products. If the order is not signed within 60 days of the service initiation, then the date the order is signed becomes the effective date.
- 7. Preauthorization of enteral nutrition products is not required. The DME provider must assure that there is a valid DMAS-116 completed every six months in accordance with DMAS policy and on file for all Medicaid individuals for whom enteral nutrition products are provided. The DME provider is further responsible for assuring that enteral nutrition products are provided in accordance with DMAS reimbursement criteria. Upon post payment review, DMAS will deny reimbursement for any enteral nutrition products that have not been provided and billed in accordance with these regulations.
- 8. DMAS shall have the authority to determine that the DMAS-116 is valid for less than six months based on medical documentation submitted.
- C. Provider responsibilities.
 - 1. The DME provider must provide the enteral nutrition products as prescribed by the physician on the DMAS-116. Orders shall not be changed unless the DME provider obtains a new DMAS-116 prior to ordering or providing the enteral nutrition products to the individual.
 - 2. The physician's order (DMAS-116) must state that the enteral nutrition products are the primary source of nutrition for the individual and specify either a brand name of the enteral nutrition product being ordered or the category of enteral nutrition products that must be provided. If a physician orders a specific brand of enteral nutrition product, the DME provider must supply the brand prescribed. The physician order must include the daily caloric order and the route of administration for the enteral nutrition product. Supporting documentation may be attached to the DMAS-116 but the entire order must be on the DMAS-116.
 - 3. Enteral nutrition products must be furnished exactly as ordered by the physician on the DMAS-116. The DMAS-116 and any supporting verifiable documentation must be complete (signed and dated by the physician) and in the DME provider's possession within 60 days from the time the ordered enteral nutrition product is initially furnished by the DME provider.
 - 4. The DMAS-116 may be completed by the registered nurse, registered dietitian, physician, physician assistant, or nurse practitioner, but it must be signed and dated by the physician.
 - 5. The DMAS-116 must be signed and dated by the assessor and the physician within 60 days of the DMAS-116 begin service date. If the DMAS-116 is not signed and dated by the assessor and the physician within 60 days of the DMAS-116 begin service date, the DMAS-116 will not become valid until the date of the physician's signature.
 - 6. The DMAS-116 must include all of the following elements:

- a. Height (or length for pediatric patients);
- b. Weight. For initial assessments, indicate the individual's weight loss over time;
- c. Tolerance of enteral nutrition product (e.g., is the individual experiencing diarrhea, vomiting, constipation). This element is only required if the individual is already receiving enteral nutrition products;
- d. Indication of whether or not the enteral nutrition product is the primary or sole source of nutrition;
- e. Route of administration;
- f. The daily caloric order and the number of calories per package, can, etc.;
- g. Extent to which the quantity of the enteral nutrition product is available through WIC; and
- h. Title, signature, and date of the assessor and the physician.
- 7. The DME provider shall retain a copy of the DMAS-116 and all supporting verifiable documentation on file for DMAS' post payment review purposes. DME providers shall not create or revise DMAS-116s or supporting documentation for this service after the initiation of the post payment review process. Physicians shall not complete, or sign and date, DMAS-116s once the post payment review has begun.
- 8. DME providers shall retain copies of the DMAS-116 and all applicable supporting documentation on file for post payment reviews. Enteral nutrition products that are not ordered on the DMAS-116 for which reimbursement has been made by Medicaid will be denied. Supporting documentation is allowed to justify the medical need for enteral nutrition products. Supporting documentation does not replace the requirement of a properly completed DMAS-116. The dates of the supporting documentation must coincide with the dates of service on the DMAS-116 and the medical practitioner providing the supporting documentation must be identified by name and title. DME providers shall not create or revise DMAS-116s or supporting documentation for enteral nutrition products provided after the post payment review has been initiated.
- 9. To receive reimbursement, the DME provider is expected to:
 - a. Deliver only the item or items ordered by the physician and approved by DMAS or the designated preauthorization contractor;
 - b. Deliver only the quantities ordered by the physician and approved by DMAS or the designated preauthorization contractor;
 - c. Deliver only the item or items for the periods of service covered by the physician's order and approved by DMAS or the designated preauthorization contractor;
 - d. Maintain a copy of the physician's order and all verifiable supporting documentation for all DME ordered;

- e. Document all supplies provided to an individual in accordance with the physician's orders. The delivery ticket must document the individual's name and Medicaid number, the date of delivery, what was delivered, and the quantity delivered.
- 10. DMAS will deny payment to the DME provider if any of the following occur:
 - a. No presence of a current, fully completed DMAS-116 appropriately signed and dated by the physician;
 - b. Documentation does not verify that the item was provided to the individual;
 - c. Lack of medical documentation, signed by the physician to justify the enteral nutrition products; or
 - d. Item is noncovered or does not meet DMAS criteria for reimbursement.
- 11. The enteral nutrition product vendor must provide the supplies as prescribed by the physician on the DMAS-116. Orders shall not be changed unless the vendor obtains a new DMAS-116 prior to ordering or providing the enteral nutrition product to the individual.
- 12. Medicaid shall not provide reimbursement to the vendor for services provided prior to the date prescribed by the physician or prior to the date of the delivery or when services are not provided in accordance with published policies and procedures. If reimbursement is denied for one of these reasons, the DME provider may not bill the Medicaid recipient for the service that was provided.
- 13. The following criteria must be satisfied through the submission of adequate and verifiable documentation satisfactory to DMAS. Medically necessary DME and supplies shall be:
 - a. Ordered by the physician on the DMAS-116;
 - b. A reasonable and necessary part of the individual's treatment plan;
 - c. Consistent with the individual's diagnosis and medical condition, particularly the functional limitations and symptoms exhibited by the individual;
 - d. Not furnished solely for the convenience, safety, or restraint of the individual, the family, attending physician, or other practitioner or supplier;
 - e. Consistent with generally accepted professional medical standards (i.e., not experimental or investigational); and
 - f. Furnished at a safe, efficacious, and cost-effective level suitable for use in the individual's home environment.

12 VAC 30-120-200. Skilled nursing services. (Repealed.)

These requirements govern the provision of skilled nursing services.

A. General. Skilled nursing services may be offered to individuals with AIDS/ARC when such services are deemed necessary by the physician to avoid institutionalization by assessment and monitoring of the medical condition, providing

interventions, and communicating with the physician regarding changes in the patient's status. The hours of private duty nursing shall be limited by medical necessity and cost effectiveness.

- B. Special provider participation conditions. To be approved for skilled nursing contracts with DMAS, the skilled nursing provider shall:
 - 1. Be a home health agency certified by the Virginia Department of Health for Medicaid participation, with which DMAS has a contract for private duty nursing.
 - 2. Demonstrate a prior successful health care delivery.
 - 3. Operate from a business office.
 - 4. Employ or subcontract with and directly supervise a registered nurse (RN) or a licensed practical nurse with a current and valid license issued by the Virginia State Board of Nursing.
- The RN shall be currently licensed to practice in the Commonwealth and have at least two years of related clinical nursing experience which may include work in an acute care hospital, public health clinic, home health agency, or nursing home.

12 VAC 30-120-201. Private duty nursing services.

- A. General. Private duty nursing services shall be offered to individuals enrolled in the HIV/AIDS waiver when such services are deemed necessary by the attending physician to avoid institutionalization by assessing and monitoring the medical condition, providing interventions, and communicating with the physician regarding changes in the individual's status. The hours of private duty nursing shall be limited by medical necessity. The purpose of private duty nursing is to provide for ongoing monitoring, continued nursing supervision, and skilled care. This service should not be authorized when intermittent skilled nursing visits could be utilized. Private duty nursing services should not be provided simultaneously with LPN respite care.
- B. Special provider participation conditions. To be approved for private duty nursing contracts with DMAS, the private duty nursing provider shall:
 - 1. Be a home health agency licensed or certified by the Virginia Department of Health for Medicaid participation and with which DMAS has a signed participation agreement for private duty nursing services.
 - 2. Demonstrate prior successful health care delivery.
 - 3. Operate from a business office.
 - 4. Employ (or subcontract with) and directly supervise a registered nurse or a licensed practical nurse.
 - a. The registered nurse shall be currently licensed to practice in the Commonwealth and have at least two years of related clinical nursing experience, which may include work in an acute care hospital, public health clinic, home health agency, rehabilitation hospital, nursing facility, or as an LPN.

b. The LPN shall be currently licensed to practice in the Commonwealth.

C. Limits to services.

- 1. Private duty nursing shall be reimbursed for a maximum of 16 hours within a 24-hour period per household.
- 2. In no instance shall the designated preauthorization contractor approve an ongoing plan of care or ongoing multiple plans of care per household that result in approval of more than 16 hours of private duty nursing in a 24-hour period per household.
- 3. Congregate private duty nursing. When two waiver individuals share a residence, there shall be a maximum ratio of one private duty nurse to two waiver individuals. When three or more waiver individuals share a residence, ratios will be determined by the combined needs of the individuals.

D. Provider reimbursement.

- 1. All private duty nursing services shall be reimbursed at an hourly rate determined by DMAS.
- 2. If the AIDS Waiver individual needs skilled nursing and has another payer (Medicare or private insurance), the skilled nursing must be covered by the other payer or payers first. Whatever skilled nursing services are not covered under the primary insurance, Medicaid may cover. There shall be no duplication of nursing services with other payers or other Medicaid State Plan services.
- 3. RN/LPN shall not practice without signed physician orders specifically identifying skilled tasks to be performed for the individual.
- 4. The registered nurse shall review the medications and treatments rendered by the LPN every 60 days and verify the physician's orders.
- E. Assessment and plan of care requirements.
 - 1. The case manager shall be responsible for ensuring that the assessment, care planning, monitoring, and review activities required by DMAS are accomplished and documented, consistent with DMAS requirements.
 - 2. Development of the plan of care.
 - a. Upon completion of the required assessments and a determination that the individual needs substantial and ongoing skilled nursing care, the hours of nursing service required shall be developed and approved by the designated preauthorization contractor.
 - b. At a minimum, the plan of care shall include:
 - (1) Identification of the type, frequency, and amount of nursing care needed. This shall include the name of the provider agency, whether the nurse is an RN or LPN, and verification that the nurse is licensed to practice in the Commonwealth.
 - (2) Identification of the type, frequency, and amount of care that the family or other informal caregivers shall provide.

- F. Individual selection of waiver services.
 - 1. The case manager shall give the legally competent individual, or the individual's legal guardian, or the parent of a minor child, the choice of waiver services or institutionalization. This choice must be documented.
 - 2. If waiver services are chosen, the individual applicant or his legally responsible entity will also be given the opportunity to choose the providers of services if more than one provider is available to render the services. This choice must also be documented. If more than one waiver individual will reside in the home, one waiver provider shall be chosen to provide all private duty nursing services for all waiver individuals in the home. Only one nurse will be authorized to care for every two waiver individuals in a residence. In the instance when more than two waiver individuals share a residence, nursing ratios will be determined by the designated preauthorization contractor based on the needs of all the individual living together.
 - 3. The designated preauthorization contractor or DMAS shall review and approve the assessment and plan of care prior to the individual's admission to community waiver services, and prior to Medicaid payment for any services related to the waiver plan of care.
- G. Reevaluation requirements and utilization review.
 - 1. The need for reevaluations shall be determined by the case manager, registered nurse, DMAS, or the designated preauthorization contractor. Reevaluations shall be conducted by these professionals as required by the individual's needs and situation and at any time when a change in the individual's condition indicates the need for reevaluation.
 - 2. Utilization review shall be conducted by DMAS on all providers to ensure consumer satisfaction, the adherence to state and federal provider qualifications, and documentation requirements. DMAS will also ensure the appropriate billing practices for waiver services.
- H. Registered nurse supervisory duties.
 - 1. The registered nurse shall make, at a minimum, a visit every 30 days to the individual's home to assess the individual's/caregiver's satisfaction with the services being provided.
 - 2. The registered nurse shall review medications and treatments rendered by the private duty nurse every 60 days and verify orders with the physician signature.
 - 3. The registered nurse shall review all discharge orders written upon the individual's discharge from the hospital and provide a copy of such orders to the private duty nurse rendering care to the individual in his home.
 - a. The RN shall make an initial assessment visit prior to the start of care for any individual admitted to private duty nursing.
 - b. During visits to the individual's home, the registered nurse shall observe, evaluate, and document the adequacy and appropriateness of private duty nursing services with regard to the individual's current functioning

- status, medical, and social needs. The individual's or family's satisfaction with the type and amount of service must be discussed. The registered nurse shall document in a summary note:
 - (1) Whether private duty nursing services continue to be appropriate;
 - (2) Whether the plan of care is adequate to meet the individual's needs or if changes need to be made to the plan of care:
 - (3) The individual's satisfaction with the service;
 - (4) Any hospitalization or change in the medical condition or functioning status of the individual; and
 - (5) Other services received and their amount.
- I. Required documentation for individuals' records. The provider agency shall maintain all records of each individual receiving private duty nursing. These records shall be separate from those of other nonhome and community-based care services, such as companion or home health services. These records shall be reviewed periodically by the DMAS staff who are authorized by DMAS to review these files during utilization review. At a minimum, the record shall contain:
 - 1. The most recently updated Long-Term Care Uniform Assessment Instrument (UAI), documentation of any inpatient hospital admissions, the Medicaid-Funded Long-Term Care Service Authorization Form (DMAS-96), the Screening Team Service Plan for Medicaid-Funded Long-Term Care (DMAS-97), all Home Health Certification and Plans of Care (CMS-485), Skills Checklist for Private Duty Nursing (DMAS-259), all Patient Information Forms (DMAS-122) and all signed physician's orders.
 - 2. The initial assessment by the registered nurse completed prior to or on the date services were initiated.
 - 3. Registered nurses' notes recorded and dated during visits to the individual's home. The registered nurses' notes shall contain:
 - a. The specific services delivered to the individual and the individual's response;
 - Comments or observations about the individual.
 Comments shall include but not be limited to observation of the individual's physical and emotional condition, daily activities, and the individual's response to the services rendered;
 - c. The signature by the registered nurse or the licensed practical nurse and the individual at least once a week to verify that private duty nursing services have been rendered. This record must be maintained in the individual's record.
 - 4. All correspondence to the individual, DMAS, and the designated preauthorization contractor.
 - 5. Reassessments made during the provision of services.
 - 6. Significant contacts made with family, physicians, DMAS, the designated preauthorization contractor, formal

and informal service providers and all professionals related to the individual's Medicaid services or medical care.

Copies of all nurses' records shall be subject to review by state and federal Medicaid representatives.

If an individual who is receiving private duty nursing is also receiving any other service (meals on wheels, companion, home health services, etc.), the nurse record shall indicate that these services are also being received by the individual.

There should be no duplication of nursing services with other Medicaid State Plan services or payors.

NOTICE: The forms used in administering 12 VAC 30-120, Waivered Services, are not being published; however, the name of each form is listed below. The forms are available for public inspection at the Department of Medical Assistance Services, 600 East Broad Street, Suite 1300, Richmond, Virginia, or at the office of the Registrar of Regulations, General Assembly Building, 2nd Floor, Richmond, Virginia.

FORMS

Virginia Uniform Assessment Instrument (UAI) (1994).

Medicaid Funded Long-Term Care Service Authorization Form, DMAS-96 (rev. 8/97).

Service Coordinator Plan of Care, DMAS-97B (rev. 6/97).

Patient Information, DMAS-122 (rev. 12/98).

Level of Care Eligibility Review Instrument, DMAS-99C (rev. 12/02).

Questionnaire: Assessing a Recipient's Ability to Independently Manage Personal Attendant Services (2/98).

Questionnaire to Assess an Applicant's Ability to Independently Manage Personal Attendant Services in the CD-PAS Waiver or DD Waiver, DMAS-95 Addendum (eff. 8/00).

DD Waiver Enrollment Request, DMAS-453 (eff. 1/01).

DD Waiver Consumer Service Plan, DMAS-456 (eff. 1/01).

DD Medicaid Waiver--Level of Functioning Survey--Summary Sheet, DMAS-458 (eff. 1/01).

Documentation of Recipient Choice between Institutional Care or Home and Community-Based Services (eff. 8/00).

Consent to Exchange Information, DMAS-20 (rev. 4/03).

Provider Aide/LPN Record Personal/Respite Care, DMAS-90 (rev. 12/02).

Personal Assistant/Companion Timesheet, DMAS-91 (rev. 8/03).

Questionnaire to Assess an Applicant's Ability to Independently Manage Personal Attendant Services in the CD-PAS Waiver or DD Waiver, DMAS-95 Addendum (eff. 8/00).

Medicaid Funded Long-Term Care Service Authorization Form, DMAS-96 (rev. 3/03).

Screening Team Plan of Care for Medicaid-Funded Long Term Care, DMAS-97 (rev. 12/02).

Provider Agency Plan of Care, DMAS-97A (rev. 9/02).

Consumer Directed Services Plan of Care, DMAS-97B (rev. 1/98).

Community-Based Care Recipient Assessment Report, DMAS-99 (rev. 4/03).

Consumer-Directed Personal Attendant Services Recipient Assessment Report, DMAS-99B (rev. 8/03).

AIDS Waiver Evaluation Form for Enteral Nutrition, DMAS-116 (6/03).

Patient Information Form, DMAS-122 (rev. 12/98).

Technology Assisted Waiver/EPSDT Nursing Services Provider Skills Checklist for Individuals Caring for Tracheostomized and/or Ventilator Assisted Children and Adults, DMAS-259.

Home Health Certification and Plan of Care, CMS-485 (rev. 2/94).

VA.R. Doc. No. R03-157; Filed September 10, 2003, 11:08 a.m.

FINAL REGULATIONS

For information concerning Final Regulations, see Information Page.

Symbol Key

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

TITLE 9. ENVIRONMENT

VIRGINIA WASTE MANAGEMENT BOARD

REGISTRAR'S NOTICE: The following regulatory action is exempt from the Administrative Process Act in accordance with § 2.2-4006 A 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 Virginia Waste Management Board will receive, consider and respond to petitions by any interested person at any time with respect to reconsideration or revision.

<u>Title of Regulation:</u> 9 VAC 20-60. Hazardous Waste Regulations (amending 9 VAC 20-60-18).

Statutory Authority: §§ 10.1-1402 and 10.1-1426) of the Code of Virginia; 42 USC § 6921 and 40 CFR Part 260 through 40 CFR Part 272.

Effective Date: November 5, 2003.

Agency Contact: Robert G. Wickline, Department of Environmental Quality, P.O. Box 10009, Richmond, VA 23240, telephone (804) 698-4213, FAX (804) 698-4327 or email rgwickline@deq.state.va.us.

Summary:

These regulations include requirements in the form of incorporated federal regulatory text at Title 40 of the Code of Federal Regulations. The federal regulatory text as it existed July 1, 2002, was specified as that incorporated.

Immediate Final Rule 2003 addresses only 9 VAC 20-60-18, the section making the specification of the date of incorporated text. This section is amended by changing the new date of reference of all incorporated federal regulatory text to July 1, 2003. The effective date of the incorporated text will be the effective date as published in the Federal Register notice or the effective date of this amendment, whichever is later.

9 VAC 20-60-18. Applicability of incorporated references based on the dates on which they became effective.

Except as noted, when a regulation of the United States Environmental Protection Agency set forth in Title 40 of the Code of Federal Regulations is adopted herein and incorporated by reference, that regulation shall be as it exists and has been published as a final regulation in the Federal Register prior to July 1, 2002 July 1, 2003, with the effective date as published in the Federal Register notice or March 26, 2003, whichever is later.

VA.R. Doc. No. R04-8; Filed September 12, 2003, 8:38 a.m.

TITLE 10. FINANCE AND FINANCIAL INSTITUTIONS

STATE CORPORATION COMMISSION

<u>REGISTRAR'S NOTICE:</u> The State Corporation Commission is exempt from the Administrative Process Act in accordance with § 2.2-4002 A 2 of the Code of Virginia, which exempts courts, any agency of the Supreme Court, and any agency that by the Constitution is expressly granted any of the powers of a court of record.

<u>Title of Regulation:</u> 10 VAC 5-200. Payday Lending (adding 10 VAC 5-200-90).

Statutory Authority: §§ 6.1-457 and 12.1-13 of the Code of Virginia.

Effective Date: September 11, 2003.

Agency Contact: Gerald Fallen, Assistant Commissioner, State Corporation Commission, Bureau of Financial Institutions, P.O. Box 640, Richmond, VA 23218, telephone (804) 371-9699, FAX (804) 371-9416, or e-mail gfallen@scc.state.va.us.

Summary:

This regulation establishes the schedule for computing the annual fee to be paid by licensed payday lenders in accordance with § 6.1-457 of the Code of Virginia.

AT RICHMOND, SEPTEMBER 11, 2003

COMMONWEALTH OF VIRGINIA, ex rel.

STATE CORPORATION COMMISSION

CASE NO. BFI-2003-00047

Ex Parte: In re annual fees for licensed payday lenders

ORDER ADOPTING A REGULATION

By Order herein dated August 6, 2003, the State Corporation Commission ("Commission") directed that notice be given of a proposed regulation numbered 10 VAC 5-200-90 entitled "Schedule of Annual Fees for the Examination, Supervision, and Regulation of Payday Lenders." Notice of the proposed regulation was published in the <u>Virginia Register</u> on August 25, 2003, and was also given to all licensees under Chapter 18 of Title 6.1 of the Code of Virginia. Interested parties were afforded an opportunity to comment on the proposal, and written comments were filed with the Clerk of the Commission by and on behalf of certain payday lender licensees.

The proposed regulation sets an annual fee schedule for licensed payday lenders based upon short-year data presently available to the Commission. Having considered the Staff proposal and written comments received in this case, the Commission concludes that the proposed regulation fulfills the purposes of § 6.1-457 of the Code of Virginia. Accordingly, the Commission is of the opinion that the regulation, with certain technical corrections suggested by the Registrar of Regulations and a technical amendment to the text of the regulation as published in the <u>Virginia</u> <u>Register</u>, should be adopted.

THEREFORE. IT IS ORDERED THAT:

- (1) Amended regulation 10 VAC 5-200-90 attached hereto is adopted effective immediately.
- (2) Inasmuch as the fee schedule is based upon partial-year data reported by licensees for calendar year 2002, the Staff is directed to reexamine all relevant factors when calendar year 2003 data is available and make a report to the Commission so that it can be determined if a modification of the fee schedule is warranted.
- (3) Copies of the amended regulation shall be sent by the Bureau of Financial Institutions to all licensees and current applicants for licenses under Chapter 18 of Title 6.1 of the Code of Virginia.
- (4) The amended regulation shall be posted on the Commission's website at http://www.state.va.us/scc/caseinfo.htm.

AN ATTESTED COPY hereof, together with a copy of the amended regulation, shall be sent to the Registrar of Regulations for publication in the <u>Virginia Register</u>; and to the Commissioner of Financial Institutions.

10 VAC 5-200-90. Schedule of annual fees for the examination, supervision, and regulation of payday lenders.

Pursuant to § 6.1-457 of the Code of Virginia, the commission sets the following schedule of annual fees to be paid by payday lenders required to be licensed under Chapter 18 (§ 6.1-444 et seq.) of Title 6.1 of the Code of Virginia. Such fees are to defray the costs of examination, supervision and regulation of such lenders by the Bureau of Financial Institutions. The fees are related to the actual costs of the bureau, to the number of offices operated by the lenders, to the volume of business of the lenders, and to other factors relating to their supervision and regulation.

The annual fee shall be \$300 per office, authorized and opened, as of December 31, plus \$.18 per payday loan made [as of December 31].

The annual fee for each payday lender shall be computed on the basis of the number of offices operated as of December 31, and the number of payday loans as defined in § 6.1-444 of the Code of Virginia made during the calendar year preceding the vear of assessment.

Fees shall be assessed on or before September 15 for the current calendar year. By law the fee must be paid on or before October 15.

The annual report, due March 25 each year, of each licensee provides the basis for its assessment, i.e., the number of offices and payday loans made. In cases where a license has been granted between January 1 and September 15 of the year of assessment, the licensee shall pay \$150 per office, authorized and opened, as of September 15 of that year.

Fees prescribed and assessed by this schedule are apart from, and do not include, the reimbursement for expenses permitted by subsection B of § 6.1-457 of the Code of Virginia.

VA.R. Doc. No. R03-316; Filed September 11, 2003, 2:31 p.m.

TITLE 12. HEALTH

STATE BOARD OF HEALTH

REGISTRAR'S NOTICE: The State Board of Health has claimed an exemption from the Administrative Process Act in accordance with § 2.2-4006 A 4 a of the Code of Virginia, which excludes regulations that are necessary to conform to changes in Virginia statutory law or the appropriation act where no agency discretion is involved. The State Board of Health will receive, consider and respond to petitions by any interested person at any time with respect to reconsideration or revision.

<u>Title of Regulation:</u> 12 VAC 5-220. Virginia Medical Care Facilities Certificate of Public Need Rules and Regulations (amending 12 VAC 5-220-200).

Statutory Authority: §§ 32.1-12 and 32.1.102.2 of the Code of Virginia.

Effective Date: November 5, 2003.

Agency Contact: Carrie Eddy, Senior Policy Analyst, Center for Quality Health Care Services, Department of Health, 3600 West Broad Street, Suite 216, Richmond, VA 23230, telephone (804) 367-2157, FAX (804) 367-2149 or e-mail ceddy@vdh.state.va.us.

Summary:

The amendments allow radiation therapy, computed tomographic (CT) scanning, magnetic resonance imaging (MRI), positron emission tomographic (PET) scanning, and nuclear medicine imaging projects to all be reviewed in the same Certificate of Public Need (COPN) batch review cycle. The amendment also allows single application filing for the combination radiation therapy, computed tomography (CT) scanning, magnetic resonance imaging (MRI), positron emission tomographic (PET) scanning and nuclear medicine imaging projects. This action assures the COPN regulation is in compliance with Chapters 61 and 72 of the 2003 Acts of Assembly, which became effective July 1, 2003.

12 VAC 5-220-200. One hundred ninety-day review cycle.

The department shall review the following groups of completed applications in accordance with the following 190-day scheduled review cycles and the following descriptions of

projects within each group, except as provided for in 12 VAC 5-220-220.

BATCH GROUP	GENERAL DESCRIPTION	REVIEW CYCLE Begins Ends	
A	General Hospitals/ Obstetrical Services/ Neonatal Special Care Services	Feb. 10 Aug. 10	Aug. 18 Feb. 16
В	Open Heart Surgery/Cardiac Catheterization/ Ambulatory Surgery Centers/ Operating Room Additions/ Transplant Services	Mar. 10 Sep. 10	Sep. 16 Mar. 19
С	Psychiatric Facilities/ Substance Abuse Treatment/ Mental Retardation Facilities	Apr. 10 Oct. 10	Oct. 17 Apr. 18
Đ-D/F	Diagnostic Imaging Facilities/Services Selected Therapeutic Facilities/Services	May 10 Nov. 10	Nov. 16 May 19
E	Medical Rehabilitation Beds/Services	June 10 Dec. 10	Dec. 17 Jun. 18
₽-D/F	Selected Therapeutic Facilities/ Services Diagnostic Imaging Facilities/Services	July 10 Jan. 10	Jan. 16 Jul. 18
G	Nursing Home Beds at Retirement Communities/ Bed Relocations/ Miscellaneous Expenditures by Nursing Homes	Jan. 10 Mar. 10 May 10 July 10 Sep. 10 Nov. 10	Jul. 18 Sep. 16 Nov. 16 Jan. 16 Mar. 19 May 19

Batch Group A includes:

- 1. The establishment of a general hospital.
- 2. An increase in the total number of general acute care beds in an existing or authorized general hospital.
- 3. The relocation at the same site of 10 general hospital beds or 10% of the general hospital beds of a medical care facility, whichever is less, from one existing physical facility to another in any two-year period if such relocation involves a capital expenditure of \$5 million or more (see 12 VAC 5-220-280).
- 4. The introduction into an existing medical care facility of any new neonatal special care or obstetrical services that the facility has not provided in the previous 12 months.
- 5. Any capital expenditure of \$5 million or more, not defined as a project category included in Batch Groups B through G, by or in behalf of a general hospital.

Batch Group B includes:

- 1. The establishment of a specialized center, clinic, or portion of a physician's office
- developed for the provision of outpatient or ambulatory surgery or cardiac catheterization services.
- 2. An increase in the total number of operating rooms in an existing medical care facility or establishment of operating rooms in a new facility.
- 3. The introduction into an existing medical care facility of any new cardiac catheterization, open heart surgery, or organ or tissue transplant services that the facility has not provided in the previous 12 months.
- 4. The addition by an existing medical care facility of any medical equipment for the provision of cardiac catheterization.
- 5. Any capital expenditure of \$5 million or more, not defined as a project category in Batch Group A or Batch Groups C through G, by or in behalf of a specialized center, clinic, or portion of a physician's office developed for the provision of outpatient or ambulatory surgery or cardiac catheterization services.
- 6. Any capital expenditure of \$5 million or more, not defined as a project category in Batch Group A or Batch Groups C through G, by or in behalf of a medical care facility, that is primarily related to the provision of surgery, cardiac catheterization, open heart surgery, or organ or tissue transplant services.

Batch Group C includes:

- 1. The establishment of a mental hospital, psychiatric hospital, intermediate care facility established primarily for the medical, psychiatric or psychological treatment and rehabilitation of alcoholics or drug addicts, or mental retardation facility.
- 2. An increase in the total number of beds in an existing or authorized mental hospital, psychiatric hospital, intermediate care facility established primarily for the medical, psychiatric or psychological treatment and rehabilitation of alcoholics or drug addicts, or mental retardation facility.
- 3. An increase in the total number of mental hospital, psychiatric hospital, substance abuse treatment and rehabilitation, or mental retardation beds in an existing or authorized medical care facility which is not a dedicated mental hospital, psychiatric hospital, intermediate care facility established primarily for the medical, psychiatric or psychological treatment and rehabilitation of alcoholics or drug addicts, or mental retardation facility.
- 4. The relocation at the same site of 10 mental hospital, psychiatric hospital, substance abuse treatment and rehabilitation, or mental retardation beds or 10% of the mental hospital, psychiatric hospital, substance abuse treatment and rehabilitation, or mental retardation beds of a medical care facility, whichever is less, from one existing physical facility to another in any two-year period if such

relocation involves a capital expenditure of \$5 million or more (see 12 VAC 5-220-280).

- 5. The introduction into an existing medical care facility of any new psychiatric or substance abuse treatment service that the facility has not provided in the previous 12 months.
- 6. Any capital expenditure of \$5 million or more, not defined as a project category in Batch Groups A and B or Batch Groups D/F through G, by or in behalf of a mental hospital, psychiatric hospital, intermediate care facility established primarily for the medical, psychiatric or psychological treatment and rehabilitation of alcoholics or drug addicts, or mental retardation facilities.
- 7. Any capital expenditure of \$5 million or more, not defined as a project category in Batch Groups A through B or Batch Groups D/F through G, by or in behalf of a medical care facility, which is primarily related to the provision of mental health, psychiatric, substance abuse treatment or rehabilitation, or mental retardation services.

Batch Group ₽ D/F includes:

- 1. The establishment of a specialized center, clinic, or that portion of a physician's office developed for the provision of computed tomographic (CT) scanning, magnetic resonance imaging (MRI), magnetic source imaging (MSI), positron emission tomographic (PET) scanning, or nuclear medicine imaging, except for the purpose of nuclear cardiac imaging.
- 2. The introduction into an existing medical care facility of any new computed tomography (CT), magnetic resonance imaging (MRI), magnetic source imaging (MSI), positron emission tomographic (PET) scanning, or nuclear medicine imaging services, except for the purpose of nuclear cardiac imaging that the facility has not provided in the previous 12 months.
- 3. The addition by an existing medical care facility of any equipment for the provision of computed tomography (CT), magnetic resonance imaging (MRI), magnetic source imaging (MSI), positron emission tomographic (PET) scanning.
- 4. Any capital expenditure of \$5 million or more, not defined as a project category in Batch Groups A through C or Batch Groups E through B, C, E, and G, by or in behalf of a specialized center, clinic, or that portion of a physician's office developed for the provision of computed tomographic (CT) scanning, magnetic resonance imaging (MRI), magnetic source imaging (MSI), positron emission tomographic (PET) scanning, or nuclear medicine imaging, except that portion of a physician's office dedicated to providing nuclear cardiac imaging.
- 5. Any capital expenditure of \$5 million or more, not defined as a project category in Batch Groups A through C or Batch Groups E through B, C, E, and G, by or in behalf of a medical care facility, which is primarily related to the provision of computed tomographic (CT) scanning, magnetic resonance imaging (MRI), magnetic source imaging (MSI), positron emission tomographic (PET) scanning, or nuclear medicine imaging, except for the purpose of nuclear cardiac imaging.

Batch Group E includes:

- 1. The establishment of a medical rehabilitation hospital.
- 2. An increase in the total number of beds in an existing or authorized medical rehabilitation hospital.
- 3. An increase in the total number of medical rehabilitation beds in an existing or authorized medical care facility that is not a dedicated medical rehabilitation hospital.
- 4. The relocation at the same site of 10 medical rehabilitation beds or 10% of the medical rehabilitation beds of a medical care facility, whichever is less, from one existing physical facility to another in any two-year period, if such relocation involves a capital expenditure of \$5 million or more (see 12 VAC 220-280).
- 5. The introduction into an existing medical care facility of any new medical rehabilitation service that the facility has not provided in the previous 12 months.
- 6. Any capital expenditure of \$5 million or more, not defined as a project category in Batch Groups A through D or Batch Groups F through B, C, D/F, and G, by or in behalf of a medical rehabilitation hospital.
- 7. Any capital expenditure of \$5 million or more, not defined as a project category in Batch Groups A through D or Batch Groups F through B, C, D/F, and G, by or in behalf of a medical care facility, that is primarily related to the provision of medical rehabilitation services.

Batch Group *₹ D/F* includes:

- 1. The establishment of a specialized center, clinic, or that portion of a physician's office developed for the provision of gamma knife surgery, lithotripsy, or radiation therapy.
- 2. Introduction into an existing medical care facility of any new gamma knife surgery, lithotripsy, or radiation therapy services that the facility has not provided in the previous 12 months.
- 3. The addition by an existing medical care facility of any medical equipment for the provision of gamma knife surgery, lithotripsy, or radiation therapy.
- 4. Any capital expenditure of \$5 million or more, not defined as a project in Batch Groups A through E or Batch Group B, C, E, and G, by or in behalf of a specialized center, clinic, or that portion of a physician's office developed for the provision of gamma knife surgery, lithotripsy, or radiation therapy.
- 5. Any capital expenditure of \$5 million or more, not defined as a project in Batch Groups A through E or Batch Group B, C, E, and G, by or in behalf of a medical care facility, which is primarily related to the provision of gamma knife surgery, lithotripsy, or radiation therapy.

Batch Group G includes:

1. The establishment of a nursing home, intermediate care facility, or extended care facility of a continuing care retirement community by a continuing care provider registered with the State Corporation Commission pursuant

to Chapter 49 (§ 38.2-4900 et seq.) of Title 38.2 of the Code of Virginia.

- The establishment of a nursing home, intermediate care facility, or extended care facility that does not involve an increase in the number of nursing home facility beds within a planning district.
- 3. An increase in the total number of beds in an existing or authorized nursing home, intermediate care facility, or extended care facility of a continuing care retirement community by a continuing care provider registered with the State Corporation Commission pursuant to Chapter 49 § 38.2-4900 et seq.) of Title 38.2 of the Code of Virginia.
- 4. An increase in the total number of beds in an existing or authorized nursing home, intermediate care facility, or extended care facility that does not involve an increase in the number of nursing home facility beds within a planning district.
- 5. The relocation at the same site of 10 nursing home, intermediate care facility, or extended care facility beds or 10% of the nursing home, intermediate care facility, or extended care facility beds of a medical care facility, whichever is less, from one physical facility to another in any two-year period, if such relocation involves a capital expenditure of \$5 million or more (see 12 VAC 5-220-280).
- 6. Any capital expenditure of \$5 million or more, not defined as a project category in Batch Groups A through ₩ D/F, by or in behalf of a nursing home, intermediate care facility, or extended care facility, which does not increase the total number of beds of the facility.
- 7. Any capital expenditure of \$5 million or more, not defined as a project category in Batch Groups A through $\not\in D/F$, by or in behalf of a medical care facility, that is primarily related to the provision of nursing home, intermediate care, or extended care services, and does not increase the number of beds of the facility.

VA.R. Doc. No. R04-10; Filed September 16, 2003, 11:28 a.m.

DEPARTMENT OF MEDICAL ASSISTANCE SERVICES

<u>Title of Regulation:</u> 12 VAC 30-80. Methods and Standards for Establishing Payment Rates - Other Types of Care: Reimbursement for Pharmacy Services (amending 12 VAC 30-80-40).

Statutory Authority: §§ 32.1-324 and 32.1-325 of the Code of Virginia.

Effective Date: November 6, 2003.

Agency Contact: Victoria P. Simmons, Regulatory Coordinator, Department of Medical Assistance Services, Policy Division, 600 East Broad Street, Suite 1300, Richmond, VA 23219, telephone (804) 786-7959, FAX (804) 786-1680, e-mail bmccormi@dmas.state.va.us.

<u>Summary of Public Comment and Agency's Response:</u> No public comments were received by the promulgating agency.

Summary:

The amendments address two items regarding reimbursement for pharmacy services in Medicaid. The amendments conform, for Medicaid reimbursement purposes, the definition of "unit dose dispensing system" to the definition employed by the Board of Pharmacy and change the reimbursement rate for the service of "unit dose dispensing" to a per capita monthly fee.

12 VAC 30-80-40. Fee-for-service providers: pharmacy.

Payment for pharmacy services shall be the lowest of items 1 through 5 (except that items 1 and 2 will not apply when prescriptions are certified as brand necessary by the prescribing physician in accordance with the procedures set forth in 42 CFR 447.331 (c) if the brand cost is greater than the Centers for Medicare and Medicaid Services (CMS) upper limit ef or VMAC cost) subject to the conditions, where applicable, set forth in subdivisions 6 and 7 of this section:

- 1. The upper limit established by the CMS for multiple source drugs pursuant to 42 CFR 447.331 and 447.332, as determined by the CMS Upper Limit List plus a dispensing fee. If the agency provides payment for any drugs on the HCFA Upper Limit List, the payment shall be subject to the aggregate upper limit payment test.
- 2. The Virginia Medicaid Maximum Allowable Cost (VMAC) established by the Virginia Department of Medical Assistance Services to be inclusive of appropriate multiple source and specific high cost drugs plus a dispensing fee. Multiple source drugs may include but are not limited to Food and Drug Administration-rated products such as drugs established by a Virginia Voluntary Formulary (VVF) drugs, Federal Upper Limit Drugs and any other state or federally approved listing. "Multisource drugs" means covered outpatient drugs for which there are two or more drug products that:
 - a. Are included in the Centers for Medicare and Medicaid Services' state drug rebate program;
 - b. Have been approved by the Federal Food and Drug Administration (FDA);
 - c. Are included in the Approved Products with Therapeutic Equivalence Evaluations as generically equivalent; and
 - d. Are sold or marketed in Virginia.
- 3. The Estimated Acquisition Cost (EAC) which shall be based on the published Average Wholesale Price (AWP) minus a percentage discount established by the General Assembly (as set forth in subdivision 8 of this section) or, in the absence thereof, by the following methodology set out in subdivisions a through c below.
 - a. Percentage discount shall be determined by a statewide survey of providers' acquisition cost.
 - b. The survey shall reflect statistical analysis of actual provider purchase invoices.
 - c. The agency will conduct surveys at intervals deemed necessary by DMAS.

- 4. (Reserved.)
- 5. The provider's usual and customary charge to the public, as identified by the claim charge.
- 6. Payment for pharmacy services will be as described above; however, payment for legend drugs will include the allowed cost of the drug plus only one dispensing fee per month for each specific drug. Exceptions to the monthly dispensing fees shall be allowed for drugs determined by the department to have unique dispensing requirements. The dispensing fee of \$3.75 (effective July 1, 2003) shall remain in effect.
- 7. The Program pays additional reimbursement for the 24-hour unit dose delivery dispensing system of dispensing drugs. DMAS defines its unit dose dispensing system coverage consistent with that of the Board of Pharmacy of the Department of Health Professions (18 VAC 110-20-420). This service is paid only for patients residing in nursing facilities. Reimbursements are based on the allowed payments described above plus the unit dose add-on per capita fee and an allowance for the cost of unit dose packaging established by the state agency to be submitted by the pharmacy for unit dose dispensing services to a nursing home resident. Only one service fee per month may be submitted by the pharmacy for each patient receiving unit dose dispensing services. The maximum allowed drug cost for specific multiple source drugs will be the lesser of: either the VMAC, based on the 60th percentile or maximum cost level, as identified by the state agency or CMS' upper limits as applicable. All other drugs will be reimbursed at drug costs not to exceed the estimated acquisition cost determined by the state agency. The original per capita fee shall be determined by a DMAS analysis of costs related to such dispensing, and shall be reevaluated at periodic intervals for appropriate adjustment.
- 8. Determination of EAC was the result of a report by the Office of the Inspector General that focused on appropriate Medicaid marketplace pricing of pharmaceuticals based on the documented costs to the pharmacy. An EAC of AWP minus 10.25% shall become effective July 1, 2002.

The dispensing fee of \$3.75 (effective July 1, 2003) shall remain in effect, creating a payment methodology based on the previous algorithm (least of 1 through 5 of this subsection above) plus a dispensing fee where applicable.

9. Home infusion therapy.

- a. The following therapy categories shall have a pharmacy service day rate payment allowable: hydration therapy, chemotherapy, pain management therapy, drug therapy, total parenteral nutrition (TPN). The service day rate payment for the pharmacy component shall apply to the basic components and services intrinsic to the therapy category. Submission of claims for the per diem rate shall be accomplished by use of the HCFA 1500 claim form.
- b. The cost of the active ingredient or ingredients for chemotherapy, pain management and drug therapies shall be submitted as a separate claim through the pharmacy program, using standard pharmacy format.

Payment for this component shall be consistent with the current reimbursement for pharmacy services. Multiple applications of the same therapy shall be reimbursed one service day rate for the pharmacy services. Multiple applications of different therapies shall be reimbursed at 100% of standard pharmacy reimbursement for each active ingredient.

VA.R. Doc. No. R03-51; Filed September 10, 2003, 11:07 a.m.

TITLE 13. HOUSING

BOARD OF HOUSING AND COMMUNITY DEVELOPMENT

Notice of Suspension of Regulatory Process

<u>Title of Regulation:</u> 13 VAC 5-62. Virginia Uniform Statewide Building Code (suspending subsections L, M and N of 13 VAC 5-62-260).

Notice is hereby given in accordance with § 2.2-4007 K of the Code of Virginia that the Board of Housing and Community Development is suspending the effective date of subsections L, M and N of 13 VAC 5-62-260 and is seeking comments on the substantial changes from the proposed regulation to the final regulation in those provisions. The final regulation was published in the Virginia Register of Regulations in 19:25 VA.R. 3824-3825 August 25, 2003. The full text of the final regulation is available for viewing online at http://legis.state.va.us/codecomm/register/vol19/iss25/f13v562full.doc.

The effective date of the above-referenced subsections shall be delayed until the board considers public comment. The suspension will not impact other provisions of the adopted Uniform Statewide Building Code (USBC) published August 25, 2003, that will become effective on October 1, 2003.

The Board of Housing and Community Development will receive public comments until November 6, 2003. There will be no additional formal public hearing and all public comments should be sent to the agency contact person identified at the end of this notice.

Impact of Suspension: The USBC incorporates by reference the 2000 International Residential Code (IRC) as the nationally recognized model building code for residential construction. The IRC requires a minimum three-foot fire separation distance between the exterior wall of a residential building and any property line. The substantial changes from the proposed USBC to the final USBC were to increase that fire separation distance from three feet to five feet. The effect of the suspension of the above subsections in this action reinstates the three-foot fire separation distance through the use of the IRC without changes.

Agency Contact: Steven W. Calhoun, Regulatory Coordinator, Department of Housing and Community Development, 501 North Second Street, Richmond, VA 23219, telephone (804)

371-7015, FAX (804) 371-7090, e-mail scalhoun@dhcd.state.va.us.

VA.R. Doc. No. R02-170; Filed September 15, 2003, 3:34 p.m.

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TITLE 19. PUBLIC SAFETY

DEPARTMENT OF STATE POLICE

REGISTRAR'S NOTICE: The following regulatory action is exempt from the Administrative Process Act in accordance with (i) § 2.2-4006 A 4 a of the Code of Virginia, which excludes regulations that are necessary to conform to changes in Virginia statutory law where no agency discretion is involved and (ii) § 2.2-4006 A 3 of the Code of Virginia, which excludes regulations that consist only of changes in style or form or corrections of technical errors. The Department of State Police will receive, consider and respond to petitions by any interested person at any time with respect to reconsideration or revision.

<u>Title of Regulation:</u> 19 VAC 30-80. Regulations Relating to Specifications of the Description to be Obtained by Pawnbrokers of Persons Pawning or Pledging Goods (amending 19 VAC 30-80-20; adding 19 VAC 30-80-40).

Statutory Authority: § 54.1-4010 of the Code of Virginia.

Effective Date: November 5, 2003.

Agency Contact: Lieutenant Colonel W. Steven Flaherty, Director, Bureau of Administration and Support Services, Department of State Police, P.O. Box 27472, Richmond, VA 23261-7472, telephone (804) 674-4606, FAX (804) 674-2234 or email sflaherty@vsp.state.va.us.

Summary:

The amendments conform the regulations with statutory changes made during the 2002 regular session of the General Assembly. These changes clarified descriptive information pawnbrokers are required to obtain and also provided for the electronic submission of required reports.

19 VAC 30-80-20. Description.

In addition to the name and residence of the persons pawning or pledging goods, articles or things required under subdivision 5 of § 54.1-4009 of the Code of Virginia, every pawnbroker in this Commonwealth shall obtain the following description of such person: Race, Sex, Date of Birth, Height, Weight, Color of Eyes, Color of Hair. Every pawnbroker in this Commonwealth shall obtain and record at a minimum the information and descriptors set forth in § 54.1-4009 A 6 of the Code of Virginia.

19 VAC 30-80-40. Electronic submission of required reports.

All reports required to be maintained and submitted by a pawnbroker may be maintained and submitted in electronic format. All such electronic reports shall include the information required by the Code of Virginia and the implementing regulations. Such reports shall be maintained and submitted in the form designated by the chief of police or other law-enforcement officer designated by the local attorney for the Commonwealth to receive such reports in the county, city or town where the pawnbroker business is conducted.

VA.R. Doc. No. R04-9; Filed September 15, 2003, 11:28 a.m.

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FORMS

TITLE 4. CONSERVATION AND NATURAL RESOURCES

DEPARTMENT OF MINES, MINERALS AND ENERGY

<u>EDITOR'S NOTICE:</u> The following forms have been filed by the Department of Mines, Minerals and Energy. The forms are available for public inspection at the Department of Mines, Minerals and Energy, 202 North Ninth Street, Richmond, Virginia 23219, or the department's Charlottesville Office or the Office of the Registrar of Regulations, General Assembly Building, 2nd Floor, Richmond, Virginia. Copies of the forms may be obtained from Stephen A. Walz, Department of Mines, Minerals and Energy, 202 North Ninth Street, Richmond, Virginia 23219, telephone (804) 692-3200.

<u>Title of Regulation</u>: 4 VAC 25-31. Reclamation Regulations for Mineral Mining.

FORMS

Permit License Application, DMM-101 (rev. 9/99 9/03).

Notice of Application to Mine, DMM-103 (rev. 9/99 9/03).

Statement Listing the Names and Addresses of Adjoining Property Owners, DMM-103a (rev. 9/99); included in DMM-103 Notice of Application to Mine.

Yearly Progress Report, DMM-105 (rev. 12/94).

Surety Bond, DMM-107 (rev. 9/99).

Revised Map Legend Form, DMM-109 (rev. 9/99 9/03).

Relinquishment of Mining Permit, DMM-112 (rev. 9/99 9/03).

Request for Amendment, DMM-113 (rev. 7/99).

Consolidated Biennial Report of Waivered Counties, Cities, and Towns, DMM-116 (rev. 12/99).

Biennial Waivered Counties, Cities, and Towns, Report of Individual Mining Companies, DMM-117 (rev. 12/99).

Consent for Right of Entry, DMM-120 (rev. 12/99).

License Renewal Application, DMM-157 (rev. 9/99).

Permit Transfer Acceptance, DMM-161 (rev. 9/99 9/03).

Notarized Statement - Maps/Map Legends Unchanged Certification of No Change, DMM-164 (rev. 10/02 9/03).

General Permit for Sand and Gravel Operations Less Than Ten Acres in Size, DMM-168 (eff. 9/03).

GENERAL NOTICES/ERRATA

DEPARTMENT OF HEALTH (STATE BOARD OF)

Periodic Reviews of Regulations

In accordance with § 2.2-4017 of the Code of Virginia and Executive Order (21) 2002, the Department of Health has devised a schedule for reviewing all regulations administered by it that have not been recently amended. During a period beginning October 6, 2003, and ending November 7, 2003, the Department of Health will conduct periodic reviews of the following regulations:

12 VAC 5-110 Rules and Regulations for the Immunization of School Children

12 VAC 5-150 Regulations for the Sanitary Control of Storing, Processing, Packing or Repacking of Oysters, Clams and Other Shellfish

12 VAC 5-410 Rules and Regulations for the Licensure of Hospitals in Virginia

12 VAC 5-440 Regulations for Summer Camps

12 VAC 5-450 Rules and Regulations Governing Campgrounds

12 VAC 5-460 Regulations Governing Tourist Establishment Swimming Pools and Other Public Pools

12 VAC 5-540 Rules and Regulations for the Identification of Medically Underserved Areas in Virginia

12 VAC 5-542 Rules and Regulations Governing the Virginia Nurse Practitioner/Nurse Midwife Scholarship Program

12 VAC 5-590 Waterworks Regulations

12 VAC 5-620 Regulations Governing Application Fees for Construction Permits for Onsite Sewage Disposal Systems and Private Wells

12 VAC 5-640 Alternative Discharging Sewage Treatment Regulations for Individual Single Family Dwellings

In order to (i) more effectively review three chapters (i.e., 12 VAC 5-215, Rules and Regulations Governing Health Data Reporting; 12 VAC 5-216, Methodology to Measure Efficiency and Productivity of Health Care Institutions; and 12 VAC 5-217, Regulations of the Patient Level Data System); (ii) consider consolidation of various provisions contained therein; and (iii) effectuate possibly ensuing legislation regarding these programs, the department will conduct an overall, concurrent review of these regulations in early 2004.

Comments may be directed during the review period to Douglas R. Harris, Virginia Department of Health, Office of the Commissioner, 1500 E. Main St., Suite 227, Richmond, VA 23219, dharris@vdh.state.va.us.

DEPARTMENT OF ENVIRONMENTAL QUALITY

Request for Citizen Nominations of Surface Waters for Water Quality Monitoring

In accordance with § 62.1-44.19:5 F of the Code of Virginia, Water Quality Monitoring Information and Restoration Act, the Virginia Department of Environmental Quality (DEQ) has developed guidance for the public to nominate specific waterbodies for consideration to be included in DEQ's annual Water Quality Monitoring Plan. Any citizen of the Commonwealth who wishes to nominate a waterbody or stream segment for inclusion in DEQ's Water Quality Monitoring Plan should refer to the guidance for submitting requests. All nominations must be received by December 31, 2003, to be considered for the upcoming fiscal year. Copies of the guidance document and nomination form are available from Joyce Brooks, Virginia Department of Environmental Quality, P.O. Box 10009, Richmond, VA 23240-0009, telephone (804) 698-4026 or (800) 592-5482, or by e-mail at ifbrooks@deg.state.va.us.

Total Maximum Daily Load (TMDL) for Lower Appomattox River Basin

The Department of Environmental Quality (DEQ) seeks written and oral comments from interested persons on the development of Total Maximum Daily Loads (TMDLs) for the Lower Appomattox River Basin and its tributaries. The lower Appomattox River TMDL includes those counties that drain to the Appomattox from Amelia County to the City of Hopewell (i.e., Amelia, Chesterfield, Dinwiddie, Nottoway, Powhatan, and Prince George Counties). The subject stream segments are identified in Virginia's 1998 303(d) TMDL Priority List and Report as impaired due to violations of the state's water quality standards for bacteria, benthics, dissolved oxygen and/or pH. The bacteria impairments addressed in the Lower Appomattox Basin include a 2.68 square mile, a 7.44 mile and part of an 80.60-mile segment on the Appomattox River: 5.28 miles on Nibbs Creek; 3.99 miles on Flat Creek; 11.19 miles on Deep Creek; 7.22 miles on West Creek; and 1.61, 7.09, and 2.18-mile segments on Swift Creek. The dissolved oxygen and/or pH impairments include 16.54 miles on Deep Creek; 7 miles on Skinguarter Creek; 1.61 and 7.09-mile segments on Swift Creek; Swift Creek Reservoir; 20.36 miles on Winterpock Creek; and 3.97 miles on Winticomack Creek. The benthic impairment addresses 2.13 miles on an unnamed tributary to Deep Creek.

Section 303(d) of the Clean Water Act and § 62.1-44.19:7 C of the Code of Virginia require DEQ to develop TMDLs for pollutants responsible for each impaired water contained in Virginia's 303(d) TMDL Priority List and Report.

The second public meeting on the development of the Lower Appomattox Basin TMDLs will be held on Thursday, November 6, 2003, 7 p.m. at 10031 Iron Bridge Road in the Chesterfield Police Department's Public Meeting Room. The building is located on the corner of Rt. 10 (Iron Bridge Rd.) and Lori Rd. (which is across from Rt. 655, Beach Rd.) in Chesterfield, Virginia.

The public comment period for this phase of the TMDL development will end on December 6, 2003. Information pertaining to TMDL development is available upon request or can be found on the DEQ web site http://www.deg.state.va.us/TMDL. Written comments should include the name, address, and telephone number of the person submitting the comments. Questions or information requests should be addressed to Mark Alling, Department of Environmental Quality, 4949-A Cox Rd., Glen Allen, VA 23060, telephone (804) 527-5021, FAX (804) 527-5106, or email msalling@deq.state.va.us.

Total Maximum Daily Load (TMDL) for Ash Camp Creek

The Department of Environmental Quality (DEQ) seeks written and oral comments from interested persons on the development of a Total Maximum Daily Load (TMDL) for Ash Camp Creek. Ash Camp Creek was listed on the 1998 303(d) TMDL Priority List and Report as impaired due to violations of the state's water quality standard for the General Standard (Benthic). The Ash Camp Creek stream segment is located in Charlotte County and flows near Eureka, Virginia. The impaired segment is 2.36 miles in length, beginning upstream at the Route 654 bridge and continuing downstream to its mouth at Roanoke Creek.

Section 303(d) of the Clean Water Act and § 62.1-44.19:7 C of the Code of Virginia require DEQ to develop TMDLs for pollutants responsible for each impaired water contained in Virginia's 303(d) TMDL Priority List and Report.

The first public meeting on the development of the Ash Camp Creek TMDL will be held on Wednesday, October 15, 2003, 7 p.m. in Suite A of the County Administration Building, which is located at 250 LeGrande Avenue (1.35 miles south of the Hwy 40 and Hwy 47 intersection) in Charlotte Court House, Virginia.

The public comment period for this phase of the TMDL development will end on November 14, 2003. A fact sheet on the development of the Ash Camp Creek Benthic TMDL is available upon request or can be viewed at the DEQ web site at http://www.deq.state.va.us/tmdl. Questions or information requests should be addressed to Kelly Wills. Written comments should include the name, address, and telephone number of the person submitting the comments and should be sent to Kelly J. Wills, Department of Environmental Quality, 7705 Timberlake Road, Lynchburg, VA 24502, telephone (434) 582-5120, FAX (434) 582-5125, or e-mail kjwills@deq.state.va.us.

Total Maximum Daily Load (TMDL) for Birch Creek

The Department of Environmental Quality (DEQ) seeks written and oral comments from interested persons on the development of a Total Maximum Daily Load (TMDL) for Birch Creek. Birch Creek was listed on the 1998 303(d) TMDL Priority List and Report as impaired due to violations of the state's water quality standards for Total Fecal Coliform Bacteria. The Birch Creek stream segment is located in Halifax County and flows near Elmo, Virginia. The impaired segment of Birch Creek is 4.83 miles in length, beginning

upstream at Carlton Creek and continuing downstream to its mouth at the Dan River.

Section 303(d) of the Clean Water Act and § 62.1-44.19:7 C of the Code of Virginia require DEQ to develop TMDLs for pollutants responsible for each impaired water contained in Virginia's 303(d) TMDL Priority List and Report.

The first public meeting on the development of the Birch Creek TMDL will be held on Thursday, October 23, 2003, 7 p.m. in Public Meeting Room 101 in the Mary Bethune Office Complex at 1030 Cowford Road located in Halifax, Virginia.

The public comment period for this phase of the TMDL development will end on November 24, 2003. A fact sheet on the development of the Birch Creek TMDL is available upon request or can be viewed at the DEQ web site at http://www.deq.state.va.us/tmdl. Questions or information requests should be addressed to Kelly Wills. Written comments should include the name, address, and telephone number of the person submitting the comments and should be sent to Kelly J. Wills, Department of Environmental Quality, 7705 Timberlake Road, Lynchburg, VA, 24502, telephone (434) 582-5120, FAX (434) 582-5125, or e-mail kjwills@deq.state.va.us.

Total Maximum Daily Load (TMDL) for Cedar Run Watershed

The Department of Environmental Quality (DEQ) and the Department of Conservation and Recreation (DCR) seek written and oral comments from interested persons on the development of Total Maximum Daily Loads (TMDLs) to address two bacteria impairments in the Cedar Run Watershed. The subject stream segments are identified in Virginia's 1998 303(d) TMDL Priority List and Report as impaired due to violations of the state's water quality standard for fecal coliform bacteria.

Section 303(d) of the Clean Water Act and § 62.1-44.19:7 C of the Code of Virginia require DEQ to develop TMDLs for pollutants responsible for each impaired water contained in Virginia's 303(d) TMDL Priority List and Report.

The impaired stream segments are located in Fauquier and Prince William counties. The subject stream segments include an approximately 6.6-mile segment of Licking Run extending from the mouth of Germantown Lake northwest of Route 28 to the confluence with Cedar Run southwest of Route 806, and an approximately 28.2-mile segment of Cedar Run extending from the confluence with Mill Run west of Vowles Mill Road to the confluence with the Occoquan River northeast of Route 619.

The second of three public meetings on the development of the Cedar and Licking Run bacteria TMDLs will be held on Thursday, October 23, 2003, at 7 p.m. at Nokesville Elementary School, located at 12625 Fitzwater Drive in Nokesville, Virginia.

The public comment period on this second phase of TMDL development will begin on October 23, 2003, and end on November 21, 2003. A fact sheet on the development of the TMDLs for the bacteria impairments in the Cedar Run

Watershed is available upon request. Questions or information requests should be addressed to Katherine Bennett. Written comments should include the name, address, and telephone number of the person submitting the comments and should be sent to Ms. Katherine E. Bennett, Department of Environmental Quality, 13901 Crown Court, Woodbridge, VA, 22193, telephone (703) 583-3896, FAX (703) 583-3841, or e-mail kebennett@deq.state.va.us.

Total Maximum Daily Load (TMDL) for Falling River

The Department of Environmental Quality (DEQ) seeks written and oral comments from interested persons on the development of a Total Maximum Daily Load (TMDL) for Falling River. Falling River was listed on the 1998 303(d) TMDL Priority List and Report as impaired due to violations of the state's water quality standards for Total Fecal Coliform Bacteria. The two Falling River impaired stream segments are located in Campbell County and flow near Brookneal, Virginia. The upper impaired section of the Falling River is 2.86 miles in length, beginning upstream at the Falling River mainstem from the confluence of the Falling River North and South Forks and continuing downstream to the mouth of Molly's Creek. The lower impaired section of Falling River is 7.63 miles in length, beginning at the Little Falling River mouth and continuing downstream to the Falling River mouth on the Roanoke (Staunton) River.

Section 303(d) of the Clean Water Act and § 62.1-44.19:7 C of the Code of Virginia require DEQ to develop TMDLs for pollutants responsible for each impaired water contained in Virginia's 303(d) TMDL Priority List and Report.

The first public meeting on the development of the Falling River TMDL will be held on Wednesday, October 22, 2003, 7 p.m. in the dining room of the Brookneal Community Center located at 261 Main Street in Brookneal, Virginia.

The public comment period for this phase of the TMDL development will end on November 21, 2003. A fact sheet on the development of the Falling River TMDL is available upon request or can be viewed at the DEQ web site at http://www.deq.state.va.us/tmdl. Questions or information requests should be addressed to Kelly Wills. Written comments should include the name, address, and telephone number of the person submitting the comments and should be sent to Kelly J. Wills, Department of Environmental Quality, 7705 Timberlake Road, Lynchburg, VA, 24502, telephone (434) 582-5120, FAX (434) 582-5125, or e-mail kjwills@deq.state.va.us.

Total Maximum Daily Load (TMDL) for Flat Creek

The Department of Environmental Quality (DEQ) seeks written and oral comments from interested persons on the development of a Total Maximum Daily Load (TMDL) for Flat Creek. Flat Creek was listed on the 1998 303(d) TMDL Priority List and Report as impaired due to violations of the state's water quality standards for Total Fecal Coliform Bacteria and the General Standard (Benthic). The Flat Creek stream segment is located in Mecklenburg County and flows near South Hill, Virginia. The impaired segment of Flat Creek

is 8.95 miles in length, beginning upstream at the South Hill Regional Sewage Treatment Plant discharge and continuing downstream to the mouth of Flat Creek at its confluence with Lake Gaston.

Section 303(d) of the Clean Water Act and § 62.1-44.19:7 C of the Code of Virginia require DEQ to develop TMDLs for pollutants responsible for each impaired water contained in Virginia's 303(d) TMDL Priority List and Report.

The first public meeting on the development of the Flat Creek TMDL will be held on Monday, October 20, 2003, 7 p.m. in the R.T. Arnold Library located at 110 E. Danville Street in South Hill, Virginia.

The public comment period for this phase of the TMDL development will end on November 19, 2003. A fact sheet on the development of the Flat Creek TMDL is available upon request or can be viewed at the DEQ web site at http://www.deq.state.va.us/tmdl. Questions or information requests should be addressed to Kelly Wills. Written comments should include the name, address, and telephone number of the person submitting the comments and should be sent to Kelly J. Wills, Department of Environmental Quality, 7705 Timberlake Road, Lynchburg, VA, 24502, telephone (434) 582-5120, FAX (434) 582-5125, or e-mail kjwills@deq.state.va.us.

Total Maximum Daily Load (TMDL) for Twitty's Creek

The Department of Environmental Quality (DEQ) seeks written and oral comments from interested persons on the development of a Total Maximum Daily Load (TMDL) for Twitty's Creek. Twitty's Creek is listed on the 1998 303(d) TMDL Priority List and Report as impaired due to violations of the state's water quality standards for the General Standard (Benthic). The Twitty's Creek stream segment is located in Charlotte County and flows near Drakes Branch, Virginia. The impaired segment of Twitty's Creek is 7.25 miles in length, beginning upstream at the West Point Stevens-Drakes discharge and continuing downstream to its mouth at Roanoke Creek.

Section 303(d) of the Clean Water Act and § 62.1-44.19:7 C of the Code of Virginia require DEQ to develop TMDLs for pollutants responsible for each impaired water contained in Virginia's 303(d) TMDL Priority List and Report.

The first public meeting on the development of the Twitty's Creek TMDL will be held on Tuesday, October 21, 2003, 7 p.m. in Suite A of the County Administration Building, located at 250 LeGrande Avenue (1.35 miles south of the Hwy 40 and Hwy 47 intersection) in Charlotte Court House, Virginia.

The public comment period for this phase of the TMDL development will end on November 20, 2003. A fact sheet on the development of the Twitty's Creek TMDL is available upon request. Questions or information requests should be addressed to Kelly Wills. Written comments should include the name, address, and telephone number of the person submitting the comments and should be sent to Kelly J. Wills, Department of Environmental Quality, 7705 Timberlake Road,

Lynchburg, VA, 24502, telephone (434) 582-5120, FAX (434) 582-5125, or e-mail kjwills@deq.state.va.us.

STATE LOTTERY DEPARTMENT

The following Director's Orders of the State Lottery Department were filed with the Virginia Registrar of Regulations on September 9, 2003. The orders may be viewed at the State Lottery Department, 900 E. Main Street, Richmond, Virginia, or at the office of the Registrar of Regulations, 910 Capitol Street, 2nd Floor, Richmond, Virginia.

Director's Order Number Forty-Eight (03)

Virginia's Instant Game Lottery 252; "Break The Bank," (effective 08/27/03)

Director's Order Number Forty-Five (03)

Virginia's Instant Game Lottery 255; "Queen Of Hearts," (effective 08/26/03)

Director's Order Number Forty-Nine (03)

Virginia's Instant Game Lottery 572; "Ruby Red 7's," (effective 08/27/03)

Director's Order Number Fifty (03)

Virginia's Instant Game Lottery 573; "Turkey Tripler," (effective 08/27/03)

Director's Order Number Forty-Six (03)

Virginia's Instant Game Lottery 574; "Up The Ante," (effective 08/26/03)

STATE WATER CONTROL BOARD Consent Order - Blacksburg Country Club WWTP

The Virginia Department of Environmental Quality, State Water Control Board and B & J Enterprises, L.C. have agreed to a Consent Order under the State Water Control Law, regarding the Blacksburg Country Club WWTP in Montgomery County, Virginia. The department will consider written comments relating to this for 30 days after the date of publication of this notice. Comments must include your name, address, and phone number and can be e-mailed to jrford@deq.state.va.us or mailed to: Mr. Jerry R. Ford, Jr., DEQ – West Central Regional Office, 3019 Peters Creek Road, Roanoke, VA 24019.

The orders are available at www.deq.state.va.us/enforcement/notices.html and at the above office during regular business hours. You may also request copies from Jerry R. Ford, Jr. at the address above or by calling him at (540) 562-6817.

Proposed Special Order Cecil's Service & Equipment Sewage Treatment Plant

The State Water Control Board (board) proposes to issue a Consent Special Order (order) to Cecil's Service & Equipment, Inc. (permittee) regarding the Cecil's Service & Equipment

Sewage Treatment Plant (STP) located in Fauquier County, Virginia.

The STP is subject to VPDES Permit No. VA0029092. The order requires that the permittee upgrade the STP in order to ensure compliance with permit effluent limits until eliminating the STP's discharge, and provides interim seasonal permit limits until the STP discharge is eliminated. The permittee has agreed to payment of a civil charge.

On behalf of the board, the Department of Environmental Quality's Northern Virginia Regional Office will receive written comments relating to the order through November 5, 2003. Please address comments to: Susan A. Oakes, Northern Virginia Regional Office, Department of Environmental Quality, 13901 Crown Court, Woodbridge, VA, 22193. Please comments address sent via e-mail In order to be considered, saoakes@deq.state.va.us. comments provided by e-mail must include the commenter's name, address, and telephone number. Please write or visit the Woodbridge address, or call (703) 583-3863, in order to examine or to obtain a copy of the order.

Consent Special Order Town of Purcellville Basham Simms Wastewater Facility

The State Water Control Board (board) proposes to issue a Consent Special Order (order) to the Town of Purcellville regarding the Basham Simms Wastewater Facility (facility) located in Purcellville, Virginia.

The facility is subject to VPDES Permit No. VA0022802. The order requires that Purcellville upgrade the facility to correct design deficiencies in order to ensure compliance with final permit effluent limits and provides interim limits until the upgrade is completed.

On behalf of the board, the Department of Environmental Quality's Northern Virginia Regional Office will receive comments relating to the order through November 5, 2003. Please address comments to: Elizabeth Anne Crosier, Northern Virginia Regional Office, Department of Environmental Quality, 13901 Crown Court, Woodbridge, VA 22193. Please address comments sent via e-mail to eacrosier@deq.state.va.us and please reference the Town of Purcellville on the subject line. In order to be considered, comments provided by e-mail must include the commenter's name, address, and telephone number. Please write or visit the Woodbridge address, or call (703) 583-3886, in order to obtain or examine a copy of the Order.

Consent Order - Suncrest Heights STP

The Virginia Department of Environmental Quality, State Water Control Board and the County of Roanoke have agreed to a consent order under the State Water Control Law, regarding Suncrest Heights STP in Roanoke County, Virginia. The department will consider written comments relating to this for 30 days after the date of publication of this notice.

Comments must include your name, address, and phone number and can be e-mailed to jrford@deq.state.va.us or mailed to: Mr. Jerry R. Ford, Jr., DEQ – West Central Regional Office, 3019 Peters Creek Road, Roanoke, VA 24019.

The orders are available at www.deq.state.va.us/enforcement/notices.html and at the above office during regular business hours. You may also request copies from Jerry R. Ford, Jr. at the address above or by calling him at (540) 562-6817.

before and after last sentence.

Page 25, 13 VAC 5,63 260 P. etrike from "Sleeping" on line 3

Page 17, 13 VAC 5-62-220 E, NOTE paragraph, add brackets

Page 25, 13 VAC 5-62-260 R, strike from "Sleeping" on line 2 through "R310.2." on line 17.

VIRGINIA CODE COMMISSION

Notice to State Agencies

Mailing Address: Virginia Code Commission, 910 Capitol Street, General Assembly Building, 2nd Floor, Richmond, VA 23219, FAX (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://register.state.va.us

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
PETITION FOR RULEMAKING-RR13

ERRATA

BOARD OF HOUSING AND COMMUNITY DEVELOPMENT

<u>Titles of Regulations</u>: 13 VAC 5-62. Virginia Uniform Statewide Building Code.

Publication: 19:25 VA.R. 3824-3825 August 25, 2003.

Correction to Final Regulation:

In document published in full at http://legis.state.va.us/codecomm/register/vol19/iss25/f13v562 full.doc:

Page 5, 13 VAC 5-62-40 E, "Exception" paragraph, line 3, after "1983" insert [or continuous employment by the same local governing body as the building maintenance official since before April 1, 1995]

CALENDAR OF EVENTS

Symbol Key

† Indicates entries since last publication of the *Virginia Register*Location accessible to persons with disabilities

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. If you are unable to find a meeting notice for an organization in which you are interested, please check the Commonwealth Calendar at www.vipnet.org or contact the organization directly.

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

EXECUTIVE

BOARD OF ACCOUNTANCY

October 16, 2003 - 10 a.m. -- Open Meeting
Department of Professional and Occupational Regulation,
3600 West Broad Street, Suite 696, Richmond Virginia.

(Interpreter for the deaf provided upon request)

A meeting of the Enforcement Committee for discussion and review of open cases, working on substantial equivalency and discussion with board's legal counsel.

Contact: Nancy Taylor Feldman, Executive Director, Board of Accountancy, 3600 W. Broad St., Suite 696, Richmond VA 23230, telephone (804) 367-8505, FAX (804) 367-2174, (804) 367-9753/TTY **☎**, e-mail boa@boa.state.va.us.

October 31, 2003 - Public comments may be submitted until this date.

* * * * * * *

Notice is hereby given in accordance with § 2.2-4007 of the Code of Virginia that the Board of Accountancy intends to repeal regulations entitled 18 VAC 5-30, Continuing Professional Education Sponsor Registration Rules and Regulations. The purpose of the proposed action is to repeal the existing regulations because the board deemed them no longer necessary to fulfill their statutory mandate, as well as being repetitious and unnecessarily burdensome on continuing professional education sponsors in the Commonwealth in light of programs on the national level.

Statutory Authority: §§ 54.1-4403 and 54.1-4410 of the Code of Virginia.

Contact: Nancy Taylor Feldman, Executive Director, Board of Accountancy, 3600 W. Broad St., Suite 696, Richmond Virginia 23230, telephone (804) 367-8505, FAX (804) 367-2174, (804) 367-9753/TTY ☎, e-mail boa@boa.state.va.us.

ALCOHOLIC BEVERAGE CONTROL BOARD

October 14, 2003 - 9 a.m. -- Open Meeting
October 27, 2003 - 9 a.m. -- Open Meeting
November 10, 2003 - 9 a.m. -- Open Meeting
November 24, 2003 - 9 a.m. -- Open Meeting
December 8, 2003 - 9 a.m. -- Open Meeting
December 22, 2003 - 9 a.m. -- Open Meeting
Department of Alcoholic Beverage Control, 2901 Hermitage
Road, Richmond, Virginia.

A meeting to receive and discuss reports and activities from staff members. Other matters are not yet determined.

Contact: W. Curtis Coleburn, III, Secretary to the Board, Alcoholic Beverage Control Board, P.O. Box 27491, Richmond, VA 23261, telephone (804) 213-4409, FAX (804) 213-4442, e-mail wccolen@abc.state.va.us.

ALZHEIMER'S DISEASE AND RELATED DISORDERS COMMISSION

December 3, 2003 - 10 a.m. -- Open Meeting Department for the Aging, 1600 Forest Avenue, Richmond, Virginia. (Interpreter for the deaf provided upon request)

A regular meeting.

Contact: Janet L. Honeycutt, Director of Grant Operations, Alzheimer's Disease and Related Disorders Commission, 1600 Forest Ave., Suite 102, Richmond, VA, telephone (804) 662-9333, FAX (804) 662-9354, toll-free (800) 554-3402, (804) 662-9333/TTY ☎, e-mail jlhoneycutt@vdh.state.va.us.

ART AND ARCHITECTURAL REVIEW BOARD

November 7, 2003 - 10 a.m. -- Open Meeting

December 5, 2003 - 10 a.m. -- Open Meeting

Science Museum of Virginia, 2500 West Broad Street,
Richmond, Virginia. (Interpreter for the deaf provided upon request)

A monthly meeting to review projects submitted by state agencies. AARB submittal forms and submittal instructions

can be downloaded by visiting the DGS forms center at www.dgs.state.va.us. Request Submittal Form # DGS-30-905 or Submittal Instructions form # DGS-30-906.

Contact: Richard L. Ford, AIA, Chairman, Art and Architectural Review Board, 1011 E. Main Street, Room 221, Richmond, VA 23219, telephone (804) 643-1977, FAX (804) 643-1981, (804) 786-6152/TTY ☎, e-mail rlfaia@aol.com.

VIRGINIA BOARD FOR ASBESTOS, LEAD, AND HOME INSPECTORS

November 4, 2003 - 9 a.m. -- Open Meeting Department of Professional and Occupational Regulation, 3600 West Broad Street, Richmond, Virginia.

A meeting to conduct board business.

Contact: David Dick, Executive Director, Virginia Board for Asbestos, Lead, and Home Inspectors, 3600 W. Broad St., Richmond, VA 23230, telephone (804) 367-8507, FAX (804) 367-6128, (804) 367-9753/TTY ☎, e-mail asbestos@dpor.state.va.us.

COMPREHENSIVE SERVICES FOR AT-RISK YOUTH AND FAMILIES

State Executive Council

October 29, 2003 - 9 a.m. -- Open Meeting
November 26, 2003 - 9 a.m. -- Open Meeting
† December 31, 2003 - 9 a.m. -- Open Meeting
Department of Social Services, 730 East Broad Street, Lower
Level Room 3, Richmond, Virginia.

A monthly council meeting. For traveling directions, please call (804) 692-1100.

Contact: Alan G. Saunders, Director, Office of Comprehensive Services, 1604 Santa Rosa Rd., Richmond, VA 23229, telephone (804) 662-9815, FAX (804) 662-9831, e-mail ags992@central.dss.state.va.us.

AUCTIONEERS BOARD

† October 9, 2003 - 10 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)

A meeting to conduct any and all board business. The meeting is open to the public; however, a portion of the board's business may be discussed in closed meeting. Persons desiring to participate in the meeting and requiring special accommodations or interpretive services should contact the department at 804-367-8514 at least 10 days prior to this meeting so that suitable arrangements can be made. The department fully complies with the Americans with Disabilities Act.

Contact: Marian H. Brooks, Regulatory Board Administrator, Auctioneers Board, 3600 W. Broad St., Richmond, VA 23230,

telephone (804) 367-8514, FAX (804) 367-2475, (804) 367-9753/TTY **2**, e-mail Auctioneers@dpor.state.va.us.

BOARD OF AUDIOLOGY AND SPEECH-LANGUAGE PATHOLOGY

November 6, 2003 - 9 a.m. -- Open Meeting

Department of Health Professions, 6603 West Broad Street, 5th Floor, Richmond, Virginia. (Interpreter for the deaf provided upon request)

A quarterly business meeting to include regulatory and disciplinary matters as may be presented on the agenda. Public comment will be received at the beginning of the meeting.

Contact: Elizabeth Young, Executive Director, Board of Audiology and Speech-Language Pathology, Alcoa Building, 6603 W. Broad St., 5th Floor, Richmond, VA 23230-1712, telephone (804) 662-9111, FAX (804) 662-9523, (804) 662-7197/TTY **3**, e-mail elizabeth.young@dhp.state.va.us.

BOARD FOR BARBERS AND COSMETOLOGY

October 24, 2003 - Public comments may be submitted until this date.

Notice is hereby given in accordance with § 2.2-4007 of the Code of Virginia that the Board for Barbers and Cosmetology intends to adopt regulations entitled 18 VAC 41-40, Wax Technician Regulations. The purpose of the proposed action is to promulgate regulations governing the licensure and practice of wax technicians under the Board for Barbers and Cosmetology as directed by Chapter 797 of 2002 Acts of the Assembly.

Statutory Authority: § 54.1-201 of the Code of Virginia.

Contact: William H. Ferguson, II, Executive Director, Board for Barbers and Cosmetology, 3600 W. Broad St., Richmond, VA 23230-4917, telephone (804) 367-8590, FAX (804) 367-6295, (804) 367-9753/TTY ☎, e-mail barbercosmo@dpor.state.va.us.

† October 27, 2003 - 9 a.m. -- Open Meeting

Department of Professional and Occupational Regulation, 3600 West Broad Street, 4th Floor, Room 453, Richmond, Virginia.

A meeting to conduct an informal fact-finding conference.

Contact: William H. Ferguson, II, Assistant Director, Board for Barbers and Cosmetology, 3600 W. Broad St., Richmond, VA 23230, telephone (804) 367-8575, FAX (804) 367-2474, (804) 367-9753/TTY ☎, e-mail barbercosmo@dpor.state.va.us.

BOARD FOR THE BLIND AND VISION IMPAIRED

October 14, 2003 - 1 p.m. -- Open Meeting

Department for the Blind and Vision Impaired, 397 Azalea Avenue, Richmond, Virginia. (Interpreter for the deaf provided upon request)

The board will review information regarding activities and operations of the department, review expenditures from board endowment fund, and discuss other issues raised for the board members.

Contact: Katherine C. Proffitt, Administrative Staff Assistant, Department for the Blind and Vision Impaired, 397 Azalea Ave., Richmond, VA 23227, telephone (804) 371-3145, FAX (804) 371-3157, toll-free (800) 622-2155, (804) 371-3140/TTY , e-mail proffikc@dbvi.state.va.us.

DEPARTMENT FOR THE BLIND AND VISION IMPAIRED

October 8, 2003 - 7 p.m. -- Open Meeting
Christ and St. Lukes Church, 567 West Olney Avenue,
Norfolk, Virginia. (Interpreter for the deaf provided upon request)

October 15, 2003 - 7 p.m. -- Open Meeting
Lions Sight Foundation, 501 Elm Avenue, Roanoke,
Virginia. (Interpreter for the deaf provided upon request)

- † October 28, 2003 6:30 p.m. -- Open Meeting
 Department for the Blind and Vision Impaired, 401 Azalea
 Avenue, Richmond, Virginia. (Interpreter for the deaf
 provided upon request)
- † October 31, 2003 4:30 p.m. -- Open Meeting Holiday Inn - Fair Oaks, 11787 Lee Jackson Memorial Highway, Fairfax, Virginia. (Interpreter for the deaf provided upon request)

A meeting to obtain input from blind and visually impaired consumers, vendors of services, and other interested parties regarding vocational rehabilitation services (VR) provided by the Department of the Blind and Vision Impaired. All comments will be considered when the state plan is amended for FY 2004 as required by the Rehabilitation Services Administration. Public input is also considered when developing agency policies and operational procedures for the VR program.

Contact: James G. Taylor, Chief Deputy Commissioner, Department for the Blind and Vision Impaired, 397 Azalea Ave., Richmond VA 23227, telephone (804) 371-3111, FAX (804) 371-3390, toll-free (800) 622-2155, (804) 371-3140/TTY ☎, e-mail taylorjg@dbvi.state.va.us.

CEMETERY BOARD

October 6, 2003 - 2 p.m. -- Open Meeting

Department of Professional and Occupational Regulation, 3600 West Board Street, 4th Floor, Room 453, Richmond, Virginia.

A meeting to conduct an informal fact-finding conference.

Contact: Karen W. O'Neal, Regulatory Programs Coordinator, Department of Professional and Occupational Regulation, 3600 W. Broad St., Richmond, VA 23230, telephone (804) 367-8537, FAX (804) 367-2475, (804) 367-9753/TTY ★ e-mail oneal@dpor.state.va.us.

October 7, 2003 - 9 a.m. -- Open Meeting November 5, 2003 - 9 a.m. -- CANCELED

Department of Professional and Occupational Regulation, 3600 West Broad Street, Richmond, Virginia.

A meeting to conduct board business.

Contact: Karen W. O'Neal, Regulatory Programs Coordinator, Department of Professional and Occupational Regulation, 3600 W. Broad St., Richmond, VA 23230, telephone (804) 367-8537, FAX (804) 367-2475, (804) 367-9753/TTY ★, e-mail oneal@dpor.state.va.us.

CHESAPEAKE BAY LOCAL ASSISTANCE BOARD

† October 28, 2003 - 10 a.m. -- Open Meeting
Chesapeake Bay Local Assistance Department, James
Monroe Building, 101 North 14th Street, 17th Floor,
Conference Room, Richmond, Virginia. (Interpreter for the
deaf provided upon request)

A meeting of the Northern Area Review Committee to conduct general business, including a review of local Chesapeake Bay Preservation Area programs.

Contact: Carolyn J. Elliott, Administrative Assistant, Chesapeake Bay Local Assistance Board, James Monroe Bldg., 101 N. 14th St., 17th Floor, Richmond, VA 23219, telephone (804) 371-7505, FAX (804) 225-3447, toll-free (800) 243-7229, (800) 243-7229/TTY ☎, e-mail celliott@cblad.state.va.us.

† October 28, 2003 - 2 p.m. -- Open Meeting Chesapeake Bay Local Assistance Department, James Monroe Building, 101 North 14th Street, 17th Floor, Conference Room, Richmond, Virginia. (Interpreter for the deaf provided upon request)

A meeting of the Southern Area Review Committee to conduct general business, including a review of local Chesapeake Bay Preservation Area programs.

Contact: Carolyn J. Elliott, Administrative Assistant, Chesapeake Bay Local Assistance Board, James Monroe Bldg., 101 N. 14th St., 17th Floor, Richmond, VA 23219, telephone (804) 371-7505, FAX (804) 225-3447, toll-free (800) 243-7229, (800) 243-7229/TTY , e-mail celliott@cblad.state.va.us.

STATE CHILD FATALITY REVIEW TEAM

November 14, 2003 - 10 a.m. -- Open Meeting
Office of the Chief Medical Examiner, 400 East Jackson
Street, Richmond, Virginia.

The business portion of the State Child Fatality Review Team meeting, from 10 a.m. to 10:30 a.m., is open to the public. At the conclusion of the open meeting, the team will go into closed session for confidential case review.

Contact: Virginia Powell, Coordinator, State Child Fatality Review Team, 400 East Jackson St., Richmond, VA 23219, telephone (804) 786-6047, FAX (804) 371-8595, toll-free (800) 447-1708, e-mail vpowell@vdh.state.va.us.

COMPENSATION BOARD

October 15, 2003 - 11 a.m. -- Open Meeting Compensation Board, 202 North 9th Street, 10th Floor, Richmond, Virginia.

A monthly board meeting.

Contact: Cindy P. 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.

COMMONWEALTH COMPETITION COUNCIL

October 8, 2003 - 10 a.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 and election of officers.

Contact: Peggy Robertson, Acting Executive Director, Commonwealth Competition Council, 1500 E. Franklin St., Richmond, VA 23219, telephone (804) 786-0240, FAX (804) 786-1594, e-mail probertson@ccc.state.va.us.

DEPARTMENT OF CONSERVATION AND RECREATION

October 6, 2003 - 7 p.m. -- Open Meeting Leesylvania State Park Visitor Center, 2001 Daniel K. Ludwig Drive, Woodbridge, Virginia.

Proposed developments in the Leesylvania State Park master plan will be discussed and public comments invited.

Contact: Derral Jones, Planning Bureau Manager, Department of Conservation and Recreation, 203 Governor St., Suite 326, Richmond, VA 23219, telephone (804) 786-9042, FAX (804) 371-7899, e-mail djones@dcr.state.va.us.

Virginia Soil and Water Conservation Board

† October 15, 2003 - 9 a.m. -- Open Meeting Natural Resources Conservation Service, 1606 Santa Rosa Road, Richmond, Virginia.

A regular business meeting. This meeting has been rescheduled from the original date of September 18, 2003.

Contact: Leon E. App, Acting Deputy Director, Department of Conservation and Recreation, 203 Governor St., Suite 302, Richmond, VA 23219, telephone (804) 786-6124, FAX (804) 786-6141, e-mail leonapp@dcr.state.va.us.

BOARD FOR CONTRACTORS

October 8, 2003 - 9 a.m. -- Open Meeting
November 19, 2003 - 9 a.m. -- Open Meeting
Department of Professional and Occupational Regulation,
3600 West Broad Street, Richmond, Virginia.

A regular meeting to address policy and procedural issues, review and render decisions on applications for contractors' licenses, and review and render case decisions on matured complaints against licensees. The meeting is open to the public; however, a portion of the board's business may be conducted in closed session.

Contact: Eric L. Olson, Assistant Director, Department of Professional and Occupational Regulation, 3600 W. Broad St., Richmond, VA 23230, telephone (804) 367-2785, FAX (804) 367-2474, (804) 367-9753/TTY **☎**, e-mail contractors@dpor.state.va.us.

† October 8, 2003 - 3 p.m. -- Open Meeting October 14, 2003 - 9 a.m. -- Open Meeting October 21, 2003 - 9 a.m. -- Open Meeting October 29, 2003 - 1:30 p.m. -- Open Meeting November 4, 2003 - 9 a.m. -- Open Meeting December 2, 2003 - 9 a.m. -- Open Meeting December 9, 2003 - 9 a.m. -- Open Meeting

Department of Professional and Occupational Regulation, 3600 West Broad Street, Richmond, Virginia. (Interpreter for the deaf provided upon request)

Informal fact-finding conferences. Persons desiring to participate in the meeting and requiring special accommodations or interpretive services should contact the department at (804) 367-0946 at least 10 days prior to the meeting so that suitable arrangements can be made for appropriate accommodations. The department fully complies with the Americans with Disabilities Act.

Contact: Sharon Martin, Legal Assistant, Department of Professional and Occupational Regulation, 3600 W. Broad St., Richmond, VA 23230, telephone (804) 367-8582, FAX (804) 367-0194, (804) 367-9753/TTY ☎, e-mail martin@dpor.state.va.us.

October 28, 2003 - 9 a.m. -- Open Meeting
October 29, 2003 - 1:30 p.m. -- Open Meeting
Department of Professional and Occupational Regulation,
3600 West Broad Street, Richmond, Virginia. (Interpreter for the deaf provided upon request)

Informal fact-finding conferences for the Contractor Recovery Fund. Persons desiring to participate in the meeting and requiring special accommodations or interpretive services should contact the department at 804-367-0946 at least 10 days prior to this meeting so that suitable arrangements can be made for appropriate accommodations. The department fully complies with the Americans with Disabilities Act.

Contact: Sharon Martin, Legal Assistant, Department of Professional and Occupational Regulation, 3600 W. Broad St., Richmond, VA 23230, telephone (804) 367-8562, FAX (804) 367-0194, (804) 367-9753/TTY **3**, e-mail martin@dpor.state.va.us.

October 29, 2003 - 10 a.m. -- Open Meeting
Department of Professional and Occupational Regulation,
3600 West Broad Street, Richmond, Virginia.

A regular meeting of the Tradesman/Education Committee to consider items of interest relating to the tradesmen, backflow workers, education and other appropriate matters relating to tradesmen and the Board for Contractors.

Contact: Eric L. Olson, Assistant Director, Board for Contractors, 3600 W. Broad St., Richmond, VA 23230, telephone (804) 367-2785, FAX (804) 367-2474, (804) 367-9753/TTY ★ e-mail contractors@dpor.state.va.us.

BOARD OF CORRECTIONAL EDUCATION

October 19, 2003 - 10 a.m. -- Open Meeting
James Monroe Building, 101 North 14th Street, 7th Floor,
Richmond, Virginia. (Interpreter for the deaf provided upon request)

A meeting to discuss general business.

Contact: Patricia Ennis, Board Clerk, Department of Correctional Education, 101 N. 14th St., Richmond, VA 23219, telephone (804) 225-3314, FAX (804) 786-7642, (804) 371-8647/TTY ★ e-mail paennis@dce.state.va.us.

BOARD OF COUNSELING

† October 24, 2003 - 10 a.m. -- Open Meeting ALCOA Building, 6603 West Broad Street, 5th Floor, Conference Room 4, Richmond, Virginia 23116

A meeting of the Regulatory Standards Subcommittee to discuss possible Standards of Practice regulatory changes to current regulations.

Contact: Benjamin Foster, Deputy Executive Director, Board of Counseling, Alcoa Bldg., 6603 W. Broad St., 6th Floor, Richmond, VA 23230-1712, telephone (804) 662-9575, FAX (804) 662-7250, (804) 662-7197/TTY , e-mail Benjamin.foster@dhp.state.va.us.

November 21, 2003 - 10 a.m. -- Open Meeting Department of Health Professions, 6603 West Broad Street, 5th Floor, Richmond, Virginia. □

A business meeting to include reports from standing committees and any other disciplinary or regulatory matters as may be presented on the agenda. Public comment will be received at the beginning of the meeting.

Contact: Evelyn B. Brown, Executive Director, Board of Counseling, Alcoa Bldg., 6603 W. Broad St., 5th Floor, Richmond, VA 23230-1712, telephone (804) 662-9912, FAX (804) 662-9943, (804) 662-7197/TTY , e-mail evelyn.brown@dhp.state.va.us.

CRIMINAL JUSTICE SERVICES BOARD

December 11, 2003 - 9 a.m. -- Public Hearing General Assembly Building, 9th and Broad Streets, House Room D, Richmond, Virginia.

The Committee on Training will hold a public hearing on Regulations for the Implementation of the Law Permitting DNA Analysis Upon Arrest for All Violent Felonies and Certain Burglaries.

Contact: Judith Kirkendall, Regulatory Coordinator, Department of Criminal Justice Services, Eighth Street Office Bldg., 805 E. Broad St., 10th Floor, Richmond, VA 23219, telephone (804) 786-8003, FAX (804) 786-0410, e-mail jkirkendall@dcjs.state.va.us.

DESIGN-BUILD/CONSTRUCTION MANAGEMENT REVIEW BOARD

October 16, 2003 - 11 a.m. -- Open Meeting
November 20, 2003 - 11 a.m. -- Open Meeting
December 18, 2003 - 11 a.m. -- Open Meeting

Department of General Services, 8th Street Office Building, 3rd Floor, Richmond, Virginia. (Interpreter for the deaf provided upon request)

A meeting to review requests submitted by localities to use design-build or construction management type contracts. Contact the Division of Engineering and Buildings to confirm the meeting. Board rules and regulations can be obtained online at www.dgs.state.va.us under the DGS Forms, Form # DGS-30-904.

Contact: Freddie M. Adcock, Administrative Assistant, Department of General Services, 805 E. Broad St., Room 101, Richmond, VA 23219, telephone (804) 786-3263, FAX (804) 371-7934, (804) 786-6152/TTY , e-mail fadcock@dgs.state.va.us.

BOARD OF EDUCATION

† October 7, 2003 - 9:30 a.m. -- Open Meeting Franklin Farms Road, Conference Room, Richmond, Virginia. (Interpreter for the deaf provided upon request)

A meeting to finalize the submission of the written report summarizing the options selected by the Consolidated Task Force for the two Virginia schools for the deaf and blind.

Contact: Dr. Karen Trump, Director, Office of State Schools and State Operated Programs Department of Education, P.O. Box 2120, Richmond, VA 23218-2120, telephone (804) 225-2702.

† October 14, 2003 - 7 p.m. -- Public Hearing Williamsburg, Virginia area. (Interpreter for the deaf provided upon request)

† October 16, 2003 - 7 p.m. -- Public Hearing Roanoke, Virginia area. (Interpreter for the deaf provided upon request)

A meeting to receive public input about the recommended options selected by the Consolidated Task Force for the two Virginia schools for the deaf and blind.

Contact: Dr. Karen Trump, Director, Office of State Schools and State Operated Programs Department of Education, P.O. Box 2120, Richmond, VA 23218-2120, telephone (804) 225-2702

† October 30, 2003 - 9:30 a.m. -- Open Meeting Richmond, Virginia area. (Interpreter for the deaf provided upon request)

A meeting to review the public input from the public hearings held on October 14 and 16 and to adjust the written report as needed.

Contact: Dr. Karen Trump, Director, Office of State Schools and State Operated Programs Department of Education, P.O. Box 2120, Richmond, VA 23218-2120, telephone (804) 225-2702.

November 17, 2003 - 9 a.m. -- Open Meeting

Sheraton Richmond West, 6624 West Broad Street, Richmond, Virginia. (Interpreter for the deaf provided upon request)

A meeting of the Advisory Board for Teacher Education and Licensure. The public is urged to confirm arrangements prior to each meeting by viewing the Department of Education's public meeting calendar at http://www.pen.k12.va.us/VDOE/meetings.html. This site will contain the latest information on the meeting arrangements and will note any last-minute changes in time or location. Please note that persons requesting the services of an interpreter for the deaf are asked to do so at least 72 hours in advance so that the appropriate arrangements may be made.

Contact: Dr. Margaret N. Roberts, Office of Policy and Public Affairs, Department of Education, P.O. Box 2120, 101 N. 14th St., 25th Floor, Richmond, VA 23219, telephone (804) 225-2540, FAX (804) 225-2524, e-mail mroberts@mail.vak12ed.edu.

† October 22, 2003 - 9 a.m. -- Open Meeting November 19, 2003 - 9 a.m. -- Open Meeting

James Monroe Building, 101 North 14th Street, Main Lobby, Rooms D and E, Richmond, Virginia.

A regular business meeting of the board. Persons who wish to speak or who require the services of an interpreter for the deaf should contact the agency 72 hours in advance. Public comment will be received.

Contact: Dr. Margaret N. Roberts, Office of Policy and Public Affairs, Department of Education, P.O. Box 2120, James Monroe Bldg., 101 N. 14th St., 25th Floor, Richmond, VA 23219, telephone (804) 225-2540, FAX (804) 225-2524, e-mail mroberts@mail.vak12ed.edu.

DEPARTMENT OF ENVIRONMENTAL QUALITY

October 7, 2003 - 7 p.m. -- Open Meeting

Woodrow Wilson Rehabilitation Center, Route 259, 394 Hornet Road, Student Activities Center, Fishersville, Virginia.

The second public meeting on the development of a benthic and bacteria TMDL for several stream segments located in the Middle River Watershed. The public notice was published in the Virginia Register on September 22, 2003. The public comment period closes on October 24, 2003.

Contact: Robert Brent, Department of Environmental Quality, 4411 Early Rd., Harrisonburg, VA 22801, telephone (540) 574-7848, FAX (540) 574-7878, e-mail rnbrent@deq.state.va.us.

October 9, 2003 - 7 p.m. -- Open Meeting Donaldson Brown Hotel and Conference Center, 201 Otey Street, Auditorium, Blacksburg, Virginia.

The final public meeting on the development of the benthic TMDL for Stroubles Creek in Montgomery County. The public notice will be published in the Virginia Register on September 22, 2003. The public comment period closes on November 9, 2003.

Contact: Jason Hill, Department of Environmental Quality, 3019 Peters Creek Rd., Roanoke, VA 24019, telephone (540) 562-6724, FAX (540) 562-6860, e-mail jrhill@deq.state.va.us.

October 14, 2003 - 7 p.m. -- Open Meeting

Montgomery County Office Building, 755 Roanoke Street, Boardroom, Christiansburg, Virginia.

The first public meeting on the development of the Crab Creek TMDL for bacteria and benthics for an approximately 10.46-mile segment located in Montgomery County. The public notice was published in the Virginia Register on September 22, 2003. The public comment period closes on November 14, 2003.

Contact: Jason Hill, Department of Environmental Quality, 3019 Peters Creek Rd., Roanoke, VA 24019, telephone (540) 562-6724, FAX (540) 562-6860, e-mail jrhill@deq.state.va.us.

† October 15, 2003 - 9 a.m. -- Open Meeting Department of Environmental Quality, Piedmont Regional

Office, 4949-A Cox Road, Glen Allen, Virginia.

A meeting of the Water Policy Technical Advisory Committee (WP-TAC) to work on a preliminary water resources plan and local and regional water supply regulations. Prior work of the WP-TAC resulted in SB 1221 (2003), which was passed by the General Assembly and signed by the Governor on March 24, 2003. This legislation will provide part of the structure for the work of the WP-TAC through the rest of the year. In addition, the work of the WP-TAC will be informed by work that was conducted during the fall of 2002.

Contact: Scott W. Kudlas, Department of Environmental Quality, P.O. Box 10009, Richmond, VA 23240, telephone (804) 698-4456, FAX (804) 698-4346, e-mail swkudlas@deg.state.va.us.

† October 15, 2003 - 1 p.m. -- Open Meeting Department of Environmental Quality, 629 East Main Street, Richmond, Virginia.

A meeting to solicit input from stakeholders in order to enhance and improve the readability, clarity and utility of the VA TRI Summary Report. Preregistration of attendance is required in order to have sufficient copies of reference material and meeting space. Preregister by contacting, no later than October 13, 2003, the meeting contact listed below. Comments will be accepted through October 30, 2003.

Contact: Dona R. Huang, Department of Environmental Quality, P.O. Box 10009, Richmond, VA 23240, telephone (804) 698-4264, e-mail drhuang@deq.state.va.us.

† October 15, 2003 - 7 p.m. -- Open Meeting

County Administration Building, 250 LeGrande Avenue, Charlotte Court House, Virginia.

The first public meeting on the development of a benthic TMDL for Ash Camp Creek located in Charlotte County. The public notice will be published in the General Notices Section of the Virginia Register on October 6, 2003. The public comment period closes on November 14, 2003.

Contact: Kelly J. Wills, Department of Environmental Quality, 7705 Timberlake Road, Lynchburg, VA 24502, telephone (434) 582-5120, FAX (434) 583-5125, e-mail kjwills@deq.state.va.us.

† October 20, 2003 - 7 p.m. -- Open Meeting R.T. Arnold Library, 110 East Danville Street, South Hill, Virginia

The first public meeting on the development of a bacteria and a benthic TMDL for Flat Creek located in Mecklenburg County. The public notice is published in the General Notices Section in the Virginia Register on October 6, 2003. The public comment period closes on November 19, 2003.

Contact: Kelly J. Wills, Department of Environmental Quality, 7705 Timberlake Road, Lynchburg, VA 24502, telephone (434) 582-5120, FAX (434) 583-5125, e-mail kjwills@deq.state.va.us.

† October 21, 2003 - 9:30 a.m. -- Open Meeting Department of Environmental Quality, 629 East Main Street, Richmond, Virginia.

The second meeting of the task force assisting the department in developing program funding and permit fee strategies for solid waste programs.

Contact: Kathy Frahm, Department of Environmental Quality, P.O. Box 10009, Richmond, VA 23240, telephone (804) 698-4376, FAX (804) 698-4346, e-mail krfrahm@deq.state.va.us.

† October 21, 2003 - 1:30 p.m. -- Open Meeting Department of Environmental Quality, Piedmont Regional Office, 4949-A Cox Road, Glen Allen, Virginia.

A meeting of persons interested in the current status of leaking storage tank (regulated underground, aboveground and heating oil) cleanups in Virginia as well as the status of the Virginia Petroleum Storage Tank Fund. To ensure adequate meeting space, please email tvhowell@deq.state.va.us or call 804-698-4010 if you plan to attend.

Contact: Elizabeth R. Lamp, Department of Environmental Quality, P.O. Box 10009, Richmond, VA 23240, telephone (804) 698-4322, FAX (804) 698-4266, e-mail erlamp@deq.state.va.us.

† October 21, 2003 - 7 p.m. -- Open Meeting

County Administration Building, Suite A, 250 LeGrande Avenue, Charlotte Court House, Virginia.

The first public meeting on the development of a benthic TMDL for Twitty's Creek in Charlotte County. The public notice is published in the General Notices Section in the

Virginia Register on October 6, 2003. The public comment period closes on November 20, 2003.

Contact: Kelly J. Wills, Department of Environmental Quality, 7705 Timberlake Road, Lynchburg, VA 24502, telephone (434) 582-5120, FAX (434) 583-5125, e-mail kjwills@deq.state.va.us.

† October 22, 2003 - 7 p.m. -- Open Meeting Brookneal Community Center, 261 Main Street, Brookneal, Virginia.

The first public meeting on the development of a bacteria TMDL for Falling River located in Campbell County. The public notice is published in the General Notices Section in the Virginia Register on October 6, 2003. The public comment period closes on November 21, 2003.

Contact: Kelly J. Wills, Department of Environmental Quality, 7705 Timberlake Road, Lynchburg, VA 24502, telephone (434) 582-5120, FAX (434) 583-5125, e-mail kjwills@deq.state.va.us.

† October 23, 2003 - 7 p.m. -- Open Meeting Mary Bethune Office Complex, 1030 Cowford Road, Halifax, Virginia

The first public meeting on the development of a bacteria TMDL for Birch Creek in Halifax County, Virginia. The public notice will be published in the General Notices Section in the Virginia Register on October 6, 2003. The public comment period closes on November 24, 2003.

Contact: Kelly J. Wills, Department of Environmental Quality, 7705 Timberlake Road Lynchburg, VA 24502, telephone (434) 582-5120, FAX (434) 583-5125, e-mail kjwills@deq.state.va.us.

† October 23, 2003 - 7 p.m. -- Open Meeting Nokesville Elementary School, 12625 Fitzwater Drive, Nokesville, Virginia.

The second public meeting on the development of the bacterial TMDL for Cedar Run and Licking Run in Fauquier and Prince William Counties. The public notice will be published in the General Notices Section in the Virginia Register on October 6 and the public comment period closes on November 21, 2003.

Contact: Katherine Bennett, Department of Environmental Quality, 13901 Crown Court, Woodbridge, VA 22193, telephone (703) 583-3896, FAX (703) 583-3841, e-mail kebennett@deq.state.va.us.

† November 6, 2003 - 7 p.m. -- Open Meeting Chesterfield Police Department, 10031 Iron Bridge Road, Public Meeting Room, Chesterfield, Virginia.

The second public meeting on the development of TMDLs for bacteria, benthics, dissolved oxygen and/or pH for the lower Appomattox River Basin and its tributaries located in Amelia, Chesterfield, Dinwiddie, Nottoway, Powhatan and Prince George Counties. The public notice will be published in the General Notices Section of the Virginia Register on October 6, 2003. The public comment period closes on December 6, 2003.

Contact: Mark Alling, Department of Environmental Quality, 4949-A Cox Rd., Glen Allen, VA 23060, telephone (804) 527-5021, FAX (804) 527-5106, e-mail msalling@deq.state.va.us.

November 13, 2003 - 10 a.m. -- Open Meeting Henrico Training Center, 7701 East Parham Road, Glen Allen, Virginia

A regular meeting of the Recycling Markets Development Council.

Contact: G. Steven Coe, Department of Environmental Quality, P.O. Box 10009, Richmond, VA 23240, telephone (804) 698-4029, FAX (804) 698-4224, e-mail gscoe@deq.state.va.us.

BOARD OF FUNERAL DIRECTORS AND EMBALMERS

October 7, 2003 - 9 a.m. -- Open Meeting
Department of Health Professions, 6603 West Broad Street,
5th Floor, Richmond, Virginia.

The Task Force on Inspection Process will review current inspection procedures for funeral homes.

Contact: Elizabeth Young, Executive Director, Board of Funeral Directors and Embalmers, Alcoa Bldg., 6603 W. Broad St., 5th Floor, Richmond, VA 23230-1712, telephone (804) 662-9907, FAX (804) 662-9523, (804) 662-7197/TTY ☎, e-mail elizabeth.young@dhp.state.va.us.

† October 7, 2003 - 2:30 p.m. -- Open Meeting Department of Health Professions, 6603 West Broad Street, 5th Floor, Conference Room 1, Richmond, Virginia.

The Board of Funeral Directors and Embalmers will convene to hear possible violations of the laws and regulations governing the practice of funeral service.

Contact: Elizabeth Young, Executive Director, Board of Funeral Directors and Embalmers, 6603 W. Broad St., 5th Floor, Richmond, VA 23230-1712, telephone (804) 662-9907, FAX (804) 662-9523, (804) 662-7197/TTY ☎, e-mail elizabeth.young@dhp.state.va.us.

November 26, 2003 - 9 a.m. -- Open Meeting
Department of Health Profession, 6603 West Broad Street,
5th Floor, Richmond, Virginia.

The Legislative/Regulatory Committee will review and amend current regulations.

Contact: Elizabeth Young, Executive Director, Board of Funeral Directors and Embalmers, Alcoa Bldg., 6603 W. Broad St., 5th Floor, Richmond, VA 23230-1712, telephone (804) 662-9907, FAX (804) 662-9523, (804) 662-7197/TTY ☎, e-mail elizabeth.young@dhp.state.va.us.

December 10, 2003 - 9 a.m. -- Open Meeting Department of Health Professions, 6603 West Broad Street, 5th Floor, Richmond, Virginia.

A quarterly business meeting to include regulatory and disciplinary matters as may be presented on the agenda. Public comment will be received at the beginning of the meeting.

Contact: Elizabeth Young, Executive Director, Board of Funeral Directors and Embalmers, Alcoa Bldg., 6603 W. Broad St., 5th Floor, Richmond, VA 23230-1712, telephone (804) 662-9907, FAX (804) 662-9523, (804) 662-7197/TTY , e-mail elizabeth.young@dhp.state.va.us.

BOARD OF GAME AND INLAND FISHERIES

† October 23, 2003 - 9 a.m. -- Open Meeting
Department of Game and Inland Fisheries, 4000 West Broad
Street, Richmond, Virginia. (Interpreter for the deaf provided upon request)

A meeting to discuss general and administrative issues. The board may hold a closed session at some time during the meeting.

Contact: Phil Smith, Policy Analyst and Regulatory Coordinator, Department of Game and Inland Fisheries, 4016 W. Broad St., Richmond, VA 23230, telephone (804) 367-8341, FAX (804) 367-0488, e-mail regcomments@dgif.state.va.us.

CHARITABLE GAMING BOARD

† December 2, 2003 - 10 a.m. -- Open Meeting General Assembly Building, 9th and Broad Streets, House Room C, Richmond, Virginia.

Agenda to be posted.

Contact: Frances C. Jones, Office Manager, Charitable Gaming Board, 101 N. 14th St., 17th Floor, Richmond, VA 23219, telephone (804) 786-3014, FAX (804) 786-1079, e-mail fjones@dcg.state.va.us.

BOARD FOR GEOLOGY

November 20, 2003 - 9 a.m. -- Open Meeting † January 6, 2004 - 9 a.m. -- Open Meeting Department of Professional and Occupational Regulation, 3600 West Broad Street, Richmond, Virginia.

A meeting to conduct board business.

Contact: David E. Dick, Assistant Director, Board for Geology, 3600 W. Broad St., Richmond, VA 23230, telephone (804) 367-8595, FAX (804) 367-6128, (804) 367-9753/TTY ☎, e-mail geology@dpor.state.va.us.

GEORGE MASON UNIVERSITY

November 19, 2003 - 9 a.m. -- Open Meeting George Mason University, Mason Hall, Fairfax, Virginia.

A meeting of the Board of Visitors. The agenda will be published 10 days prior to the meeting.

Contact: Mary Roper, Secretary, pro tem, George Mason University, MSN 3A1, George Mason University, 4400 University Dr., Fairfax, VA 22030, telephone (703) 993-8703, (703) 993-8707/TTY ☎, e-mail mroper@gmu.edu.

STATE BOARD OF HEALTH

October 24, 2003 - 9 a.m. -- Open Meeting
Department of Health, Main Street Station, 1500 East Main
St., 3rd Floor Conference Room, Richmond, Virginia

A general business meeting.

Contact: Rene Cabral-Daniels, Department of Health, 1500 E. Main St., Richmond, VA 23219, telephone (804) 786-3561.

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October 31, 2003 - Public comments may be submitted until this date.

Notice is hereby given in accordance with § 2.2-4007 of the Code of Virginia that the State Board of Health intends to amend regulations entitled 12 VAC 5-90, Regulations for Disease Reporting and Control. The purpose of the proposed action is to bring the regulations into compliance with recent changes to the Code of Virginia and with recent changes in the field of communicable disease control and emergency preparedness that need to be implemented to protect the health of the citizens of Virginia. The Regulations for Disease Reporting and Control provide information about what diseases must be reported, who must report them, and how reporting is conducted. The proposed amendment includes the addition and clarification of several definitions, updates to the reportable disease list and the list of diseases requiring rapid reporting, the addition of a requirement to report diseases that may be due to a biologic agent used as a weapon, the addition of information about how laboratories shall report their inventories of dangerous microbes and pathogens, the addition of a section about the reporting and control of tuberculosis, an update to the list of conditions reportable by laboratories and the tests used to confirm those conditions, and the addition of a requirement for private laboratories to submit designated specimens to the state laboratory for confirmation and further testing. Due to the need for information in order to act to protect the public, an amendment is proposed to require the reporting of diseases within three days instead of seven days.

Statutory Authority: §§ 32.1-12 and 32.1-35 of the Code of Virginia.

Contact: Diane Woolard, Ph.D., M.P.H., Director, Surveillance and Investigation, Department of Health, P.O. Box 2448, Room 113, Richmond, VA 23218, telephone (804) 786-6261, FAX (804) 371-4050 or e-mail dwoolard@vdh.state.va.us.

DEPARTMENT OF HEALTH

December 12, 2003 - 10:30 a.m. -- Open Meeting Virginia Hospital and Health Care Association, 4200 Innslake Dr., Glen Allen, VA.

A meeting of an advisory committee to the Virginia Early Hearing Detection and Intervention program regarding implementing the program.

Contact: Pat Dewey, Program Manager, Department of Health, 1500 E. Main St., Richmond VA, telephone (804) 786-1964, e-mail pdewey@vdh.state.va.us.

Emergency Medical Services Advisory Board

November 14, 2003 - 1 p.m. -- Open Meeting The Place at Innsbrook, 4036-C Cox Road, Glen Allen, Virginia.

A quarterly meeting of the State EMS Advisory Board.

Contact: Gary R. Brown, Director, Department of Health, 1538 E. Parham Rd., Richmond, VA 23228, telephone (804) 371-3500, FAX (804) 371-3543, toll-free (800) 523-6019, e-mail gbrown@vdh.state.va.us.

Sewage Handling and Disposal Appeal Review Board

October 22, 2003 - 10 a.m. -- Open Meeting Henrico Government Center, Henrico County Board Room, 8600 Dixon Powers Dr., Richmond, Virginia 23228.

A meeting of the Sewage Handling and Disposal Appeal Review Board to hear appeals of health department denials of septic tank permits.

Contact: Susan C. Sherertz, Business Manager, Department of Health, 1500 East Main Street, Room 115, Richmond, VA, telephone (804) 371-4236, FAX (804) 225-4003, or e-mail ssherertz@vdh.state.va.us.

November 20, 2003 - 10 a.m. -- Open Meeting Department of Health, 1500 East Main Street, Room 115, Richmond, Virginia.

A meeting to discuss regulations, new technologies and new products to recommend for approval to the State Health Commissioner for use in Virginia.

Contact: Donald J. Alexander, Division Director, Department of Health, 1500 E. Main St., Room 115, Richmond, VA 23219, telephone (804) 225-4030, FAX (804) 225-4003, e-mail dalexander@vdh.state.va.us.

BOARD OF HEALTH PROFESSIONS

† October 22, 2003 - 9 a.m. -- Open Meeting Department of Health Professions, Alcoa Building, 6603 West Broad Street, 5th Floor, Room 1, Richmond, Virginia.

The Regulatory Research Committee will discuss and make recommendations to the full board regarding the development of regulations that approve organizations to examine and credential dialysis care technicians and consideration of continuing competency requirements. The committee will begin the study of the feasibility of regulating directors of assisted living facilities.

Contact: Elizabeth A. Carter, Ph.D., Executive Director, Board of Health Professions, Alcoa Bldg., 6603 W. Broad St., 5th Floor, Richmond, VA 23230-1712, telephone (804) 662-7691, FAX (804) 662-7098, (804) 662-7197/TTY ☎, e-mail elizabeth.carter@dhp.state.va.us.

† October 22, 2003 - 10:30 a.m. -- Open Meeting Department of Health Professions, Alcoa Building, 6603 West Broad Street, 5th Floor, Room 1, Richmond, Virginia.

The Executive Committee will review and report to the full board on the 2004 department budget. Public comment will be received at the beginning of the meeting.

Contact: Elizabeth A. Carter, Ph.D., Executive Director, Board of Health Professions, Alcoa Bldg., 6603 W. Broad St., 5th Floor, Richmond, VA 23230-1712, telephone (804) 662-7691, FAX (804) 662-7098, (804) 662-7197/TTY ☎, e-mail elizabeth.carter@dhp.state.va.us.

† October 22, 2003 - 12:30 p.m. -- Open Meeting Department of Health Professions, Alcoa Building, 6603 West Broad Street, 5th Floor, Room 1, Richmond, Virginia.

A meeting to (i) receive an update on the Sanction Reference Study, (ii) receive a report on enforcement activities, (iii) develop a workplan and finalize committee structures, (iv) receive reports from the Regulatory Review and Executive Committees, and (v) set the 2004 calendar. Public comment will be received at the beginning of the meeting.

Contact: Elizabeth A. Carter, Ph.D., Executive Director, Board of Health Professions, Alcoa Bldg., 6603 W. Broad St., 5th Floor, Richmond, VA 23230-1712, telephone (804) 662-7691, FAX (804) 662-7098, (804) 662-7197/TTY ☎, e-mail elizabeth.carter@dhp.state.va.us.

DEPARTMENT OF HEALTH PROFESSIONS

October 17, 2003 - 9 a.m. -- Open Meeting
December 12, 2003 - 9 a.m. -- Open Meeting
Department of Health Professions, 6603 West Broad Street,
5th Floor, Richmond, Virginia.

A bimonthly meeting of the Intervention Program Committee for the Health Practitioners' Intervention Program.

Contact: Donna P. Whitney, Intervention Program Manager, Department of Health Professions, 6603 W. Broad St., 5th Floor, Richmond, VA 23230, telephone (804) 662-9424, FAX (804) 662-7358, e-mail donna.whitney@dhp.state.va.us.

VIRGINIA HIGHER EDUCATION TUITION TRUST FUND

November 5, 2003 - 2 p.m. -- Open Meeting James Monroe Building, Virginia College Savings Plan Board Room, 101 North 14th Street, 5th Floor, Richmond, VA. (Interpreter for the deaf provided upon request)

A quarterly meeting of the Board of the Virginia College Savings Plan.

Contact: Lee Hall, Special Projects Assistant, Virginia Higher Education Tuition Trust Fund, P.O. Box 607, Richmond, VA 23218, telephone (804) 786-3605, FAX (804) 786-2453, toll-free (888) 567-0540, (804) 786-2766/TTY ☎, e-mail lhall@virginia529.com.

DEPARTMENT OF HUMAN RESOURCE MANAGEMENT

October 31, 2003 - Public comments may be submitted until this date.

Notice is hereby given in accordance with § 2.2-4007 of the Code of Virginia that the Department of Human Resource Management intends to amend regulations entitled 1 VAC 55-20, Commonwealth of Virginia Health Benefits Program. The purpose of the proposed action is to conform 1 VAC 55-20 to state and federal law. 1 VAC 55-20 regulates the administration of the health benefit plans offered to state employees and employees of local municipalities who provide health benefit coverage through The Local Choice (TLC) program. These proposed regulations reflect changes made to the Code of Virginia as well as federal laws and regulations that are applicable to the state and TLC program.

Statutory Authority: §§ 2.2-1204 and 2.2-2818 of the Code of Virginia.

Contact: Charles Reed, Associate Director, Department of Human Resource Management, James Monroe Bldg., 101 N. 14th St., Richmond, VA 23219, telephone (804) 786-3214, FAX (804) 371-0231 or e-mail creed@dhrm.state.va.us.

VIRGINIA INFORMATION TECHNOLOGIES AGENCY

Virginia Geographic Information Network Advisory Board

November 6, 2003 - 1:30 p.m. -- Open Meeting Richmond Plaza Building, 110 South 7th Street, 3rd Floor Training Room, Richmond, Virginia.

A regular board meeting.

Contact: Bill Shinar, VGIN Coordinator, Virginia Information Technologies Agency, 110 S. 7th Street, Suite 135, Richmond, VA 23219, telephone (804) 786-8175, FAX (804) 371-2795, e-mail bshinar@vgin.state.va.us.

Wireless E-911 Services Board

November 12, 2003 - 9 a.m. -- Open Meeting Richmond Plaza Building, 110 South 7th Street, 3rd Floor Conference Room, Richmond, Virginia. (Interpreter for the deaf provided upon request)

A meeting of the CMRS subcommittee in closed session.

Contact: Steven Marzolf, Public Safety Communications Coordinator, Virginia Information Technologies Agency, 110 South 7th Street, Richmond, VA 23219, telephone (804) 371-0015, e-mail smarzolf@dtp.state.va.us.

November 12, 2003 - 10 a.m. -- Open Meeting Richmond Plaza Building, 110 South 7th Street, 3rd Floor Conference Room, Richmond, Virginia. (Interpreter for the deaf provided upon request)

A regular monthly meeting of the full board.

Contact: Steven Marzolf, Public Safety Communications Coordinator, Virginia Information Technologies Agency, 110 South 7th Street, Richmond, VA 23219, telephone (804) 371-0015, e-mail smarzolf@dtp.state.va.us.

JAMESTOWN-YORKTOWN FOUNDATION

November 5, 2003 - 2 p.m. -- Open Meeting

The College of William and Mary, University Center, Tidewater Room B, 2nd Floor, Williamsburg, Virginia. (Interpreter for the deaf provided upon request)

A meeting of the Jamestown 2007 Steering Committee's Executive Committee.

Contact: Stacey Ruckman, Jamestown 2007 Executive Assistant, Jamestown-Yorktown Foundation, P.O. Box 1607, Williamsburg, VA 23187, telephone (757) 253-4659, FAX (757) 253-5299, toll-free (888) 593-4682, (757) 253-7236/TTY ☎, e-mail sruckman@jyf.state.va.us.

November 17, 2003 - 9 a.m. -- Open Meeting November 18, 2003 - 8 a.m. -- Open Meeting

Williamsburg Hospitality House, 415 Richmond Road, Williamsburg, Virginia. (Interpreter for the deaf provided upon request)

Board of Trustees' semiannual meeting. Committee meetings will also be held. Specific schedule not yet confirmed. Public comment will not be heard.

Contact: Laura W. Bailey, Executive Assistant to the Boards, Jamestown-Yorktown Foundation, P.O. Box 1607, Williamsburg, VA 23187, telephone (757) 253-4840, FAX (757) 253-5299, toll-free (888) 593-4682, (757) 253-7236/TTY ☎, e-mail lwbailey@jyf.state.va.us.

December 10, 2003 - Noon -- Open Meeting

Location to be determined. (Interpreter for the deaf provided upon request)

A meeting of the Jamestown 2007 Steering Committee.

Contact: Stacey Ruckman, Jamestown 2007 Executive Assistant, Jamestown-Yorktown Foundation, P.O. Box 1607, Williamsburg, VA 23187, telephone (757) 253-4659, FAX (757) 253-5299, toll-free (888) 593-4682, (757) 253-7236/TTY ☎, e-mail sruckman@jyf.state.va.us.

STATE BOARD OF JUVENILE JUSTICE

October 31, 2003 - Public comments may be submitted until this date.

Notice is hereby given in accordance with § 2.2-4007 of the Code of Virginia that the State Board of Juvenile Justice intends to adopt regulations entitled 6 VAC 35-170, Minimum Standards for Research Involving Human Subjects or Records of the Department of Juvenile Justice. The purpose of the proposed action is to establish a process for reviewing and approving research proposals involving human subjects to effectuate the provisions of Chapter 5.1 (§ 32.1-162.16 et seq.) of Title 32.1 of the Code of Virginia, regarding human research.

Statutory Authority: § 66-10.1 of the Code of Virginia.

Contact: Donald R. Carignan, Regulatory Coordinator, Department of Juvenile Justice, P.O. Box 1110, Richmond, VA 23208-1110, telephone (804) 371-0743, FAX (804) 371-0773 or e-mail carigndr@dij.state.va.us.

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† November 12, 2003 - 9 a.m. -- Public Hearing

James River Detention Center, Beaumont Road (adjacent to Beaumont Juvenile Correctional Center), Goochland, Virginia.

December 5, 2003 - Public comments may be submitted until this date.

Notice is hereby given in accordance with § 2.2-4007 of the Code of Virginia that the State Board of Juvenile Justice intends to adopt regulations entitled 6 VAC 35-30, Regulations for State Reimbursement of Local Juvenile Residential Facility Costs. The purpose of the proposed action is to make proper provision for review of reimbursement actions by the Governor as represented by the Secretary of Public Safety. Amendments are needed to clarify the sequence for submitting and approving materials at various stages of a construction project, and to clarify how construction projects can be completed and reimbursed in phases. Finally, amendments are proposed to establish the regulatory basis upon which the board may act in exercising its statutory responsibility to approve certain juvenile residential facilities, even when those facilities have been constructed without financial assistance from the Commonwealth.

Statutory Authority: §§ 16.1-313, 16.322.5 through 16.1-322.7 and 66-10 of the Code of Virginia.

Contact: Donald R. Carignan, Regulatory Coordinator, Department of Juvenile Justice, P.O. Box 1110, Richmond, VA 23208-1110, telephone (804) 371-0743, FAX (804) 371-0773 or e-mail carigndr@djj.state.va.us.

† November 12, 2003 - 9 a.m. -- Open Meeting James River Detention Center, adjacent to Beaumont Juvenile Correctional Center, Beaumont Road, Goochland, Virginia

Committees of the board (Secure Services and Nonsecure Services) meet at 9 a.m. to receive certification audit reports. The full board meets at 10 a.m. to take certification action, to consider revisions to Regulations for Reimbursement of Juvenile Residential Facility Costs (6 VAC 35-30), to hear from detention homes seeking authorization to use pepper spray under certain conditions, and to consider such other matters as may come before the board.

Contact: Donald Carignan, Regulatory Coordinator, State Board of Juvenile Justice, 700 Centre, 700 E. Franklin St., 4th Floor, Richmond, VA 23219, telephone (804) 371-0743, FAX (804) 371-0773, e-mail carigndr@djj.state.va.us.

DEPARTMENT OF LABOR AND INDUSTRY

Virginia Apprenticeship Council

† October 23, 2003 - 9:45 a.m. -- Open Meeting New Horizons Regional Education Center, 520 Butler Farm Road, Hampton, Virginia. (Interpreter for the deaf provided upon request)

The meeting scheduled for September 18, 2003, has been rescheduled due to uncertainties surrounding Hurricane Isabel. Exemption from Examination Subcommittee meets at 9:45 a.m. and a quarterly meeting of the council occurs at 10 a.m.

Contact: Beverley Donati, Assistant Program Director, Department of Labor and Industry, Powers-Taylor Bldg., 13 S. 13th St., Richmond, VA 23219, telephone (804) 786-2382, FAX (804) 786-8418, (804) 786-2376/TTY ☎, e-mail bgd@doli.state.va.us.

Virginia Migrant and Seasonal Farmworkers Board

October 29, 2003 - 10 a.m. -- Open Meeting State Capitol, House Room 1, Richmond, Virginia. (Interpreter for the deaf provided upon request)

A regular quarterly meeting.

Contact: Betty B. Jenkins, Board Administrator, Department of Labor and Industry, Powers-Taylor Building, 13 S. 13th St., Richmond, VA 23219, telephone (804) 786-2391, FAX (804) 371-6524, (804) 786-2376/TTY **2**, e-mail bbj@doli.state.va.us.

Safety and Health Codes Board

† November 5, 2003 - 10 a.m. -- Open Meeting Tyler Building (State Corporation Commission Building), 1300 East Main Street, Second Floor, Courtroom A, Richmond, Virginia.

A regular meeting.

Contact: Regina P. Cobb, Agency Management Analyst Senior, Department of Labor and Industry, Powers-Taylor Bldg., 13 S. 13th St., Richmond, VA 23219, telephone (804) 786-0610, FAX (804) 786-8418, (804) 786-2376/TTY ☎, e-mail rlc@doli.state.va.us.

STATE LIBRARY BOARD

November 17, 2003 - 8:15 a.m. -- Open Meeting The Library of Virginia, 800 East Broad Street, Richmond, Virginia.

Meetings of the board to discuss matters pertaining to the Library of Virginia and the board. Committees of the board will meet as follows:

8:15 a.m. - Public Library Development Committee, Floor 2M

Publications and Educational Services Committee, Conference Room B;

Records Management Committee

9:30 a.m. - Archival and Information Services Committee Collection Management Services Committee Legislative and Finance Committee

10:30 a.m. - Library Board

Contact: Jean H. Taylor, Executive Secretary to the Librarian, The Library of Virginia, 800 E. Broad St., Richmond, VA 23219-2000, telephone (804) 692-3535, FAX (804) 692-3594, (804) 692-3976/TTY ☎, e-mail jtaylor@lva.lib.va.us.

COMMISSION ON LOCAL GOVERNMENT

† November 10, 2003 - 10 a.m. -- Open Meeting
The Jackson Center, 501 North 2nd Street, First Floor
Conference Room, Richmond, Virginia. (Interpreter for the
deaf provided upon request)

A regular meeting to consider such matters as may be presented.

Contact: Ted McCormack, Associate Director, Commission on Local Government, 501 N. 2nd St., Richmond, VA 23219, telephone (804) 786-6508, FAX (804) 371-7090, (804) 828-1120/TTY ☎, e-mail tmccormack@dhcd.state.va.us.

MARINE RESOURCES COMMISSION

October 28, 2003 - 9:30 a.m. -- Open Meeting Marine Resources Commission, 2600 Washington Avenue, 4th Floor, Newport News, Virginia. (Interpreter for the deaf provided upon request)

A monthly commission meeting.

Contact: Kathy Leonard, Executive Secretary, Marine Resources Commission, 2600 Washington Ave., 3rd Floor, Newport News, VA 23607, telephone (757) 247-2120, FAX (757) 247-8101, toll-free (800) 541-4646, (757) 247-2292/TTY **☎**, e-mail kleonard@mrc.state.va.us.

BOARD OF MEDICAL ASSISTANCE SERVICES

December 9, 2003 - 10 a.m. -- Open Meeting Department of Medical Assistance Services, 600 East Broad Street, Suite 1300, Richmond, Virginia.

A routine quarterly meeting.

Contact: Nancy Malczewski, Board Liaison, Department of Medical Assistance Services, 600 E. Broad St., Suite 1300, Richmond, VA 23219, telephone (804) 786-8096, FAX (804) 371-4981, (800) 343-0634/TTY **2**, e-mail nmalczew@dmas.state.va.us.

DEPARTMENT OF MEDICAL ASSISTANCE SERVICES

October 9, 2003 - 10 a.m. -- Open Meeting
Riverside Conference Center, 12420 Warwick Boulevard,
Building 6, Newport News, Virginia.

October 20, 2003 - 10 a.m. -- Open Meeting Dumbarton Library, 6800 Staples Mill Road, Richmond, Virginia.

October 30, 2003 - 10:30 a.m. -- Open Meeting Alexandria Library, 5005 Duke Street, Alexandria, Virginia.

Quarterly Case Managers meetings to establish and maintain productive communication between Medicaid providers, case managers and the Medicaid contracted MCOs. The DMAS Division of Health Care Services convenes a case manager's meeting on a quarterly basis with Medicaid-participating MCOs and facility-based case managers. These meetings provide additional opportunities for collaboration and discussion of special needs issues among professionals who provide case management services to MCO enrollees with special needs. Previous quarterly meetings have focused on topics such as high risk prenatal services, the Lead Safe Virginia program, implementation of children's health insurance programs, services for children with special health care needs, expansion of Medallion II, transition of medical care for recipients from MEDALLION to Medallion II, the MCO referral and prior authorization process, HIV/AIDS, the homeless, individuals with disabilities, EPSDT, and the Part C process and exclusion.

Contact: Queen Green, Managed Care Case Manager, Department of Medical Assistance Services, 600 E. Broad St., Suite 1300, Richmond, VA 23219, telephone (804) 225-4789, FAX (804) 786-5799, (800) 343-0634/TTY ☎, e-mail Qgreen2@dmas.state.va.us.

† December 5, 2003 - Public comments may be submitted until this date.

Notice is hereby given in accordance with § 2.2-4007 that the Department of Medical Assistance Services intends to amend regulations entitled 12 VAC 30-120, Waiver Services. The purpose of the proposed action is to add coverage of consumer-directed personal assistance services and consumer-directed respite care services to the HIV/AIDS waiver program.

Statutory Authority: $\S\S$ 32.1-324 and 32.1-325 of the Code of Virginia.

Public comments may be submitted until December 5, 2003, to Vivian Horn, LTC Analyst, 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) 786-7959, FAX (804) 786-1680 or e-mail vsimmons@dmas.state.va.us.

Medicaid Physician Advisory Committee

October 14, 2003 - 4 p.m. -- Open Meeting
Department of Medical Assistance Services, 600 East Broad
Street, Suite 1300, Richmond, Virginia.

The discussion of physician issues in the Medicaid system.

Contact: Chris Schroeder, Administrative Staff Specialist, Department of Medical Assistance Services, 600 E. Broad St., Suite 1300, Richmond, VA 23219, telephone (804) 371-0552, FAX (804) 371-4981, (800) 343-0634/TTY **37**, e-mail cschroed@dmas.state.va.us.

Medicaid Transportation Advisory Committee

October 15, 2003 - 1 p.m. -- Open Meeting
December 17, 2003 - 1 p.m. -- Open Meeting
Department of Medical Assistance Services, 600 East Broad
Street, Suite 1300, Richmond, Virginia.

A meeting to provide a forum for ongoing input and communication with transportation providers, health care providers, and recipients regarding the Medicaid nonemergency brokerage transportation program.

Contact: Robert Knox, Transportation Supervisor, Department of Medical Assistance Services, 600 E. Broad St., Suite 1300, Richmond, VA 23219, telephone (804) 371-8854, FAX (804) 786-1680, (800) 343-0634/TTY ☎, e-mail Rknox@dmas.state.va.us.

BOARD OF MEDICINE

† October 9, 2003 - 8 a.m. -- Open Meeting Department of Health Professions, 6603 West Broad Street, 5th Floor, Board Room 2, Richmond, Virginia.

A general business meeting including consideration of regulatory, legislative and disciplinary matters, including consideration of consent orders, as may be presented on the agenda or the amended agenda. Public comment will be received at the beginning of the meeting.

Contact: William L. Harp, M.D., Executive Director, Board of Medicine, Alcoa Bldg., 6603 W. Broad St., 5th Floor, Richmond, VA 23230-1712, telephone (804) 662-9908, FAX (804) 662-9943, (804) 662-7197/TTY **2**, e-mail william.harp@dhp.state.va.us.

Informal Conference Committee

October 22, 2003 - 8:45 a.m. -- Open Meeting
November 19, 2003 - 9 a.m. -- Open Meeting
December 3, 2003 - 9 a.m. -- Open Meeting
Williamsburg Marriott, 50 Kingsmill Road, Williamsburg,
Virginia.

October 29, 2003 - 9:15 a.m. -- Open Meeting November 12, 2003 - 9:15 a.m. -- Open Meeting Clarion Hotel, 3315 Ordway Drive, Roanoke, Virginia.

October 30, 2003 - 9:15 a.m. -- Open Meeting Holiday Inn Select, 2801 Plank Road, Fredericksburg, Virginia.

December 17, 2003 - 9:15 a.m. -- Open Meeting Department of Health Professions, 6603 West Broad Street, Richmond, Virginia.

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 the Code of Virginia. Public comment will not be received.

Contact: Peggy Sadler or Renee Dixson, Staff, Department of Health Professions, 6603 W. Broad St., Richmond, VA 23230, telephone (804) 662-7332, FAX (804) 662-9517, (804) 662-7197/TTY **3**, e-mail Peggy.Sadler@dhp.state.va.us.

STATE MENTAL HEALTH, MENTAL RETARDATION AND SUBSTANCE ABUSE SERVICES BOARD

† October 29, 2003 - 1 p.m. -- Open Meeting † October 30, 2003 - 9 a.m. -- Open Meeting Courtland Center, 620 Court Street, Lynchburg, Virginia. (Interpreter for the deaf provided upon request)

A regular meeting of the board.

Contact: Marlene Butler, Executive Secretary to the Board, State Mental Health, Mental Retardation and Substance Abuse Services Board, Jefferson Bldg., 1220 Bank St., 13th Floor, Richmond, VA 23219, telephone (804) 786-7945, FAX (804) 371-2308, e-mail mbutler@dmhmrsas.state.va.us.

STATE MILK COMMISSION

December 16, 2003 - 10:30 a.m. -- Open Meeting Department of Agriculture and Consumer Services, 1100 Bank Street, 1st Floor Board Room, Richmond, Virginia.

A regular meeting of the commission to consider industry issues, distributor licensing, base transfers, and reports from staff. The commission offers anyone in attendance an opportunity to speak at the conclusion of the agenda. Those persons requiring special accommodations should notify the agency meeting contact at least five working days prior to the meeting date so that suitable arrangements can be made.

Contact: Edward C. Wilson, Jr., Deputy Administrator, State Milk Commission, Washington Bldg., 1100 Bank Street, Suite 1019, Richmond, VA 23219, telephone (804) 786-2013, FAX (804) 786-3779, or e-mail ewilson@smc.state.va.us.

DEPARTMENT OF MINES, MINERALS AND ENERGY

October 11, 2003 - Public comments may be submitted until this date.

Notice is hereby given in accordance with § 2.2-4007 of the Code of Virginia that the Board of Coal Mining Examiners intends to amend regulations entitled 4 VAC 25-20, Board of Coal Mining Examiners Certification Requirements. The purpose of the proposed action is to ensure that miners are certified and perform tasks required to mine coal safely and knowledgeably, to provide for the health and safety of persons and property on or near the mines, to provide a pool of qualified mining employees, and to encourage productive coal mines.

Statutory Authority: §§ 45.1-161.28, 45.1-161.29 and 45.1-161.34 of the Code of Virginia.

Contact: Frank Linkous, Mine Chief, Department of Mines, Minerals and Energy, P.O. Drawer 900, U.S. Route 23 South, Big Stone Gap, VA 24219, telephone (276) 523-8224, (276) 523-8239, FAX (804) 692-3237 or e-mail fal@mme.state.va.us.

October 11, 2003 - Public comments may be submitted until this date.

Notice is hereby given in accordance with § 2.2-4007 of the Code of Virginia that the Department of Mines, Minerals and Energy intends to adopt regulations entitled 4 VAC 25-125, Regulations Governing Coal Stockpiles and Bulk Storage and Handling Facilities. The purpose of the proposed action is to meet industry and worker needs to improve worker safety on and around coal handling and storage facilities at coal mine sites. The Regulations Governing Coal Stockpiles and Bulk Storage and Handling Facilities provides worker protection through the implementation of safe working procedures and practices where there were previously none.

Statutory Authority: §§ 45.1-161.3, 45.1-161.106 and 45.1-161.254 of the Code of Virginia.

Contact: Frank Linkous, Mine Chief, Department of Mines, Minerals and Energy, P.O. Drawer 900, U.S. Route 23 South, Big Stone Gap, VA 24219, telephone (276) 523-8224, (276) 523-8239, FAX (804) 692-3237 or e-mail fal@mme.state.va.us.

† October 14, 2003 - 7 p.m. -- Public Hearing Southwestern Virginia Community College, Community Center, Route 19, 6 miles South of Claypool Hill, Tazewell County, Richlands, Virginia. (Interpreter for the deaf provided upon request)

The Virginia Division of Mineral Mining (DMM) will hold an informal public hearing to receive comments regarding a proposed mining operation in Tazewell County. Persons attending the hearing may present written and/or oral statements, photographs, or other evidence to the hearing officer. The hearing will be recorded. This public hearing will be an informal "information-gathering" forum pertaining to the application for a mining permit administered by the division. A hearing officer appointed by DMM will conduct the hearing. The permit applicant, Creekside Properties, LLC, has submitted a complete application package, which is available for review in the DMM office located at 900 Natural Resources Drive, Charlottesville, Virginia. There will also be an opportunity to review the application package at the site of the hearing between 6 p.m. and 7 p.m. on October 14, 2003. Special accommodations for the disabled will be made available at the public meeting or hearing on request. Anyone needing special accommodations should contact the Department of Mines, Minerals and Energy at least seven days prior to the meeting or hearing date.

Contact: Mark S. Goff, Engineering Manager, Department of Mines, Minerals and Energy, 900 Natural Resources Dr.,

Charlottesville, VA 22903, telephone (434) 951-6313, (800) 828-1120/TTY ☎, e-mail mxg@mme.state.va.us.

DEPARTMENT OF MOTOR VEHICLES

October 23, 2003 - 10 a.m. -- Open Meeting Department of Motor Vehicles, 2300 West Broad Street, 7th Floor, Executive Conference Room, Richmond, Virginia.

A meeting of the Legal Presence Panel.

Contact: Vivian R. Cheatham, Confidential Assistant, Department of Motor Vehicles, 2300 W. Broad St., Richmond, VA 23220, telephone (804) 367-6606, FAX (804) 367-2296, e-mail dmvvrc@dmv.state.va.us.

Medical Advisory Board

† November 12, 2003 - 8 a.m. -- Open Meeting Department of Motor Vehicles, 2300 West Broad Street, Richmond, Virginia. (Interpreter for the deaf provided upon request)

A regular business meeting.

Contact: J. C. Branche, R. N., Division Manager, Department of Motor Vehicles, 2300 W. Broad St., Richmond VA 23220, telephone (804) 497-7188, FAX (804) 367-1604, toll-free (866) 368-5463, (800) 272-9268/TTY **3**, e-mail dmvj3b@dmv.state.va.us.

VIRGINIA MUSEUM OF FINE ARTS

October 7, 2003 - 8 a.m. -- Open Meeting
November 4, 2003 - 8 a.m. -- Open Meeting
Virginia Museum of Fine Arts, 2800 Grove Avenue, Main
Lobby, Conference Room, Richmond, Virginia.

A monthly meeting of the Executive Committee. Public comment will not be received.

Contact: Suzanne Broyles, Secretary of the Museum, Virginia Museum of Fine Arts, 2800 Grove Ave., Richmond, VA 23221, telephone (804) 340-1503, FAX (804) 340-1502, (804) 340-1401/TTY ☎, e-mail sbroyles@vmfa.state.va.us.

November 19, 2003 - 8 a.m. -- Open Meeting Virginia Museum of Fine Arts, 2800 Grove Avenue, Richmond, Virginia.

The following committees will meet: Finance - 9 a.m. - Main Lobby Conference Room Collections - 10 a.m. - Auditorium Expansion - 11 a.m. - CEO Parlor

Public comment will not be received.

Contact: Suzanne Broyles, Secretary of the Museum, Virginia Museum of Fine Arts, 2800 Grove Ave., Richmond, VA 23221, telephone (804) 340-1503, FAX (804) 340-1502, (804) 340-1401/TTY **☎**, e-mail sbroyles@vmfa.state.va.us.

VIRGINIA MUSEUM OF NATURAL HISTORY

October 20, 2003 - 10 a.m. -- Open Meeting
December 10, 2003 - 10 a.m. -- Open Meeting
LeClair Ryan Consulting, 1010 First Union Building, 213 South
Jefferson Avenue, Roanoke, Virginia.

November 14, 2003 - 3 p.m. -- Open Meeting Virginia Museum of Natural History, 1001 Douglas Avenue, Martinsville. Virginia.

A meeting of the Executive Committee to discuss the management and direction of the museum.

Contact: Cindy Rorrer, Administrative Assistant, Virginia Museum of Natural History, 1001 Douglas Ave., Martinsville, VA 24112, telephone (276) 666-8616, FAX (276) 632-6487, (276) 666-8638/TTY **☎**, e-mail crorrer@vmnh.net.

BOARD OF NURSING

October 7, 2003 - 9 a.m. -- Open Meeting
October 8, 2003 - 9 a.m. -- Open Meeting
October 14, 2003 - 9 a.m. -- Open Meeting
October 15, 2003 - 9 a.m. -- Open Meeting
October 21, 2003 - 9 a.m. -- Open Meeting
October 23, 2003 - 9 a.m. -- Open Meeting
October 28, 2003 - 9 a.m. -- Open Meeting
December 3, 2003 - 9 a.m. -- Open Meeting
December 4, 2003 - 9 a.m. -- Open Meeting
December 6, 2003 - 9 a.m. -- Open Meeting
December 16, 2003 - 9 a.m. -- Open Meeting
December 16, 2003 - 9 a.m. -- Open Meeting
December 16, 2003 - 9 a.m. -- Open Meeting

Department of Health Professions, 6603 West Broad Street, 5th Floor, Conference Room 3, Richmond, Virginia.

A Special Conference Committee, comprised of two or three members of the Virginia Board of Nursing, will conduct informal conferences with licensees and certificate holders. Public comment will not be received.

Contact: Jay P. Douglas, R.N., M.S.M., C.S.A.C., Executive Director, Board of Nursing, 6603 West Broad Street, 5th Floor, Richmond, VA 23230, telephone (804) 662-9909, FAX (804) 662-9512, (804) 662-7197/TTY 7, e-mail nursebd@dhp.state.va.us.

November 17, 2003 - 9 a.m. -- Open Meeting November 19, 2003 - 9 a.m. -- Open Meeting November 20, 2003 - 9 a.m. -- Open Meeting

Department of Health Professions, 6603 West Broad Street, 5th Floor, Conference Room 2, Richmond, Virginia.

A panel of the board will conduct formal hearings with licensees or certificate holders. Public comment will not be received.

Contact: Jay P. Douglas, M.S.M., C.S.A.C., Executive Director, Board of Nursing, 6603 W. Broad St., 5th Floor, Richmond, VA 23230, telephone (804) 662-9909, FAX (804) 662-9512, (804) 662-7197/TTY ☎, e-mail nursebd@dhp.state.va.us.

November 18, 2003 - 9 a.m. -- Open Meeting
Department of Health Professions, 6603 West Broad Street,
Board Room 2, 5th Floor, Richmond, Virginia.

A general business meeting including committee reports, consideration of regulatory action, and disciplinary case decisions as presented on the agenda. Public comment will be received at 11 a.m.

Contact: Jay P. Douglas, R.N., Executive Director, Board of Nursing, Alcoa Bldg., 6603 W. Broad St., 5th Floor, Richmond, VA 23230-1712, telephone (804) 662-9909, FAX (804) 662-9512, (804) 662-7197/TTY , e-mail jay.douglas@dhp.state.va.us.

VIRGINIA BOARD FOR PEOPLE WITH DISABILITIES

October 21, 2003 - 9 a.m. -- Open Meeting Williamsburg Marriott Hotel, 50 Kingsmill Road, Williamsburg, Virginia. (Interpreter for the deaf provided upon request)

A two-day planning retreat.

Contact: Sandra Smalls, Executive Assistant to the Director, Virginia Board for People with Disabilities, 202 N. 9th St., 9th Floor, Richmond, VA, telephone (804) 786-9368, FAX (804) 786-1118, toll-free (800) 846-4464, e-mail smallsse@vbpd.state.va.us.

December 2, 2003 - 1 p.m. -- Open Meeting

Virginia Board for People with Disabilities Conference Room, 202 North 9th St, Richmond, Virginia. (Interpreter for the deaf provided upon request)

An Executive Committee meeting.

December 3, 2003 - 9 a.m. -- Open Meeting Virginia Housing Development Authority, Richmond, Virginia. (Interpreter for the deaf provided upon request)

A full board meeting.

Contact: Sandra Smalls, Assistant to the Director, Virginia Board for People with Disabilities, 202 N. 9th St., Richmond, VA, telephone (804) 786-9368, FAX (804) 786-1118, toll-free (800) 866-4464, e-mail smallsse@vbpd.state.va.us.

PESTICIDE CONTROL BOARD

† October 16, 2003 - 9 a.m. -- Open Meeting City Council Chambers City Hall, 715 Princess Anne Street, Fredericksburg, Virginia.

A meeting open to the public to discuss general business matters requiring board action. However, portions of the meeting may be held in closed session, pursuant to § 2.2-3711 of the Code of Virginia. The board will hold a public hearing on proposed amendments to 2 VAC 20-30, Regulations Governing Pesticide Fees Charged by the Department of Agriculture and Consumer Services under Authority of Virginia Pesticide Control Act (see following notice of public hearing). The board will entertain public comment at the beginning of the meeting on all other business for a period not to exceed 30 minutes. Any person desiring to attend the meeting, and requiring special accommodations in order to participate in the meeting, should contact the person identified in this notice at least five days before the meeting date so that suitable

arrangements can be made for any appropriate accommodation

Contact: Dr. Marvin A. Lawson, Director, Division of Consumer Protection, Department of Agriculture and Consumer Services, Washington Building, 1100 Bank Street, 11th Floor. Richmond, VA 23219, telephone (804) 786-3534, FAX (804) 786-5112, toll-free (800) 552-9963, e-mail mlawson@vdacs.state.va.us.

October 16, 2003 - 9 a.m. -- Public Hearing

City Council Chambers, City Hall, 715 Princess Anne Street, Fredericksburg, Virginia.

November 26, 2003 - Public comments may be submitted until this date.

Notice is hereby given in accordance with § 2.2-4007 of the Code of Virginia that the Pesticide Control Board intends to amend regulations entitled 2 VAC 20-30, Rules and Regulations Governing the Pesticide Fees Charged by the Department of Agriculture and Consumer Services Under the Virginia Pesticide Control Act. The purpose of the proposed action is to review the regulation for effectiveness and continued need. The proposed regulations set fees for (i) pesticide products offered for sale in the Commonwealth; (ii) commercial pesticide applicators providers providing pest control services to citizens of the Commonwealth; (iii) registered technician applicators providing pest control services to citizens of the Commonwealth; and (iv) pesticide businesses operating in the Commonwealth. In addition to the fee structure, these regulations establish renewal deadlines and late fees.

Statutory Authority: § 3.1-249.30 of the Code of Virginia.

Contact: Marvin A. Lawson, Director, Pesticide Control Board, 1100 Bank St., Room 401, Richmond, VA 23219, telephone (8904) 786-3534, FAX (804) 786-5112, toll-free 1-800-552-9963, e-mail@vdacs.state.va.us.

BOARD OF PHYSICAL THERAPY

October 24, 2003 - 9 a.m. -- Open Meeting
Department of Health Professions, 6603 West Broad Street,
5th Floor, Richmond, Virginia.

A quarterly business meeting to include regulatory and disciplinary matters as may be presented on the agenda. Public comment will be received at the beginning of the meeting.

Contact: Elizabeth Young, Executive Director, Board of Physical Therapy, Alcoa Bldg., 6603 West Broad St., 5th Floor, Richmond, VA 23230-1712, telephone (804) 662-9924, FAX (804) 662-9523, (804) 662-7197/TTY ☎, e-mail elizabeth.young@dhp.state.va.us.

POLYGRAPH EXAMINERS ADVISORY BOARD

December 3, 2003 - 10 a.m. -- Open Meeting Department of Professional and Occupational Regulation, 3600 West Broad Street, Richmond, Virginia.

A meeting to conduct board business. The department fully complies with the Americans with Disabilities Act.

Contact: Eric Olson, Assistant Director, Department of Professional and Occupational Regulation, 3600 W. Broad St., Richmond, VA 23230, telephone (804) 367-2785, FAX (804) 367-2474, (804) 367-9753/TTY ☎, e-mail olson@dpor.state.va.us.

BOARD FOR PROFESSIONAL AND OCCUPATIONAL REGULATION

November 15, 2003 - 10 a.m. -- Open Meeting Department of Professional and Occupational Regulation, 3600 West Broad Street, Richmond, Virginia.

A meeting of the Professional Boxing and Wrestling Advisory Task Force to discuss proposed wrestling regulations.

Contact: Karen W. O'Neal, Regulatory Programs Coordinator, Department of Professional and Occupational Regulation, 3600 W. Broad St., Richmond, VA 23230, telephone (804) 367-8537, FAX (804) 367-2475, (804) 367-9753/TTY ☎, e-mail oneal@dpor.state.va.us.

BOARD OF PSYCHOLOGY

October 21, 2003 - 9 a.m. -- Open Meeting
Department of Health Professions, 6603 West Broad Street,
Board Room 4, 5th Floor, Richmond, Virginia.

A meeting to hear possible violations of the laws and regulations that govern the practice of psychology.

Contact: Evelyn B. Brown, Executive Director, Board of Psychology, Alcoa Bldg., 6603 W. Broad St., 5th Floor, Richmond, VA 23230-1712, telephone (804) 662-9913, FAX (804) 662-9943, (804) 662-7197/TTY **2**, e-mail evelyn.brown@dhp.state.va.us.

VIRGINIA PUBLIC GUARDIAN AND CONSERVATOR ADVISORY BOARD

December 11, 2003 - 10 a.m. -- Open Meeting Department for the Aging, 1600 Forest Avenue, Suite 102, Richmond, Virginia. ☑

A regular quarterly meeting.

Contact: Terry Raney, Guardianship Coordinator, Department for the Aging, 1600 Forest Ave., Suite 102, Richmond, VA 23229, telephone (804) 662-7049, FAX (804) 662-9354, toll-free (800) 552-3402, (804) 662-9333/TTY ☎, e-mail traney@vdh.stat.va.us.

VIRGINIA RACING COMMISSION

October 15, 2003 - 9:30 a.m. -- Public Hearing
Tyler Building, 1300 East Main Street, Richmond, Virginia.

November 7, 2003 - Public comments may be submitted until this date.

Notice is hereby given in accordance with § 2.2-4007 of the Code of Virginia that the Virginia Racing Commission intends to amend regulations entitled 11 VAC 10-20, Regulations Pertaining to Horse Racing with Pari-Mutuel Wagering. The purpose of the proposed action is to update the criteria for unlimited horse racing facilities in Virginia.

Statutory Authority: § 59.1-369 of the Code of Virginia.

Contact: William H. Anderson, Director of Policy and Planning, Virginia Racing Commission, P.O. Box 208, New Kent, VA 23124, telephone (804) 966-7404, FAX (804) 966-7418 or e-mail Anderson@vrc.state.va.us.

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October 15, 2003 - 9:30 a.m. -- Public Hearing
Tyler Building, 1300 East Main Street, Richmond, Virginia

November 7, 2003 - Public comments may be submitted until this date.

Notice is hereby given in accordance with § 2.2-4007 of the Code of Virginia that the Virginia Racing Commission intends to amend regulations entitled 11 VAC 10-20, Regulations Pertaining to Horse Racing with Pari-Mutuel Wagering. The purpose of the proposed action is to update requests for racing days in Virginia.

Statutory Authority: § 59.1-369 of the Code of Virginia.

Contact: William H. Anderson, Director of Policy and Planning, Virginia Racing Commission, P.O. Box 208, New Kent, VA 23124, telephone (804) 966-7404, FAX (804) 966-7418 or e-mail Anderson@vrc.state.va.us.

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October 15, 2003 - 9:30 a.m. -- Public Hearing
Tyler Building, 1300 East Main Street, Richmond, Virginia.

November 7, 2003 - Public comments may be submitted until this date.

Notice is hereby given in accordance with § 2.2-4007 of the Code of Virginia that the Virginia Racing Commission intends to amend regulations entitled 11 VAC 10-20, Regulations Pertaining to Horse Racing with Pari-Mutuel Wagering. The purpose of the proposed action is to update the assignment of racing days within Virginia.

Statutory Authority: § 59.1-369 of the Code of Virginia.

Contact: William H. Anderson, Director of Policy and Planning, Virginia Racing Commission, P.O. Box 208, New Kent, VA 23124, telephone (804) 966-7404, FAX (804) 966-7418 or e-mail Anderson@vrc.state.va.us.

REAL ESTATE APPRAISER BOARD

November 18, 2003 - 10 a.m. -- Open Meeting Department of Professional and Occupational Regulation, 3600 West Broad Street, Richmond, Virginia.

A meeting to conduct board business.

Contact: Karen W. O'Neal, Regulatory Programs Coordinator, Real Estate Appraiser Board, 3600 W. Broad St., Richmond, VA 23230, telephone (804) 367-8537, FAX (804) 367-2475, (804) 367-9753/TTY ☎, e-mail oneal@dpor.state.va.us.

REAL ESTATE BOARD

October 22, 2003 - 1 p.m. -- Open Meeting November 12, 2003 - 9 a.m. -- Open Meeting November 13, 2003 - 9 a.m. -- Open Meeting December 17, 2003 - 9 a.m. -- Open Meeting December 18, 2003 - 9 a.m. -- Open Meeting

Department of Professional and Occupational Regulation, 3600 West Broad Street, Richmond, Virginia. (Interpreter for the deaf provided upon request)

A meeting to conduct informal fact-finding conferences. Persons desiring to participate in the meeting and requiring special accommodations or interpreter services should contact the department at least 10 days prior to the meeting so that suitable arrangements can be made. The department fully complies with the Americans with Disabilities Act.

Contact: Ilona LaPaglia, Legal Assistant, Department of Professional and Occupational Regulation, 3600 W. Broad St., Richmond, VA 23230, telephone (804) 367-2394, FAX (804) 367-0194, (804) 367-9753/TTY **2**, e-mail amaker@dpor.state.va.us.

October 22, 2003 - 4 p.m. -- Open Meeting December 3, 2003 - 4 p.m. -- Open Meeting

Department of Professional and Occupational Regulation, 3600 West Broad Street, Richmond, Virginia.

A meeting of the Education Committee to review education applications.

Contact: Karen W. O'Neal, Regulatory Programs Coordinator, Department of Professional and Occupational Regulation, 3600 W. Broad St., Richmond, VA 23230, telephone (804) 367-8537, FAX (804) 367-2475, (804) 367-9753/TTY **☎**, e-mail oneal@dpor.state.va.us.

October 23, 2003 - 8:30 a.m. -- Open Meeting
December 4, 2003 - 8:30 a.m. -- Open Meeting
Department of Professional and Occupational Regulation,
3600 West Broad Street, Richmond, Virginia.

A meeting of the Fair Housing Board to review fair housing cases.

Contact: Karen W. O'Neal, Regulatory Programs Coordinator, Department of Professional and Occupational Regulation, 3600 W. Broad St., Richmond, VA 23230, telephone (804) 367-8537, FAX (804) 367-2475, (804) 367-9753/TTY ★, e-mail oneal@dpor.state.va.us.

October 23, 2003 - 9 a.m. -- Open Meeting
December 4, 2003 - 9 a.m. -- Open Meeting
Department of Professional and Occupational Regulation,
3600 West Broad Street, Richmond, Virginia.

A meeting of the board to conduct board business.

Contact: Karen W. O'Neal, Regulatory Programs Coordinator, Department of Professional and Occupational Regulation, 3600 W. Broad St., Richmond, VA 23230, telephone (804) 367-8537, FAX (804) 367-2475, (804) 367-9753/TTY ★ e-mail oneal@dpor.state.va.us.

DEPARTMENT OF REHABILITATIVE SERVICES

- † November 12, 2003 3:30 p.m. -- Open Meeting
 Department of Mental Health, Mental Retardation and
 Substance Abuse Services, Central Virginia Training Center,
 521 Colony Road, Lynchburg, Virginia. (Interpreter for the
 deaf provided upon request)
- † November 12, 2003 3:30 p.m. -- Open Meeting
 Piedmont Geriatric Hospital, 5001 East Patrick Henry
 Highway, Burkeville, Virginia. (Interpreter for the deaf
 provided upon request)
- † November 13, 2003 3:30 p.m. -- Open Meeting Southside Virginia Training Center, 26317 West Washington Street, Petersburg, Virginia. (Interpreter for the deaf provided upon request)
- † November 17, 2003 4 p.m. -- Open Meeting Woodrow Wilson Rehabilitation Center, William Cashett Chapel, Route 250, Fishersville, Virginia. (Interpreter for the deaf provided upon request)
- † November 19, 2003 3:30 p.m. -- Open Meeting Southwestern Virginia Mental Health Institute, 340 Bagley Circle, Marion, Virginia. (Interpreter for the deaf provided upon request)
- † November 19, 2003 3:30 p.m. -- Open Meeting Southwestern Virginia Training Center, State Route 707, Hillsville, Virginia. (Interpreter for the deaf provided upon request)
- † November 20, 2003 3:30 p.m. -- Open Meeting Northern Virginia Training Center, 9901 Braddock Road, Fairfax, Virginia. (Interpreter for the deaf provided upon request)

Public forums to seek input regarding vocational rehabilitation and supported employment services provided to Virginians with disabilities. The State Plan may be reviewed at www.vadrs.org or www.va-src.org.

Contact: Rhonda Earman, Department of Rehabilitative Services, 8004 Franklin Farms Drive, P.O. Box K-300, Richmond, VA 23288-0300, telephone (804) 662-7611, FAX (804) 662-7696, toll-free (800) 552-5019, (804) 662-9040/TTY , e-mail srcweb@dsa.state.va.us.

VIRGINIA RESOURCES AUTHORITY

† October 14, 2003 - 9 a.m. -- Open Meeting Marriott Courtyard, 1890 Evelyn Byrd Avenue, Harrisonburg, Virginia.

† November 13, 2003 - 9 a.m. -- Open Meeting Eighth and Main Building, 707 East Main Street, 2nd Floor, Richmond, Virginia.

A regular meeting of the Board of Directors to (i) review and, if appropriate, approve the minutes from the most recent monthly meeting; (ii) review the authority's operations for the prior month; (iii) review applications for loans submitted to the authority for approval: (iv) consider loan commitments for approval and ratification under its various programs; (v) approve the issuance of any bonds; (vi) review the results of any bond sales; and (vii) consider such other matters and take such other actions as it may deem appropriate. Various committees of the Board of Directors may also meet immediately before or after the regular meeting and consider matters within their purview. The planned agenda of the meeting and any committee meetings will be available at the offices of the authority one week prior to the date of the meeting. Any person who needs any accommodation in order to participate in the meeting should contact the authority at least 10 days before the meeting so that suitable arrangements can be made.

Contact: Bonnie R. C. McRae, Executive Assistant, Virginia Resources Authority, 707 East Main Street, Richmond, VA 23219, telephone (804) 644-3100, FAX (804) 644-3109, e-mail bmcrae@vra.state.va.us.

SCIENCE MUSEUM OF VIRGINIA

† October 22, 2003 - Noon -- Open Meeting Science Museum of Virginia, 2500 West Broad Street, Richmond, Virginia. (Interpreter for the deaf provided upon request)

A quarterly meeting of the Finance Committee.

Contact: Nina Johnson, Administrative Assistant, Science Museum of Virginia, 2500 W. Broad St., Richmond, VA, telephone (804) 864-1493, FAX (804) 864-1560, toll-free (800) 659-1727, (804) 828-1140/TTY ☎, e-mail njohnson@smv.org.

VIRGINIA SMALL BUSINESS FINANCING AUTHORITY

† October 28, 2003 - 11 a.m. -- Open Meeting Department of Business Assistance, 707 East Main Street, 3rd Floor, Richmond, Virginia.

A meeting to review applications for loans submitted to the authority for approval and to conduct general business of the board. Meeting time is subject to change depending upon the agenda of the board.

Contact: Scott E. Parsons, Executive Director, Department of Business Assistance, P.O. Box 446, Richmond, VA 23218-0446, telephone (804) 371-8256, FAX (804) 225-3384, toll-free (866) 248-8814, e-mail sparsons@dba.state.va.us.

DEPARTMENT OF SOCIAL SERVICES

October 10, 2003 - 10 a.m. -- Open Meeting Charlottesville, Virginia.

A quarterly meeting of the Virginia Commission on National and Community Services.

Contact: Felicia Jones, Administrative Assistant, Department of Social Services, 730 E. Broad St., 8th Floor, Richmond, VA 23219, telephone (804) 692-1998, FAX (804) 692-1999, toll-free (800) 638-3839, e-mail fyj900@email1.dss.state.va.us.

BOARD FOR PROFESSIONAL SOIL SCIENTISTS AND WETLAND PROFESSIONALS

† October 15, 2003 - 10 a.m. -- Open Meeting
Department of Professional and Occupational Regulation,
3600 West Broad Street, Richmond Virginia. (Interpreter for
the deaf provided upon request)

A meeting to conduct board business. The meeting is open to the public; however, a portion of the board's business may be discussed in closed session. Persons desiring to participate in the meeting and requiring special accommodations or interpretive services should contact the department at least 10 days prior to the meeting so that suitable arrangements can be made. The department fully complies with the Americans with Disabilities Act.

Contact: Mark N. Courtney, Executive Director, Board for Professional Soil Scientists and Wetland Professionals, 3600 W. Broad St., Richmond, VA 23230, telephone (804) 367-8514, FAX (804) 367-2475, (804) 367-9753/TTY ☎, e-mail soilscientist@dpor.state.va.us.

October 24, 2003 - Public comments may be submitted until this date.

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Notice is hereby given in accordance with § 2.2-4007 of the Code of Virginia that the Board for Professional Soil Scientists and Wetland Professionals intends to adopt regulations entitled 18 VAC 145-30, Wetland Delineators Certification Regulations. The purpose of the proposed action is to promulgate regulations to implement a regulatory program for wetland professionals in accordance with Chapter 784 of the 2002 Acts of Assembly.

Statutory Authority: §§ 54.1-201 and 54.1-2203 of the Code of Virginia.

Contact: Mark N. Courtney, Executive Director, Department of Professional and Occupational Regulation, 3600 W. Broad St., Richmond, VA 23230-4917, telephone (804) 367-8514, FAX (804) 367-2475 or e-mail SoilScientist@dpor.state.va.us.

COUNCIL ON TECHNOLOGY SERVICES

November 6, 2003 - 2 p.m. -- Open Meeting December 4, 2003 - 2 p.m. -- Open Meeting

Department of Information Technology, 110 South 7th Street, 3rd Floor, Executive Conference Room, Richmond, Virginia.

A regular monthly meeting of the Executive Committee. Agenda and meeting information available at www.cots.state.va.us.

Contact: Jenny Hunter, COTS Executive Director, Council on Technology Services, Department of Technology Planning, 110 S. 7th St., Richmond, VA 23219, telephone (804) 786-9579, FAX (804) 786-9584, e-mail jhunter@gov.state.va.us.

October 8, 2003 - 9:30 a.m. -- Open Meeting

November 12, 2003 - 9:30 a.m. -- Open Meeting

December 10, 2003 - 9:30 a.m. -- Open Meeting

Department of Motor Vehicles, 2300 West Broad Street, 7th

Floor, Executive Conference Room, Richmond, Virginia.

A regular monthly meeting of the Change Management Workgroup. Agenda and details available at www.cots.state.va.us.

Contact: Jenny Hunter, COTS Executive Director, Council on Technology Services, 110 S. 7th St., Suite 135, Richmond, VA 23219, telephone (804) 786-9579, FAX (804) 786-9584, e-mail jhunter@gov.state.va.us.

October 16, 2003 - 3 p.m. -- Open Meeting
November 20, 2003 - 3 p.m. -- Open Meeting
December 18, 2003 - 3 p.m. -- Open Meeting
Department of Rehabilitative Services, 8004 Franklin Farms
Drive, Lee Building, Rooms 101, 103, and 105, Richmond,
Virginia. (Interpreter for the deaf provided upon request)

A regular monthly meeting of the Security Workgroup. Agenda and details can be found at www.cots.state.va.us.

Contact: Jenny Hunter, COTS Executive Director, Council on Technology Services, 110 S. 7th St., Suite 135, Richmond, VA 23219, telephone (804) 786-9579, FAX (804) 786-9584, e-mail jhunter@gov.state.va.us.

COMMONWEALTH TRANSPORTATION BOARD

October 15, 2003 - 1 p.m. -- Open Meeting Hampton Inn Col Alto, 401 East Nelson Street, Lexington, Virginia.

A work session of the Commonwealth Transportation Board and the Department of Transportation and Department of Rail and Public Transportation staff.

Contact: Katherine Tracy, Assistant Secretary, Commonwealth Transportation Board, 1401 E. Broad St., Richmond, VA 23219, telephone (804) 786-3090, FAX (804) 225-4700, e-mail Katherine.Tracy@VirginiaDOT.org.

October 15, 2003 - 4 p.m. -- Open Meeting Hampton Inn Col Alto, 401 East Nelson Street, Lexington, Virginia.

A meeting to vote on proposals presented regarding bids, permits, conveyances, and any other matters requiring board approval. Public comment will be received at the outset of the meeting on items on the meeting agenda for which the opportunity for public comment has not been afforded the public in another forum. Remarks will be limited to five minutes. Groups are asked to select one individual to speak for the group. The board reserves the right to amend

these conditions. Separate committee meetings may be held on call of the chairman. Contact VDOT Public Affairs at (804) 786-3090 for schedule.

Contact: Katherine Tracy, Assistant Secretary, Commonwealth Transportation Board, 1401 E. Broad St., Richmond, VA 23219, telephone (804) 786-3090, FAX (804) 225-4700, e-mail Katherine.Tracy@VirginiaDOT.org.

STATE WATER CONTROL BOARD

October 10, 2003 - Public comments may be submitted until this date.

Notice is hereby given in accordance with § 2.2-4007 of the Code of Virginia that the State Water Control Board intends to amend regulations entitled 9 VAC 25-580, Underground Storage Tanks: Technical Standards and Corrective Action Requirements. The purpose of the proposed regulation is to incorporate changes in the law and clarify that UST systems that missed the deadline for upgrade must be closed in accordance with the requirements of the regulation.

Statutory Authority: §§ 62.1-44.15 and 62.1-44.44.34:9 of the Code of Virginia.

Contact: Fred Cunningham, Department of Environmental Quality, P.O. Box 10009, Richmond, VA 23240, telephone (804) 698-4285, FAX (804) 698-4266 or e-mail fkcunningh@deq.state.va.us.

October 10, 2003 - Public comments may be submitted until this date.

Notice is hereby given in accordance with § 2.2-4007 of the Code of Virginia that the State Water Control Board intends to adopt regulations entitled 9 VAC 25-770, Financial Responsibility Requirements for Mitigation Associated with Tidal Dredging Projects. The purpose of the proposed regulation is to establish requirements for demonstrating financial responsibility for the completion of compensatory mitigation requirements for dredging projects in tidal waters permitted under Virginia Water Protection Permit Program and the acceptable mechanisms for making the demonstration.

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

Contact: Ellen Gilinsky, Department of Environmental Quality, P.O. Box 10009, Richmond, VA 23240, telephone (804) 698-4375, FAX (804) 698-4032 or e-mail egilinsky@deq.state.va.us.

† October 14, 2003 - 10 a.m. -- Open Meeting
Department of Forestry, 900 Natural Resources Drive,
Headquarters Building, Charlottesville, Virginia.

† November 12, 2003 - 11 a.m. -- Open Meeting Department of Environmental Quality, Piedmont Regional Office, 4949-A Cox Road, Glen Allen, Virginia.

A meeting of the technical advisory committee assisting the department in the development of regulatory actions to

implement the federal confined animal feeding operation regulations.

Contact: T. Scott Haley, Confined Animal Feeding Operations, Department of Environmental Quality, P.O. Box 10009, Richmond, VA 23240, telephone (804) 698-4443, FAX (804) 698-4032, e-mail tshaley@deq.state.va.us.

BOARD FOR WATERWORKS AND WASTEWATER WORKS OPERATORS

† December 8, 2003 - 8:30 a.m. -- Open Meeting Department of Professional and Occupational Regulation, 3600 West Broad Street, Richmond, Virginia.

A meeting to conduct board business.

Contact: David E. Dick, Assistant Director, Board for Waterworks and Wastewater Works Operators, 3600 W. Broad St., Richmond, VA 23230, telephone (804) 367-8595, FAX (804) 367-6128, (804) 367-9753/TTY ☎, e-mail waterwasteoper@dpor.state.va.us.

INDEPENDENT

VIRGINIA RETIREMENT SYSTEM

† October 8, 2003 - 11 a.m. -- Open Meeting Virginia Retirement System, 1200 East Main Street, Richmond, Virginia.

A regular meeting of the Real Estate Advisory Committee. No public comment will be received at the meeting.

Contact: LaShaunda B. King, Administrative Secretary, Virginia Retirement System, 1200 E. Main St., Richmond, VA 23219, telephone (804) 649-8059, FAX (804) 786-1541, toll-free (888) 827-3847, (804) 344-3190/TTY **2**, e-mail lking@vrs.state.va.us.

October 15, 2003 - 8:30 a.m. -- Open Meeting
October 30, 2003 - 10 a.m. -- Open Meeting
Virginia Retirement System Headquarters Building, 1200 East
Main Street, Richmond, Virginia.

A meeting of the Optional Retirement Plan Advisory Committee. No public comment will be received at the meeting.

Contact: LaShaunda B. King, Administrative Secretary, Virginia Retirement System, 1200 E. Main St., Richmond, VA 23219, telephone (804) 344-3124, FAX (804) 786-1541, toll-free (888) 827-3847, (804) 344-3190/TTY ☎, e-mail lking@vrs.state.va.us.

free (888) 827-3847, (804) 344-3190/TTY **2**, lking@vrs.state.va.us. **October 7, 2003 - 9 a.m. --** Open Meeting **† November 19, 2003 - 11 a.m. --** Open Meeting

† December 17, 2003 - 3 p.m. -- Open Meeting Bank of America Building, 1111 East Main Street, 4th Floor Conference Room, Richmond, Virginia 23219.

The regular meeting of the Investment Advisory Committee of the VRS Board of Trustees. No public comment will be received at the meeting.

Contact: Phyllis Henderson, Investment Department Administrative Assistant, Virginia Retirement System, 1111 East Main Street, Richmond, Virginia 23219, telephone (804) 649-8059, FAX (804) 786-1541, toll-free (888) 827-3847, (804) 344-3190/TTY ☎, e-mail phenderson@vrs.state.va.us.

† October 8, 2003 - 9 a.m. -- Open Meeting
November 20, 2003 - 9 a.m. -- Open Meeting
December 18, 2003 - 9 a.m. -- Open Meeting
VRS Headquarters, 1200 East Main Street, Richmond, Virginia

A regular meeting of the Board of Trustees. No public comment will be received.

Contact: Darla K. Glazier, Office Manager, Virginia Retirement System, P.O. Box 2500, Richmond, VA 23218, telephone (804) 649-8059, FAX (804) 786-1541, toll-free (888) 827-3847, (804) 344-3190/TTY ☎, e-mail dkestner@vrs.state.va.us.

November 19, 2003 - 3 p.m. -- Open Meeting VRS Headquarters, 1200 East Main Street, Richmond, Virginia.

Regular meetings of the following committees: Administration and Personnel - 3 p.m. Benefits and Actuarial - 3 p.m. Audit and Compliance - 4 p.m.

Contact: LaShaunda B. King, Acting Office Manager, Virginia Retirement System, P.O. Box 2500, Richmond, VA 23218, telephone (804) 649-8059, FAX (804) 786-1541, toll-free (888) 827-3847, (804) 344-3190/TTY 7, e-mail lking@vrs.state.va.us.

LEGISLATIVE

VIRGINIA CODE COMMISSION

October 22, 2003 - 10 a.m. -- Open Meeting
November 19, 2003 - 10 a.m. -- Open Meeting
† December 17, 2003 - 10 a.m. -- Open Meeting
General Assembly Bldg., 6th Floor, Speaker's Conference
Room, Richmond, Virginia. (Interpreter for the deaf provided upon request)

A meeting to continue with the recodification of Titles 1, 3.1 and 37.1 and to conduct any other business that may come before the commission. Public comment will be received at the end of the meeting.

Contact: Jane Chaffin, Registrar of Regulations, Virginia Code Commission, General Assembly Bldg., 910 Capitol St., 2nd Floor, Richmond, VA 23219, telephone (804) 786-3591, FAX (804) 692-0625, e-mail jchaffin@leg.state.va.us.

JOINT COMMISSION ON TECHNOLOGY AND SCIENCE

October 7, 2003 - 9:30 a.m. -- Open Meeting General Assembly Building, 9th and Broad Streets, House Room D, Richmond, Virginia.

A meeting of the JCOTS Cyberlaw Advisory Committee. The meeting will also be teleconferenced at 510 Cumberland Street, Suite 308, Bristol, Virginia.

Contact: Mitchell Goldstein, Director, Joint Commission on Technology and Science, General Assembly Bldg., 910 Capitol St., Richmond, VA 23219, telephone (804) 786-3591, e-mail jcots@leg.state.va.us.

October 8, 2003 - 1:30 p.m. -- Open Meeting

General Assembly Building, 9th and Broad Streets, House Room D, Richmond, Virginia.

A meeting of the JCOTS Advisory Committee on Integrated Government.

Contact: Eric Link, Staff Attorney, Joint Commission on Technology and Science, General Assembly Bldg., 2nd Floor, 910 Capitol St., Richmond, VA 23219, telephone (804) 786-3591, FAX (804) 371-0169, e-mail elink@leg.state.va.us.

October 21, 2003 - 9:30 a.m. -- Open Meeting

General Assembly Building, 9th and Broad Streets, Senate Room A, Richmond, Virginia.

A meeting of the JCOTS Advisory Committee on Consumer Protection.

Contact: Mitchell Goldstein, Director, Joint Commission on Technology and Science, General Assembly Bldg., 2nd Floor, 910 Capitol St., Richmond, VA 23219, telephone (804) 786-3591.

October 22, 2003 - 1:30 p.m. -- Open Meeting

General Assembly Building, 9th and Broad Streets, House Room D, Richmond, Virginia.

A meeting of the JCOTS Advisory Committee on the Hard Sciences.

Contact: Eric Link, Staff Attorney, Joint Commission on Technology and Science, General Assembly Bldg., 2nd Floor, 910 Capitol St., Richmond, VA 23219, telephone (804) 786-3591, FAX (804) 371-0169, e-mail elink@leg.state.va.us.

December 2, 2003 - 10 a.m. -- Open Meeting

General Assembly Building, 9th and Broad Streets, House Room D, Richmond, Virginia.

A meeting of the Joint Commission on Technology and Science. This meeting also will be teleconferenced from 510 Cumberland St., Suite 308, Bristol, Virginia.

Contact: Mitchell Goldstein, Director, Joint Commission on Technology and Science, General Assembly Building, 2nd Floor, 910 Capitol St., Richmond, VA 23219, telephone (804) 786-3591, FAX (804) 371-0169.

CHRONOLOGICAL LIST

OPEN MEETINGS

October 6

Cemetery Board Conservation and Recreation, Department of

October 7

Cemetery Board

† Education, Board of

Environmental Quality, Department of

† Funeral Directors and Embalmers, Board of Museum of Fine Arts, Virginia

- Executive Committee

Nursing, Board of

- Special Conference Committee
- † Retirement System, Virginia
 - Investment Advisory Committee

Technology and Science, Joint Commission on

- Advisory Committee on Cyberlaw

October 8

Blind and Vision Impaired, Department for the Competition Council, Commonwealth

† Contractors, Board for

Nursing, Board of

- Special Conference Committee
- † Retirement System, Virginia
 - Board of Trustees
 - Real Estate Advisory Committee

Technology Services, Council on

- Change Management Workgroup

Technology and Science, Joint Commission on

- Advisory Committee on Integrated Government

October 9

† Auctioneers Board

Environmental Quality, Department of

Medical Assistance Services, Department of

† Medicine, Board of

October 10

Social Services, Department of

Virginia Commission on National and Community Service

October 14

Alcoholic Beverage Control Board

Blind and Vision Impaired, Board for the

Contractors, Board for

Environmental Quality, Department of

Medical Assistance Services, Department of

- Medicaid Physician Advisory Committee

Nursing, Board of

- Special Conference Committee
- † Resources Authority, Virginia
- † Water Control Board, State

October 15

Blind and Vision Impaired, Department for the Compensation Board

- † Conservation and Recreation, Department of
 - Virginia Soil and Water Conservation Board
- † Environmental Quality, Department of
- Water Policy Technical Advisory Committee

Medical Assistance Services, Department of

- Medicaid Transportation Advisory Committee Nursing, Board of
 - Special Conference Committee
- † Professional Soil Scientists and Wetland Professionals, Board for

Retirement System, Virginia

- Optional Retirement Plan Advisory Committee Transportation Board, Commonwealth

October 16

Accountancy, Board of

- Enforcement Committee

Design-Build/Construction Management Review Board

† Pesticide Control Board

Technology Services, Council on

- Security Workgroup

October 17

Health Professions, Department of

October 19

Correctional Education, Board of

October 20

† Environmental Quality, Department of Medical Assistance Services, Department of

Museum of Natural History, Virginia

- Executive Committee

October 21

Contractors, Board for

† Environmental Quality, Department of

Nursing, Board of

- Special Conference Committee

People with Disabilities, Virginia Board for

Psychology, Board of

Technology and Science, Joint Commission on

- Advisory Committee on Consumer Protection

October 22

Code Commission, Virginia

† Education. Board of

† Environmental Quality, Department of

Health, Department of

- Sewage Handling and Disposal Appeal Review Board

† Health Professions, Board of

- Executive Committee

- Regulatory Research Committee

Medicine, Board of

- Informal Conference Committee

Real Estate Board

- Education Committee

† Science Museum of Virginia

- Board of Trustees Finance Committee

Technology and Science, Joint Commission on

- Advisory Committee on The Hard Sciences

October 23

† Environmental Quality, Department of

Game and Inland Fisheries, Board of

† Labor and Industry, Department of

- Virginia Apprenticeship Council Motor Vehicles, Department of

Nursian Doord of

Nursing, Board of

- Special Conference Committee

Real Estate Board

- Fair Housing Board

October 24

† Counseling, Board of

- Regulatory Standards Subcommittee

Health, State Board of

Physical Therapy, Board of

October 27

Alcoholic Beverage Control Board

† Barbers and Cosmetology, Board for

October 28

† Blind and Vision Impaired, Department for the

† Virginia Small Business Financing Authority

† Chesapeake Bay Local Assistance Board

- Northern Area Review Committee Meeting

- Southern Area Review Committee Meeting

Contractors. Board for

- Contractor Recovery Fund

Marine Resources Commission

Nursing, Board of

- Special Conference Committee

October 29

At-Risk Youth and Families, Comprehensive Services for

- State Executive Council

Contractors, Board for

- Contractor Recovery Fund

- Informal Fact-Finding Conference

- Tradesman and Education Committee

Labor and Industry, Department of

- Virginia Migrant and Seasonal Farmworkers Board

Medicine. Board of

- Informal Conference Committee

† Mental Health, Mental Retardation and Substance Abuse Services Board, State

October 30

† Education, Board of

- Consolidation Task Force

Medical Assistance Services, Department of

Medicine, Board of

- Informal Conference Committee

† Mental Health, Mental Retardation and Substance Abuse Services Board. State

Retirement System, Virginia

- Optional Retirement Plan Advisory Committee

October 31

† Blind and Vision Impaired, Department for the

November 4

Asbestos, Lead and Home Inspectors, Virginia Board for Contractors, Board for

Museum of Fine Arts, Virginia

- Executive Committee

November 5

Higher Education Tuition Trust Fund, Virginia

Jamestown-Yorktown Foundation

- Jamestown 2007 Executive Committee

† Labor and Industry, Department of

- Safety and Health Codes Board

November 6

Audiology and Speech-Language Pathology, Board of

† Environmental Quality, Department of

Information Technologies Agency, Virginia

- Virginia Geographic Information Network Advisory Board

Technology Services, Council on

- Executive Committee

November 7

Art and Architectural Review Board

November 10

Alcoholic Beverage Control Board

† Local Government, Commission on

November 12

Information Technologies Agency, Virginia

- Wireless E-911 Services Board

† Juvenile Justice, State Board of

Medicine, Board of

- Informal Conference Committee
- † Motor Vehicles, Department of
 - Medical Advisory Board

Real Estate Board

† Rehabilitative Services, Department of

Technology Services, Council on

- Change Management Workgroup
- † State Water Control Board

November 13

Environmental Quality, Department of

- Recycling Markets Development Council

Real Estate Board

- † Rehabilitative Services, Department of
- † Resources Authority, Virginia

November 14

Child Fatality Review Team, State

Health, Department of

- Emergency Medical Services Advisory Board

Museum of Natural History, Virginia

- Executive Committee

November 15

Professional and Occupational Regulation, Department of

- Professional Boxing and Wrestling Advisory Task Force

November 17

Education, Board of

- Advisory Board for Teacher Education and Licensure Jamestown-Yorktown Foundation
 - Board of Trustees

The Library of Virginia

- Archival and Information Services Committee
- Collection and Management Services Committee
- Legislative and Finance Committee
- Library Board
- Publications and Educational Services Committee
- Public Library Development Committee
- Records Management Committee

Nursing, Board of

† Rehabilitative Services, Department of

November 18

Jamestown-Yorktown Foundation

Board of Trustees

Nursing, Board of

Real Estate Appraiser Board

November 19

Code Commission, Virginia

Contractors, Board for

Education, Board of

George Mason University

Medicine, Board of

- Informal Conference Committee

Museum of Fine Arts, Virginia

- Collections Committee
- Expansion Committee
- Finance Committee

Nursing, Board of

† Rehabilitative Services, Department of

Retirement System, Virginia

- Administration and Personnel Committee
- Audit and Compliance Committee
- Benefits and Actuarial Committee

- Investment Advisory Committee

November 20

Design-Build/Construction Management Review Board

Geology, Board for

Health, Department of

- Sewage Handling and Disposal Advisory Committee

Nursing, Board of

† Rehabilitative Services, Department of

Retirement System, Virginia

- Board of Trustees

Technology Services, Council on

- Security Workgroup

November 21

Counseling, Board of

November 24

Alcoholic Beverage Control Board

November 26

At-Risk Youth and Families, Comprehensive Services for

- State Executive Council

Funeral Directors and Embalmers. Board of

- Regulatory/Legislative Committee

December 2

† Charitable Gaming Board

Contractors, Board for

People with Disabilities, Virginia Board for

Technology and Science, Joint Commission on

December 3

Alzheimer's Disease and Related Disorders Commission Medicine. Board of

- Informal Conference Committee

Nursing, Board of

- Special Conference Committee

People with Disabilities, Virginia Board for

Polygraph Examiners Advisory Board

Real Estate Board

- Education Committee

December 4

Nursing, Board of

- Special Conference Committee

Real Estate Board

- Fair Housing Board

Technology Services, Council on

- Executive Committee

December 5

Art and Architectural Review Board

December 8

Alcoholic Beverage Control Board

† Waterworks and Wastewater Works Operators, Board for

December 9

Contractors, Board for

Medical Assistance Services, Board of

Nursing, Board of

- Special Conference Committee

December 10

Funeral Directors and Embalmers, Board of

Jamestown-Yorktown Foundation

- Steering Committee

Museum of Natural History

- Executive Committee
Technology Services, Council on

- Change Management Workgroup

Monday, October 6, 2003

December 11

Public Guardian and Conservator Advisory Board, Virginia

December 12

Health, Department of

- Early Hearing Detection and Intervention Program

Advisory Committee

Department of Health Professions

December 16

Milk Commission

Nursing, Board of

- Special Conference Committee

December 17

† Code Commission, Virginia

Medical Assistance Services, Department of

- Medicaid Transportation Advisory Committee

Medicine. Board of

- Informal Conference Committee

Real Estate Board

Retirement System, Virginia

- Investment Advisory Committee

December 18

Design-Build/Construction Management Review Board

Real Estate Board

Retirement System, Virginia

- Board of Trustees

Technology Services, Council on

- Security Workgroup

December 22

Alcoholic Beverage Control Board

December 31

At-Risk Youth and Families, Comprehensive Services for

- State Executive Council

January 6

† Geology, Board for

PUBLIC HEARINGS

October 10

Soil Scientists and Wetland Professionals, Board for

Professional

October 14

† Education, Board for

† Mines, Minerals and Energy, Department of

October 15

Racing Commission, Virginia

October 16

† Education, Board of

Pesticide Control Board

November 12

† Juvenile Justice, State Board of

December 11

Criminal Justice Services Board