Volume 20
Number 20
August 15, 2003
Pages 2743 - 2830

# The Oklahoma Register

Oklahoma
Secretary of State
Office of Administrative Rules

**Brad Henry, Governor**
**M. Susan Savage,**
**Secretary of State**
**Peggy Coe, Managing Editor**

***THE OKLAHOMA REGISTER*** is an official publication of the State of Oklahoma. It is published semi-monthly on the first working day of the month and on the first working day following the 14th day of the month under the authority of 75 O.S., Sections 250 et seq. and OAC 655:10-15-1. The rules of the State of Oklahoma are codified and published in the *Oklahoma Administrative Code*.

*The Oklahoma Register* and the documents submitted for publication are **AVAILABLE FOR PUBLIC INSPECTION** at the Office of Administrative Rules pursuant to the Oklahoma Open Records Act. Copies of the *Register* are also available for public inspection at many County Clerks' offices in Oklahoma, the Jan Eric Cartwright Memorial Law Library in the State Capitol, and the following depository libraries:

**Ada** - East Central University, Linscheid Library
**Alva** - Northwestern Oklahoma State University, J.W. Martin Library
**Bartlesville** - Bartlesville Public Library
**Chickasha** - University of Science and Arts of Oklahoma, Nash Library
**Clinton** - Clinton Public Library
**Durant** - Southeastern Oklahoma State University, H.G. Bennett Memorial Library
**Edmond** - University of Central Oklahoma, Chambers Library
**Enid** - Public Library of Enid and Garfield County
**Lawton** - Lawton Public Library
**McAlester** - McAlester Public Library
**Norman** - University of Oklahoma, Bizzell Memorial Library
**Oklahoma City** - Metropolitan Library System
**Oklahoma City** - Oklahoma Department of Libraries
**Stillwater** - Oklahoma State University, Edmon Low Library
**Tahlequah** - Northeastern State University, John Vaughan Library
**Tulsa** - Tulsa City-County Library System
**Tulsa** - University of Tulsa, McFarlin Library
**Weatherford** - Southwestern Oklahoma State University, Al Harris Library

**CITE MATERIAL PUBLISHED IN *THE OKLAHOMA REGISTER*** by the volume and the document's beginning page number. *For example: 20 Ok Reg 256.*

**SUBSCRIPTION RATES** for the *Register* are $500.00 per year for the printed issues and $300.00 per year for the monthly CD-ROMs (two issues per disk), payable in advance. When available, individual printed issues may be purchased for $20.00 plus the cost of postage, payable in advance. Make checks payable to "Secretary of State." Send subscription requests, change of address notices, and undelivered copies to: Secretary of State, Office of Administrative Rules, P.O. Box 53390, Oklahoma City, OK 73152-3390.

**INFORMATION ABOUT THIS PUBLICATION** may be obtained by contacting the Oklahoma Secretary of State, Office of Administrative Rules, 2401 North Lincoln Boulevard, Will Rogers Building, Room 220, P.O. Box 53390, Oklahoma City, OK 73152-3390, or by calling (405) 521-4911 or faxing (405) 522-3555. Office hours are 8:00 a.m. to 5:00 p.m., Monday through Friday.

This publication is issued and printed by the Secretary of State as authorized by 75 O.S., Section 255. 121 copies have been prepared and distributed at a cost of $648.48. Copies have been deposited with the Oklahoma Department of Libraries, Publications Clearinghouse.
*ISSN 0030-1728*

# Table of Contents

**Agency/Action/Subject Index** ..... iii
**Rules Affected Index** ..... iv
**Agency Index (Title numbers assigned)** ..... xl
**Notices of Rulemaking Intent**
Health, Oklahoma State Department of (Title 310) ..... 2743, 2744
Highway Construction Materials Technician Certification Board (Title 318) ..... 2745
**Withdrawn Rules**
Pharmacy, Oklahoma State Board of (Title 535) ..... 2747
**Emergency Adoptions**
Consumer Credit, Department of (Title 160) ..... 2749, 2750
Health Care Authority, Oklahoma (Title 317) ..... 2756, 2759, 2760, 2762, 2767, 2771, 2774, 2775, 2793, 2797
Human Services, Department of (Title 340) ..... 2800
Public Employees Retirement System, Oklahoma (Title 590) ..... 2809, 2810
Tax Commission, Oklahoma (Title 710) ..... 2811
**Permanent Final Adoptions**
Community Hospitals Authority (Title 152) ..... 2813
Mines, Department of (Title 460) ..... 2815, 2816, 2817, 2818, 2819
**Executive Orders (Title 1)** ..... 2827

# Agency/Action/Subject Index


**COMMUNITY Hospitals Authority (Title 152)**
***Permanent Final Adoptions***
General Agency Rules (Chapter 1) ..... 2813
**CONSUMER Credit, Department of (Title 160)**
***Emergency Adoptions***
Fees (Chapter 5) ..... 2749
Mortgage Brokers (Chapter 55) ..... 2750
**GOVERNOR**
***Executive Orders***
Establishing Governor's Committee on Homeland Security Funding (03-9A) ..... 2827
Ordering flags at half-staff to honor Judge Joe Burch (03-14) ..... 2828
Ordering flags at half-staff to honor Judge Luther Lee Bohanon (03-15) ..... 2828
Establishing State Citizen Corps Council (03-16) ..... 2828
Ordering flags at half-staff to honor Audre' L. Henry, mother of Governor Brad Henry (03-17) ..... 2829
Ordering flags at half-staff to honor Bob Hope (03-18) ..... 2830
**HEALTH, Oklahoma State Department of (Title 310)**
***Notices of Rulemaking Intent***
Medical Micropigmentation (Chapter 234) ..... 2743
~~Ionizing Radiation Regulations~~Diagnostic X-Ray Producing Machines (Chapter 281) ..... 2743
Notification of Communicable Disease Risk Exposure ~~Regulations~~ (Chapter 555) ..... 2744
**HEALTH Care Authority, Oklahoma (Title 317)**
***Emergency Adoptions***
Grievance Procedures and Process (Chapter 2) ..... 2756
Soonercare (Chapter 25) ..... 2759
Medical Providers-Fee for Service (Chapter 30) ..... 2760, 2762, 2767, 2771, 2774
**HEALTH Care Authority, Oklahoma – *continued***
***Emergency Adoptions – continued***
Medical Assistance for Adults and Children-Eligibility (Chapter 35) ..... 2775, 2793, 2797
**HIGHWAY Construction Materials Technician Certification Board (Title 318)**
***Notices of Rulemaking Intent***
Complaints and Individual Proceedings (Chapter 20) ... 2745
**HUMAN Services, Department of (Title 340)**
***Emergency Adoptions***
Child Care Services (Chapter 40) ..... 2800
**MINES, Department of (Title 460)**
***Permanent Final Adoptions***
Rules of Practice and Procedure for the Coal Reclamation Act of 1979 (Chapter 2) ..... 2815
Non-Coal Rules and Regulations (Chapter 10) ..... 2816
The Permanent Regulations Governing the Coal Reclamation Act of 1979 (Chapter 20) ..... 2817
Oklahoma Explosives and Blasting Regulations (Chapter 25) ..... 2818
Coal Combustion By-Product Standards (Chapter 30) ... 2819
**PHARMACY, Oklahoma State Board of (Title 535)**
***Withdrawn Rules***
Administrative Operations (Chapter 1) ..... 2747
**PUBLIC Employees Retirement System, Oklahoma (Title 590)**
***Emergency Adoptions***
Public Employees Retirement System (Chapter 10) ..... 2809
Uniform Retirement System for Justices and Judges (Chapter 15) ..... 2810
**TAX Commission, Oklahoma (Title 710)**
***Emergency Adoptions***
Income (Chapter 50) ..... 2811

# Rules Affected Index

*[(E) = Emergency action]*


| Rule | | Register Page |
|---|---|---|
| 10:15-1-1. | [AMENDED] | 1898 |
| 10:15-1-2. | [AMENDED] | 1898 |
| 10:15-3-1. | [AMENDED] | 1900 |
| 10:15-3-2. | [AMENDED] | 1900 |
| 10:15-3-3. | [AMENDED] | 1900 |
| 10:15-3-4. | [AMENDED] | 1901 |
| 10:15-7-2. | [AMENDED] | 1901 |
| 10:15-20-1. | [AMENDED] | 1901 |
| 10:15-21-1. | [AMENDED] | 1902 |
| 10:15-21-3. | [AMENDED] | 1902 |
| 10:15-22-1. | [NEW] | 1902 |
| 10:15-23-1. | [AMENDED] | 1902 |
| 10:15-23-2. | [AMENDED] | 1903 |
| 10:15-25-2. | [AMENDED] | 1903 |
| 10:15-25-3. | [AMENDED] | 1903 |
| 10:15-25-4. | [AMENDED] | 1904 |
| 10:15-25-5. | [AMENDED] | 1904 |
| 10:15-27-6. | [AMENDED] | 1905 |
| 10:15-27-7. | [REVOKED] | 1905 |
| 10:15-27-7.1. | [NEW] | 1905 |
| 10:15-27-8. | [AMENDED] | 1905 |
| 10:15-27-11. | [AMENDED] | 1905 |
| 10:15-29-1.1. | [AMENDED] | 1905 |
| 10:15-29-3. | [AMENDED] | 1905 |
| 10:15-29-4. | [AMENDED] | 1906 |
| 10:15-29-5. | [AMENDED] | 1906 |
| 10:15-29-6. | [AMENDED] | 1906 |
| 10:15-29-7. | [AMENDED] | 1907 |
| 10:15-29-9. | [AMENDED] | 1907 |
| 10:15-31-1. | [AMENDED] | 1907 |
| 10:15-31-2. | [AMENDED] | 1907 |
| 10:15-31-3. | [AMENDED] | 1908 |
| 10:15-31-4. | [AMENDED] | 1908 |
| 10:15-31-5. | [AMENDED] | 1910 |
| 10:15-31-6. | [AMENDED] | 1910 |
| 10:15-32-1. | [NEW] | 1910 |
| 10:15-32-2. | [NEW] | 1912 |
| 10:15-32-3. | [NEW] | 1912 |
| 10:15-32-4. | [NEW] | 1913 |
| 10:15-32-5. | [NEW] | 1914 |
| 10:15-32-6. | [NEW] | 1914 |
| 10:15-35-1. | [AMENDED] | 1915 |
| 10:15-35-2. | [AMENDED] | 1915 |
| 10:15-35-4. | [AMENDED] | 1915 |
| 10:15-37-1. | [AMENDED] | 1915 |
| 10:15-37-10. | [AMENDED] | 1916 |
| 10:15-37-11. | [AMENDED] | 1916 |
| 10:15-39-2. | [REVOKED] | 1916 |
| 10:15-39-3. | [AMENDED] | 1917 |
| 10:15-39-7. | [AMENDED] | 1918 |
| 35:1, App. A. | [AMENDED] | 1494 |
| 35:2-3-2. | [AMENDED] | 789 |
| 35:2-3-2.1. | [NEW] | 792 |
| 35:2-3-2.2. | [NEW] | 792 |
| 35:2-3-2.3. | [NEW] | 792 |
| 35:2-3-2.4. | [NEW] | 792 |
| 35:2-3-2.5. | [NEW] | 793 |
| 35:2-3-2.6. | [NEW] | 793 |
| 35:2-3-2.7. | [NEW] | 793 |
| 35:2-3-2.8. | [NEW] | 793 |
| 35:10-3-1. | [AMENDED] | 794 |
| 35:10-3-2. | [AMENDED] | 794 |
| 35:10-3-3. | [AMENDED] | 794 |
| 35:10-3-4. | [AMENDED] | 794 |
| 35:10-3-5. | [REVOKED] | 795 |
| 35:10-3-6. | [REVOKED] | 795 |
| 35:10-3-7. | [REVOKED] | 795 |
| 35:10-3-8. | [AMENDED] | 795 |
| 35:10-3-9. | [AMENDED] | 795 |
| 35:10-3-10. | [AMENDED] | 795 |
| 35:10-15-2. | [AMENDED] (E) | 15 |
| 35:10-15-2. | [AMENDED] | 796 |
| 35:10-15-3. | [AMENDED] (E) | 15 |
| 35:10-15-3. | [AMENDED] | 796 |
| 35:15-3-1. | [AMENDED] | 1518 |
| 35:15-3-2. | [NEW] | 1518 |
| 35:15-3-3. | [NEW] | 1519 |
| 35:15-9-11. | [NEW] | 1520 |
| 35:15-11-1. | [AMENDED] (E) | 297 |
| 35:15-11-1. | [AMENDED] | 796 |
| 35:15-11-15. | [NEW] | 797 |
| 35:15-11-18. | [AMENDED] | 798 |
| 35:15-11-19. | [REVOKED] (E) | 297 |
| 35:15-11-19. | [REVOKED] | 797 |
| 35:15-11-41. | [NEW] (E) | 785 |
| 35:15-21-1. | [REVOKED] | 1521 |
| 35:15-21-3. | [REVOKED] | 1523 |
| 35:15-21-4. | [REVOKED] | 1523 |
| 35:15-21-5. | [REVOKED] | 1523 |
| 35:15-21-6. | [REVOKED] | 1523 |
| 35:15-21-7.1. | [REVOKED] | 1524 |
| 35:15-21-11. | [REVOKED] | 1524 |
| 35:15-21-12. | [REVOKED] | 1524 |
| 35:15-21-13. | [REVOKED] | 1525 |
| 35:15-21-14. | [REVOKED] | 1525 |
| 35:15-21-15. | [REVOKED] | 1525 |
| 35:15-21-16. | [REVOKED] | 1525 |
| 35:15-21-17. | [REVOKED] | 1525 |
| 35:15-21-18. | [REVOKED] | 1525 |
| 35:15-21-19. | [REVOKED] | 1526 |
| 35:15-21-20. | [REVOKED] | 1526 |
| 35:15-22-1. | [NEW] | 1526 |
| 35:15-22-31. | [NEW] | 1528 |
| 35:15-22-32. | [NEW] | 1528 |
| 35:15-22-33. | [NEW] | 1528 |
| 35:15-22-34. | [NEW] | 1529 |
| 35:15-22-35. | [NEW] | 1529 |
| 35:15-22-51. | [NEW] | 1529 |
| 35:15-22-52. | [NEW] | 1529 |
| 35:15-22-53. | [NEW] | 1530 |
| 35:15-22-71. | [NEW] | 1530 |
| 35:15-22-91. | [NEW] | 1530 |
| 35:15-22-110. | [NEW] | 1531 |
| 35:15-22-111. | [NEW] | 1531 |
| 35:15-22-112. | [NEW] | 1531 |
| 35:15-22-113. | [NEW] | 1531 |
| 35:15-22-114. | [NEW] | 1531 |
| 35:15-22-115. | [NEW] | 1531 |
| 35:15-22-131. | [NEW] | 1532 |
| 35:15-25-1. | [AMENDED] | 1532 |
| 35:15-25-3. | [AMENDED] | 1532 |
| 35:15-47-1. | [AMENDED] | 799 |

35:15-47-2. . . . . [AMENDED] . . . . . 799
35:15-47-6. . . . . [AMENDED] . . . . . 799
35:15-47-10. . . . . [AMENDED] . . . . . 800
35:15-47-11. . . . . [AMENDED] . . . . . 800
35:15-47-12. . . . . [AMENDED] . . . . . 800
35:15-47-13. . . . . [AMENDED] . . . . . 800
35:15-47-14. . . . . [AMENDED] . . . . . 801
35:15-47-18. . . . . [AMENDED] . . . . . 801
35:15-47-19. . . . . [NEW] (E) . . . . . 373
35:15-47-19. . . . . [NEW] . . . . . 1533
35:20-17-1. . . . . [NEW] (E) . . . . . 587
35:20-17-1. . . . . [NEW] . . . . . 1534
35:20-17-2. . . . . [NEW] (E) . . . . . 587
35:20-17-2. . . . . [NEW] . . . . . 1534
35:20-17-3. . . . . [NEW] (E) . . . . . 588
35:20-17-3. . . . . [NEW] . . . . . 1535
35:20-17-7. . . . . [NEW] (E) . . . . . 786
35:20-17-7. . . . . [NEW] . . . . . 1535
35:20-17-8. . . . . [NEW] (E) . . . . . 588
35:20-17-8. . . . . [NEW] . . . . . 1535
35:20-17-9. . . . . [NEW] (E) . . . . . 786
35:20-17-9. . . . . [NEW] . . . . . 1535
35:20-17-10. . . . . [NEW] (E) . . . . . 588
35:20-17-10. . . . . [NEW] . . . . . 1535
35:20-17-11. . . . . [NEW] (E) . . . . . 786
35:20-17-11. . . . . [NEW] . . . . . 1535
35:20-17-12. . . . . [NEW] (E) . . . . . 786
35:20-17-12. . . . . [NEW] . . . . . 1535
35:20-17-13. . . . . [NEW] (E) . . . . . 588
35:20-17-13. . . . . [NEW] . . . . . 1535
35:20-17-14. . . . . [NEW] (E) . . . . . 786
35:20-17-14. . . . . [NEW] . . . . . 1536
35:20-17-15. . . . . [NEW] (E) . . . . . 588
35:20-17-15. . . . . [NEW] . . . . . 1536
35:20-17-16. . . . . [NEW] (E) . . . . . 588
35:20-17-16. . . . . [NEW] . . . . . 1536
35:20-17-17. . . . . [NEW] (E) . . . . . 589
35:20-17-17. . . . . [NEW] . . . . . 1536
35:20-17-18. . . . . [NEW] (E) . . . . . 589
35:20-17-18. . . . . [NEW] . . . . . 1536
35:20-17-19. . . . . [NEW] (E) . . . . . 787
35:20-17-19. . . . . [NEW] . . . . . 1536
35:20-17-20. . . . . [NEW] (E) . . . . . 589
35:20-17-20. . . . . [NEW] . . . . . 1536
35:20-17-21. . . . . [NEW] (E) . . . . . 589
35:20-17-21. . . . . [NEW] . . . . . 1536
35:20-17-22. . . . . [NEW] (E) . . . . . 589
35:20-17-22. . . . . [NEW] . . . . . 1536
35:20-17-23. . . . . [NEW] (E) . . . . . 589
35:20-17-23. . . . . [NEW] . . . . . 1537
35:30-17-4. . . . . [AMENDED] (E) . . . . . 298
35:30-17-4. . . . . [AMENDED] . . . . . 802
35:30-17-10. . . . . [AMENDED] (E) . . . . . 299
35:30-17-10. . . . . [AMENDED] . . . . . 803
35:30-17-11. . . . . [AMENDED] . . . . . 803
35:30-17-17. . . . . [AMENDED] . . . . . 803
35:30-17-18. . . . . [AMENDED] . . . . . 804
35:30-17-21. . . . . [AMENDED] . . . . . 804
35:30-17-22.4. . . . . [AMENDED] . . . . . 805
35:30-17-33. . . . . [AMENDED] . . . . . 805
35:30-17-100. . . . . [NEW] . . . . . 1537
35:30-17-101. . . . . [NEW] . . . . . 1537
35:30-17-102. . . . . [NEW] . . . . . 1537
35:30-17-103. . . . . [NEW] . . . . . 1537
35:30-17-104. . . . . [NEW] . . . . . 1538
35:30-17-105. . . . . [NEW] . . . . . 1538
35:30-17-106. . . . . [NEW] . . . . . 1538
35:30-17-107. . . . . [NEW] . . . . . 1538
35:30-21-1. . . . . [REVOKED] (E) . . . . . 55
35:30-21-1.1. . . . . [NEW] (E) . . . . . 56
35:30-21-2. . . . . [REVOKED] (E) . . . . . 56
35:30-21-3. . . . . [REVOKED] (E) . . . . . 57
35:30-21-4. . . . . [REVOKED] (E) . . . . . 57
35:30-37-10. . . . . [NEW] . . . . . 806
35:35-1-2. . . . . [AMENDED] . . . . . 1539
35:35-1-3. . . . . [AMENDED] . . . . . 1540
35:50-1-1. . . . . [NEW] (E) . . . . . 153
35:50-1-1. . . . . [NEW] . . . . . 1540
35:50-1-2. . . . . [NEW] (E) . . . . . 153
35:50-1-2. . . . . [NEW] . . . . . 1541
35:50-1-30. . . . . [NEW] (E) . . . . . 154
35:50-1-30. . . . . [NEW] . . . . . 1541
35:50-1-31. . . . . [NEW] (E) . . . . . 154
35:50-1-31. . . . . [NEW] . . . . . 1541
35:50-1-32. . . . . [NEW] (E) . . . . . 154
35:50-1-32. . . . . [NEW] . . . . . 1541
35:50-1-33. . . . . [NEW] (E) . . . . . 154
35:50-1-33. . . . . [NEW] . . . . . 1541
35:50-1-34. . . . . [NEW] (E) . . . . . 154
35:50-1-34. . . . . [NEW] . . . . . 1542
35:50-1-35. . . . . [NEW] (E) . . . . . 154
35:50-1-35. . . . . [NEW] . . . . . 1542
35:50-1-36. . . . . [NEW] (E) . . . . . 155
35:50-1-36. . . . . [NEW] . . . . . 1542
35:50-1-37. . . . . [NEW] (E) . . . . . 155
35:50-1-37. . . . . [NEW] . . . . . 1542
35:50-1-38. . . . . [NEW] (E) . . . . . 155
35:50-1-38. . . . . [NEW] . . . . . 1542
40:10-3-1. . . . . [AMENDED] . . . . . 2249
40:10-3-2. . . . . [AMENDED] . . . . . 2249
40:10-3-3. . . . . [AMENDED] . . . . . 2250
40:10-3-4. . . . . [AMENDED] . . . . . 2250
40:10-3-5. . . . . [AMENDED] . . . . . 2251
40:10-3-8. . . . . [NEW] . . . . . 2251
40:10-3-9. . . . . [NEW] . . . . . 2251
40:10-3-10. . . . . [NEW] . . . . . 2251
40:10-3-11. . . . . [NEW] . . . . . 2252
40:10-3-12. . . . . [NEW] . . . . . 2252
40:10-5-1. . . . . [AMENDED] . . . . . 2252
40:20-1-4. . . . . [REVOKED] . . . . . 2253
40:30-1-2. . . . . [REVOKED] . . . . . 2254
40:30-1-3. . . . . [AMENDED] . . . . . 2255
40:30-1-3.1. . . . . [AMENDED] . . . . . 2256
40:30-1-4. . . . . [REVOKED] . . . . . 2257
40:35-1-2. . . . . [REVOKED] . . . . . 2257
45:10-3-12. . . . . [AMENDED] (E) . . . . . 1479
45:10-3-12. . . . . [AMENDED] . . . . . 1543
75:10-1-1. . . . . [NEW] . . . . . 1081
75:10-1-2. . . . . [NEW] . . . . . 1082
75:10-1-3. . . . . [NEW] . . . . . 1082
75:10-1-4. . . . . [NEW] . . . . . 1082
75:10-1-5. . . . . [NEW] . . . . . 1082
75:10-1-6. . . . . [NEW] . . . . . 1082
75:10-1-7. . . . . [NEW] . . . . . 1082
75:10-1-8. . . . . [NEW] . . . . . 1082
75:10-1-9. . . . . [NEW] . . . . . 1082
75:10-1-10. . . . . [NEW] . . . . . 1083
75:10-1-11. . . . . [NEW] . . . . . 1083
85:10-5-3. . . . . [AMENDED] . . . . . 1084
85:10-5-3.1. . . . . [NEW] . . . . . 1085
87:1-3-1. . . . . [AMENDED] . . . . . 806
87:1-3-6. . . . . [REVOKED] . . . . . 807
87:1-3-7. . . . . [REVOKED] . . . . . 807
87:1-3-14. . . . . [NEW] . . . . . 807

87:1-5-9. . . . . [AMENDED] . . . . . 807
87:1-5-15. . . . . [AMENDED] . . . . . 807
87:1-5-19. . . . . [AMENDED] . . . . . 807
87:10-1-2. . . . . [AMENDED] . . . . . 808
87:10-17-3. . . . . [AMENDED] . . . . . 809
87:10-17-4. . . . . [AMENDED] (E) . . . . . 58
87:10-17-4. . . . . [AMENDED] . . . . . 809
87:10-25-7. . . . . [AMENDED] . . . . . 810
87:10-25-13. . . . . [AMENDED] (E) . . . . . 59
87:10-25-13. . . . . [AMENDED] . . . . . 810
87:10-27-12. . . . . [AMENDED] (E) . . . . . 60
87:10-27-12. . . . . [AMENDED] . . . . . 811
87:10-33-3. . . . . [AMENDED] . . . . . 811
87:15-1-1. . . . . [AMENDED] . . . . . 813
87:15-1-2. . . . . [AMENDED] . . . . . 813
87:15-1-3. . . . . [AMENDED] . . . . . 813
87:15-1-4. . . . . [AMENDED] . . . . . 813
87:15-1-5. . . . . [AMENDED] . . . . . 814
87:15-1-8. . . . . [AMENDED] . . . . . 815
87:15-1-10. . . . . [AMENDED] . . . . . 815
90:1-1-1. . . . . [AMENDED] (E) . . . . . 453
90:1-1-1. . . . . [AMENDED] . . . . . 2258
90:1-1-2. . . . . [AMENDED] (E) . . . . . 453
90:1-1-2. . . . . [AMENDED] . . . . . 2259
90:1-1-3. . . . . [AMENDED] (E) . . . . . 454
90:1-1-3. . . . . [AMENDED] . . . . . 2259
90:1-1-4. . . . . [AMENDED] (E) . . . . . 454
90:1-1-4. . . . . [AMENDED] . . . . . 2259
90:1-3-1. . . . . [AMENDED] (E) . . . . . 454
90:1-3-1. . . . . [AMENDED] . . . . . 2259
90:1-3-2. . . . . [AMENDED] (E) . . . . . 454
90:1-3-2. . . . . [AMENDED] . . . . . 2259
90:1-3-3. . . . . [AMENDED] (E) . . . . . 454
90:1-3-3. . . . . [AMENDED] . . . . . 2259
90:1-3-4. . . . . [AMENDED] . . . . . 2259
90:1-3-5. . . . . [AMENDED] (E) . . . . . 454
90:1-3-5. . . . . [AMENDED] . . . . . 2259
90:1-3-6. . . . . [AMENDED] (E) . . . . . 454
90:1-3-6. . . . . [AMENDED] . . . . . 2259
90:1-3-7. . . . . [AMENDED] (E) . . . . . 454
90:1-3-7. . . . . [AMENDED] . . . . . 2260
90:1-5-1. . . . . [AMENDED] (E) . . . . . 455
90:1-5-1. . . . . [AMENDED] . . . . . 2260
90:1-7-1. . . . . [AMENDED] (E) . . . . . 455
90:1-7-1. . . . . [AMENDED] . . . . . 2260
90:1-9-2. . . . . [AMENDED] (E) . . . . . 455
90:1-9-2. . . . . [AMENDED] . . . . . 2260
90:10-1-1. . . . . [AMENDED] (E) . . . . . 456
90:10-1-1. . . . . [AMENDED] . . . . . 2261
90:10-1-2. . . . . [AMENDED] (E) . . . . . 456
90:10-1-2. . . . . [AMENDED] . . . . . 2262
90:10-1-3. . . . . [AMENDED] (E) . . . . . 456
90:10-1-3. . . . . [REVOKED] . . . . . 2262
90:10-1-4. . . . . [AMENDED] . . . . . 2262
90:10-3-1. . . . . [AMENDED] (E) . . . . . 457
90:10-3-1. . . . . [AMENDED] . . . . . 2262
90:10-3-3. . . . . [AMENDED] (E) . . . . . 457
90:10-3-3. . . . . [AMENDED] . . . . . 2263
90:10-3-4. . . . . [AMENDED] (E) . . . . . 457
90:10-3-4. . . . . [AMENDED] . . . . . 2263
90:10-3-5. . . . . [AMENDED] (E) . . . . . 457
90:10-3-5. . . . . [AMENDED] . . . . . 2263
90:10-3-6. . . . . [AMENDED] (E) . . . . . 458
90:10-3-6. . . . . [AMENDED] . . . . . 2264
90:10-3-7. . . . . [AMENDED] (E) . . . . . 458
90:10-3-7. . . . . [AMENDED] . . . . . 2264
90:10-3-8. . . . . [AMENDED] (E) . . . . . 459
90:10-3-8. . . . . [AMENDED] . . . . . 2265
90:10-5-1. . . . . [AMENDED] (E) . . . . . 459
90:10-5-1. . . . . [AMENDED] . . . . . 2266
90:10-5-2. . . . . [AMENDED] . . . . . 2266
90:10-7-1. . . . . [AMENDED] (E) . . . . . 460
90:10-7-1. . . . . [AMENDED] . . . . . 2266
90:10-7-2. . . . . [AMENDED] (E) . . . . . 460
90:10-7-2. . . . . [AMENDED] . . . . . 2266
90:10-7-3. . . . . [AMENDED] (E) . . . . . 460
90:10-7-3. . . . . [AMENDED] . . . . . 2266
90:10-7-4. . . . . [AMENDED] (E) . . . . . 460
90:10-7-4. . . . . [AMENDED] . . . . . 2267
90:10-7-5. . . . . [AMENDED] (E) . . . . . 460
90:10-7-5. . . . . [AMENDED] . . . . . 2267
90:10-9-1. . . . . [AMENDED] (E) . . . . . 461
90:10-9-1. . . . . [AMENDED] . . . . . 2267
90:10-9-2. . . . . [AMENDED] (E) . . . . . 461
90:10-9-2. . . . . [AMENDED] . . . . . 2268
90:10-11-1. . . . . [AMENDED] (E) . . . . . 461
90:10-11-1. . . . . [AMENDED] . . . . . 2268
90:10-11-2. . . . . [AMENDED] (E) . . . . . 461
90:10-11-2. . . . . [AMENDED] . . . . . 2268
90:15-1-1. . . . . [AMENDED] (E) . . . . . 462
90:15-1-1. . . . . [AMENDED] . . . . . 2269
90:15-1-2. . . . . [AMENDED] . . . . . 2270
90:15-1-3. . . . . [AMENDED] . . . . . 2270
90:15-3-1. . . . . [AMENDED] (E) . . . . . 463
90:15-3-1. . . . . [AMENDED] . . . . . 2271
90:15-3-2. . . . . [AMENDED] (E) . . . . . 463
90:15-3-2. . . . . [AMENDED] . . . . . 2271
90:15-7-1. . . . . [AMENDED] . . . . . 2271
90:15-7-2. . . . . [REVOKED] . . . . . 2271
90:15-7-3. . . . . [REVOKED] . . . . . 2272
90:15-7-4. . . . . [REVOKED] . . . . . 2272
90:15-7-5. . . . . [REVOKED] . . . . . 2272
90:15-7-6. . . . . [REVOKED] . . . . . 2272
90:15-7-7. . . . . [REVOKED] . . . . . 2272
90:15-7-8. . . . . [REVOKED] . . . . . 2272
90:15-7-9. . . . . [AMENDED] (E) . . . . . 463
90:15-7-9. . . . . [REVOKED] . . . . . 2272
90:15-9-1. . . . . [AMENDED] (E) . . . . . 463
90:15-9-1. . . . . [AMENDED] . . . . . 2273
90:15-9-4. . . . . [AMENDED] (E) . . . . . 465
90:15-9-4. . . . . [AMENDED] . . . . . 2274
90:15-9-5. . . . . [AMENDED] (E) . . . . . 465
90:15-9-5. . . . . [AMENDED] . . . . . 2274
90:15-9-7. . . . . [AMENDED] . . . . . 2275
90:15-9-8. . . . . [REVOKED] . . . . . 2275
90:15-9-9. . . . . [REVOKED] . . . . . 2276
90:15-9-10. . . . . [REVOKED] . . . . . 2276
90:15-9-11. . . . . [REVOKED] . . . . . 2276
90:15-9-12. . . . . [REVOKED] . . . . . 2276
90:15-9-13. . . . . [REVOKED] . . . . . 2276
90:15-9-14. . . . . [REVOKED] . . . . . 2276
90:15-9-15. . . . . [REVOKED] . . . . . 2276
90:15-11-1. . . . . [AMENDED] . . . . . 2276
90:15-11-2. . . . . [AMENDED] . . . . . 2276
90:15-13-2. . . . . [AMENDED] . . . . . 2277
92:10-1-1. . . . . [AMENDED] . . . . . 2277
92:10-1-2. . . . . [AMENDED] . . . . . 2278
92:10-1-4. . . . . [AMENDED] . . . . . 2278
92:10-1-5. . . . . [AMENDED] . . . . . 2278
92:10-1-6. . . . . [AMENDED] . . . . . 2279
92:10-3-5. . . . . [AMENDED] . . . . . 2279
92:10-3-6. . . . . [AMENDED] . . . . . 2279
92:10-3-8. . . . . [AMENDED] . . . . . 2280
92:10-3-11. . . . . [AMENDED] . . . . . 2280

92:10-3-12. . . . . [AMENDED] . . . . . 2281
92:10-3-13. . . . . [AMENDED] . . . . . 2281
92:10-5-7. . . . . [AMENDED] . . . . . 2281
92:10-5-10. . . . . [AMENDED] . . . . . 2281
92:10-5-13. . . . . [AMENDED] . . . . . 2282
92:10-5-15. . . . . [AMENDED] . . . . . 2282
92:10-7-1. . . . . [AMENDED] . . . . . 2283
92:10-7-2. . . . . [AMENDED] . . . . . 2283
92:10-7-4. . . . . [AMENDED] . . . . . 2283
92:10-11-1. . . . . [NEW] . . . . . 2284
92:10-11-2. . . . . [NEW] . . . . . 2284
92:10-11-3. . . . . [NEW] . . . . . 2284
92:10-11-4. . . . . [NEW] . . . . . 2284
92:10-11-5. . . . . [NEW] . . . . . 2285
92:10-11-6. . . . . [NEW] . . . . . 2285
92:10-11-7. . . . . [NEW] . . . . . 2285
92:10-11-8. . . . . [NEW] . . . . . 2286
92:10-11-9. . . . . [NEW] . . . . . 2286
135:1-1-3. . . . . [AMENDED] . . . . . 2287
135:1-1-4. . . . . [AMENDED] . . . . . 2287
135:1-1-6. . . . . [AMENDED] . . . . . 2288
135:1-1-7. . . . . [REVOKED] . . . . . 2288
135:1-1-9. . . . . [REVOKED] . . . . . 2288
135:1-3-3. . . . . [AMENDED] . . . . . 2288
135:1-3-4. . . . . [AMENDED] . . . . . 2288
135:10-7-1. . . . . [REVOKED] . . . . . 2289
135:10-7-2. . . . . [REVOKED] . . . . . 2289
135:10-9-1. . . . . [AMENDED] . . . . . 2289
135:10-9-2. . . . . [AMENDED] . . . . . 2289
140:1-1-2. . . . . [AMENDED] (E) . . . . . 1061
140:1-1-2. . . . . [AMENDED] . . . . . 2289
140:10-3-5. . . . . [AMENDED] (E) . . . . . 299
140:10-3-5. . . . . [AMENDED] . . . . . 2291
140:15-8-1. . . . . [NEW] (E) . . . . . 16
140:15-8-1. . . . . [NEW] . . . . . 2292
140:15-8-2. . . . . [AMENDED] . . . . . 2293
152:1-1-1. . . . . [NEW] (E) . . . . . 466
152:1-1-1. . . . . [NEW] . . . . . 2813
152:1-1-2. . . . . [RESERVED] (E) . . . . . 466
152:1-1-2. . . . . [RESERVED] . . . . . 2813
152:1-1-3. . . . . [RESERVED] (E) . . . . . 466
152:1-1-3. . . . . [RESERVED] . . . . . 2813
152:1-1-4. . . . . [NEW] (E) . . . . . 466
152:1-1-4. . . . . [NEW] . . . . . 2813
152:1-1-5. . . . . [NEW] (E) . . . . . 467
152:1-1-5. . . . . [NEW] . . . . . 2814
152:1-1-6. . . . . [NEW] (E) . . . . . 467
152:1-1-6. . . . . [NEW] . . . . . 2814
152:1-3-1. . . . . [NEW] (E) . . . . . 467
152:1-3-1. . . . . [NEW] . . . . . 2814
152:1-3-2. . . . . [NEW] (E) . . . . . 467
152:1-3-2. . . . . [NEW] . . . . . 2814
152:1-3-3. . . . . [NEW] (E) . . . . . 467
152:1-3-3. . . . . [NEW] . . . . . 2814
152:1-3-4. . . . . [NEW] (E) . . . . . 467
152:1-3-4. . . . . [NEW] . . . . . 2814
152:1-3-5. . . . . [RESERVED] . . . . . 2814
152:1-3-6. . . . . [NEW] (E) . . . . . 467
152:1-3-6. . . . . [NEW] . . . . . 2814
152:1-5-1. . . . . [NEW] (E) . . . . . 467
152:1-5-1. . . . . [NEW] . . . . . 2814
152:1-5-2. . . . . [NEW] (E) . . . . . 467
152:1-5-2. . . . . [NEW] . . . . . 2814
152:1-5-3. . . . . [NEW] (E) . . . . . 467
152:1-5-3. . . . . [NEW] . . . . . 2814
152:1-5-4. . . . . [NEW] (E) . . . . . 467
152:1-5-4. . . . . [NEW] . . . . . 2814
152:1-5-5. . . . . [NEW] (E) . . . . . 467
152:1-5-5. . . . . [NEW] . . . . . 2814
152:1-7-1. . . . . [NEW] (E) . . . . . 467
152:1-7-1. . . . . [NEW] . . . . . 2815
152:1-7-2. . . . . [NEW] (E) . . . . . 468
152:1-7-2. . . . . [NEW] . . . . . 2815
152:1-7-3. . . . . [NEW] (E) . . . . . 468
152:1-7-3. . . . . [NEW] . . . . . 2815
152:1-7-4. . . . . [NEW] (E) . . . . . 468
152:1-7-4. . . . . [NEW] . . . . . 2815
152:1-7-5. . . . . [NEW] (E) . . . . . 468
152:1-7-5. . . . . [NEW] . . . . . 2815
158:30-9-2. . . . . [AMENDED] (E) . . . . . 221
158:40-9-3. . . . . [AMENDED] (E) . . . . . 222
158:50-9-2. . . . . [AMENDED] (E) . . . . . 223
160:5-1-2. . . . . [AMENDED] (E) . . . . . 2749
160:55-1-1. . . . . [AMENDED] (E) . . . . . 2751
160:55-1-2. . . . . [AMENDED] (E) . . . . . 2751
160:55-3-1.1. . . . . [AMENDED] (E) . . . . . 2751
160:55-3-1.2. . . . . [AMENDED] (E) . . . . . 2752
160:55-3-1.3. . . . . [NEW] (E) . . . . . 2753
160:55-3-3. . . . . [AMENDED] (E) . . . . . 2753
160:55-3-3.1. . . . . [AMENDED] (E) . . . . . 2753
160:55-3-4. . . . . [AMENDED] (E) . . . . . 2753
160:55-3-8. . . . . [AMENDED] (E) . . . . . 2753
160:55-3-9. . . . . [AMENDED] (E) . . . . . 2754
160:55-3-9.1. . . . . [AMENDED] (E) . . . . . 2754
160:55-3-10.1. . . . . [NEW] (E) . . . . . 2754
160:55-5-2. . . . . [AMENDED] (E) . . . . . 2754
160:55-7-1. . . . . [AMENDED] (E) . . . . . 2754
160:55-9-2. . . . . [AMENDED] (E) . . . . . 2755
160:55-9-3. . . . . [AMENDED] (E) . . . . . 2755
160:55-9-4. . . . . [AMENDED] (E) . . . . . 2755
160:55-9-6. . . . . [AMENDED] (E) . . . . . 2755
165:5-1-4. . . . . [AMENDED] . . . . . 2294
165:5-1-5. . . . . [AMENDED] . . . . . 2294
165:5-5-1. . . . . [AMENDED] . . . . . 2295
165:5-7-1. . . . . [AMENDED] . . . . . 2295
165:5-7-14. . . . . [AMENDED] . . . . . 2297
165:5-7-27. . . . . [AMENDED] . . . . . 2297
165:5-9-2. . . . . [AMENDED] . . . . . 2298
165:5-9-6. . . . . [AMENDED] . . . . . 2299
165:5-11-2.1. . . . . [NEW] . . . . . 2300
165:5-13-2.1. . . . . [NEW] . . . . . 2300
165:5-13-4. . . . . [AMENDED] . . . . . 2300
165:5-19-2. . . . . [NEW] . . . . . 2301
165:10-1-4. . . . . [AMENDED] (E) . . . . . 1480
165:10-1-4. . . . . [AMENDED] . . . . . 1544
165:10-1-7. . . . . [AMENDED] (E) . . . . . 1482
165:10-1-7. . . . . [AMENDED] . . . . . 1545
165:10-7-32. . . . . [NEW] (E) . . . . . 1487
165:10-7-32. . . . . [NEW] . . . . . 1550
165:10-21-24. . . . . [AMENDED] (E) . . . . . 1487
165:10-21-24. . . . . [AMENDED] . . . . . 1551
165:10-21-38. . . . . [AMENDED] (E) . . . . . 1487
165:10-21-38. . . . . [AMENDED] . . . . . 1551
165:10-21-45. . . . . [AMENDED] (E) . . . . . 1488
165:10-21-45. . . . . [AMENDED] . . . . . 1551
165:10-21-47.1. . . . . [AMENDED] (E) . . . . . 1488
165:10-21-47.1. . . . . [AMENDED] . . . . . 1552
165:10-21-48. . . . . [REVOKED] (E) . . . . . 1488
165:10-21-48. . . . . [REVOKED] . . . . . 1552
165:10-21-58. . . . . [AMENDED] (E) . . . . . 1489
165:10-21-58. . . . . [AMENDED] . . . . . 1552
165:10-21-59. . . . . [REVOKED] (E) . . . . . 1489
165:10-21-59. . . . . [REVOKED] . . . . . 1552
165:10-21-65. . . . . [AMENDED] (E) . . . . . 1489

165:10-21-65. [AMENDED] 1553
165:10-21-68. [AMENDED] (E) 1489
165:10-21-68. [AMENDED] 1553
165:10-21-69. [NEW] (E) 1489
165:10-21-69. [NEW] 1553
165:10-21-76. [AMENDED] (E) 1490
165:10-21-76. [AMENDED] 1553
165:10-21-78. [AMENDED] (E) 1490
165:10-21-78. [AMENDED] 1554
165:10-21-82.2. [AMENDED] (E) 1491
165:10-21-82.2. [AMENDED] 1554
165:10-21-82.3. [AMENDED] (E) 1491
165:10-21-82.3. [AMENDED] 1554
165:10-21-82.4. [AMENDED] (E) 1491
165:10-21-82.4. [AMENDED] 1555
165:10-21-90. [NEW] (E) 1491
165:10-21-90. [NEW] 1555
165:10-21-91. [NEW] (E) 1492
165:10-21-91. [NEW] 1555
165:10-21-92. [NEW] (E) 1492
165:10-21-92. [NEW] 1556
165:55-1-4. [AMENDED] 2302
165:55-3-1. [AMENDED] 2306
165:55-3-22. [AMENDED] 2308
165:55-5-10. [AMENDED] 2310
165:55-5-10.2. [AMENDED] 2311
165:55-5-10.3. [AMENDED] 2311
165:55-5-21. [AMENDED] 2312
165:55-5-34. [AMENDED] 2312
165:55-7-2.1. [NEW] 2313
165:55-9-3. [AMENDED] 2313
165:55-11-13. [AMENDED] 2314
165:55-13-10. [AMENDED] 2314
165:55-13-20. [AMENDED] 2315
165:55-15-5. [AMENDED] 2315
165:55-17-3. [AMENDED] 2316
165:55-17-13. [AMENDED] 2316
165:55-17-30. [AMENDED] 2316
165:56-5-2. [AMENDED] 2317
165:56-5-5. [AMENDED] 2317
165:59-1-4. [AMENDED] 2318
165:59-3-30. [AMENDED] 2320
165:59-3-62. [AMENDED] 2321
165:65-1-2. [AMENDED] 2322
165:65-1-5. [AMENDED] 2323
165:65-3-1. [AMENDED] 2324
165:65-3-2. [AMENDED] 2324
165:65-5-2. [AMENDED] 2325
165:65-7-4. [AMENDED] 2325
165:65-7-11. [AMENDED] 2326
165:65-11-3. [AMENDED] 2326
165:65-11-10. [AMENDED] 2327
165:65-11-11. [AMENDED] 2327
165:65-11-12. [REVOKED] 2329
165:65-11-13. [AMENDED] 2329
165:65-11-14. [AMENDED] 2330
165:65-11-15. [AMENDED] 2330
165:65-11-16. [AMENDED] 2331
165:65-11-17. [AMENDED] 2332
165:65-11-18. [AMENDED] 2332
165:65-11-19. [NEW] 2332
165:75-3-1. [AMENDED] 2333
165:75-3-2. [AMENDED] 2333
165:75-3-4. [AMENDED] 2333
165:75-3-5. [AMENDED] 2333
165:75-3-6. [AMENDED] 2334
170:25-1-4. [AMENDED] 2334
170:25-3-1. [AMENDED] 2335
170:25-3-3. [AMENDED] 2335
170:25-5-1. [AMENDED] 2335
170:25-5-2. [AMENDED] 2335
170:25-9-5. [AMENDED] 2336
170:25-9-6. [NEW] 2336
170:25-11-1. [AMENDED] 2336
170:35-5-3. [AMENDED] 2336
175:1-1-2. [AMENDED] 1556
175:1-3-1. [AMENDED] 1557
175:10-3-34. [AMENDED] 1558
175:10-3-37. [AMENDED] 1560
175:10-3-40. [AMENDED] 1560
175:10-3-41. [AMENDED] 1561
175:10-3-42. [AMENDED] 1562
175:10-3-43. [AMENDED] 1563
175:10-3-56. [AMENDED] 1564
175:10-3-60. [AMENDED] 1564
175:10-3-61. [AMENDED] 1565
175:10-3-64. [AMENDED] 1565
175:10-3-69. [AMENDED] 1565
175:10-3-70. [AMENDED] 1565
175:10-3-71. [AMENDED] 1565
175:10-3-76. [AMENDED] 1566
195:1-1-3. [AMENDED] 2336
195:1-1-6. [AMENDED] 2337
195:2-1-3. [AMENDED] 2337
195:2-1-4. [REVOKED] 2337
195:2-1-5. [AMENDED] 2337
195:3-1-2. [AMENDED] 2338
195:3-1-3. [AMENDED] 2338
195:3-1-4. [AMENDED] 2339
195:10-1-2. [AMENDED] 2339
195:10-1-3. [AMENDED] 2340
195:10-3-2. [AMENDED] 2340
195:10-3-3. [AMENDED] 2341
195:10-5-2. [AMENDED] 2342
195:10-7-2. [AMENDED] 2342
195:10-9-2. [AMENDED] 2343
195:15-1-6.1. [AMENDED] 2344
195:25-1-2. [AMENDED] 2347
195:25-1-7. [AMENDED] 2348
195:25-1-8. [AMENDED] 2348
210:10-13-2. [AMENDED] (E) 155
210:10-13-2. [AMENDED] 816
210:10-13-4. [AMENDED] (E) 156
210:10-13-4. [AMENDED] 817
210:10-13-6. [AMENDED] (E) 158
210:10-13-6. [AMENDED] 820
210:10-13-7. [AMENDED] (E) 159
210:10-13-7. [AMENDED] 820
210:10-13-14. [AMENDED] (E) 159
210:10-13-14. [AMENDED] 820
210:15-3-1. [NEW] (E) 159
210:15-3-1. [NEW] 821
210:15-3-5. [NEW] 821
210:15-3-5.1. [NEW] 821
210:15-3-5.2. [NEW] 821
210:15-3-5.3. [NEW] 821
210:15-3-5.4. [NEW] 821
210:15-3-5.5. [NEW] 821
210:15-3-5.6. [NEW] 821
210:15-3-5.7. [NEW] 821
210:15-3-5.8. [NEW] 821
210:15-3-5.9. [NEW] 821
210:15-3-11. [NEW] 821
210:15-3-11.1. [NEW] 821

210:15-3-11.2. [NEW] 821
210:15-3-12. [NEW] 821
210:15-3-13. [NEW] 821
210:15-3-14. [NEW] 821
210:15-3-15. [NEW] 821
210:15-3-16. [NEW] 821
210:15-3-17. [NEW] 821
210:15-3-18. [NEW] 821
210:15-3-19. [NEW] 821
210:15-3-21. [NEW] 821
210:15-3-23. [NEW] 821
210:15-3-40. [NEW] 821
210:15-3-40.1. [NEW] 821
210:15-3-40.2. [NEW] 821
210:15-3-41. [NEW] 821
210:15-3-42. [NEW] 821
210:15-3-43. [NEW] 821
210:15-3-44. [NEW] 821
210:15-3-45. [NEW] 821
210:15-3-46. [NEW] 821
210:15-3-46.1. [NEW] 821
210:15-3-47. [NEW] 821
210:15-3-48. [NEW] 821
210:15-3-49. [NEW] 821
210:15-3-50. [NEW] 821
210:15-3-50.1. [NEW] 821
210:15-3-51. [NEW] 821
210:15-3-52. [NEW] 821
210:15-3-53. [NEW] 821
210:15-3-70. [NEW] 821
210:15-3-70.1. [NEW] 821
210:15-3-70.2. [NEW] 821
210:15-3-71. [NEW] 821
210:15-3-72. [NEW] 821
210:15-3-73. [NEW] 821
210:15-3-74. [NEW] 821
210:15-3-75. [NEW] 821
210:15-3-76. [NEW] 821
210:15-3-77. [NEW] 821
210:15-3-78. [NEW] 821
210:15-3-79. [NEW] 821
210:15-3-80. [NEW] 821
210:15-3-81. [NEW] 821
210:15-3-82. [NEW] 821
210:15-3-90. [NEW] 821
210:15-3-90.1. [NEW] 821
210:15-3-91. [NEW] 821
210:15-3-92. [NEW] 821
210:15-3-93. [NEW] 821
210:15-3-94. [NEW] 821
210:15-3-95. [NEW] 821
210:15-3-96. [NEW] 821
210:15-3-97. [NEW] 821
210:15-3-98. [NEW] 821
210:15-3-99. [NEW] 821
210:15-3-100. [NEW] 821
210:15-3-101. [NEW] 821
210:15-3-102. [NEW] 821
210:15-3-103. [NEW] 821
210:15-3-104. [NEW] 821
210:15-3-114. [NEW] 821
210:15-3-114.1. [NEW] 821
210:15-3-114.2. [NEW] 821
210:15-3-115. [NEW] 821
210:15-3-116. [NEW] 821
210:15-3-117. [NEW] 821
210:15-3-118. [NEW] 821
210:15-3-119. [NEW] 821
210:15-3-120. [NEW] 821
210:15-3-121. [NEW] 821
210:15-3-122. [NEW] 821
210:15-3-123. [NEW] 821
210:15-3-133. [NEW] 821
210:15-3-133.1. [NEW] 821
210:15-3-134. [NEW] 821
210:15-3-135. [NEW] 821
210:15-3-136. [NEW] 821
210:15-3-137. [NEW] 821
210:15-3-147. [NEW] 821
210:15-3-147.1. [NEW] 821
210:15-3-148. [NEW] 821
210:15-3-149. [NEW] 821
210:15-3-150. [NEW] 821
210:15-3-151. [NEW] 821
210:15-3-152. [NEW] 821
210:15-3-153. [NEW] 821
210:15-3-153.1. [NEW] 821
210:15-3-154. [NEW] 821
210:15-3-155. [NEW] 821
210:15-3-156. [NEW] 821
210:15-3-157. [NEW] 821
210:15-3-158. [NEW] 821
210:15-3-159. [NEW] 821
210:15-3-160. [NEW] 821
210:15-3-161. [NEW] 821
210:15-3-172. [NEW] 821
210:15-3-172.1. [NEW] 821
210:15-3-173. [NEW] 821
210:15-3-183. [NEW] 821
210:15-3-183.1. [NEW] 821
210:15-3-184. [NEW] 821
210:15-3-185. [NEW] 821
210:15-3-186. [NEW] 821
210:15-3-196. [NEW] 821
210:15-3-197. [NEW] 821
210:15-5-1. [REVOKED] 821
210:15-5-5. [REVOKED] 821
210:15-5-5.1. [REVOKED] 821
210:15-5-5.2. [REVOKED] 821
210:15-5-5.3. [REVOKED] 821
210:15-5-5.4. [REVOKED] 821
210:15-5-5.5. [REVOKED] 821
210:15-5-5.6. [REVOKED] 821
210:15-5-5.7. [REVOKED] 821
210:15-5-5.8. [REVOKED] 821
210:15-5-11. [REVOKED] 821
210:15-5-11.1. [REVOKED] 821
210:15-5-11.2. [REVOKED] 821
210:15-5-12. [REVOKED] 821
210:15-5-13. [REVOKED] 821
210:15-5-14. [REVOKED] 821
210:15-5-15. [REVOKED] 821
210:15-5-16. [REVOKED] 821
210:15-5-17. [REVOKED] 821
210:15-5-18. [REVOKED] 821
210:15-5-41. [REVOKED] 821
210:15-5-41.1. [REVOKED] 821
210:15-5-41.2. [REVOKED] 821
210:15-5-42. [REVOKED] 821
210:15-5-47. [REVOKED] 821
210:15-5-49. [REVOKED] 821
210:15-5-61. [REVOKED] 821
210:15-5-61.1. [REVOKED] 821
210:15-5-62. [REVOKED] 821

210:15-5-63. [REVOKED] 821
210:15-5-64. [REVOKED] 821
210:15-5-65. [REVOKED] 821
210:15-5-66. [REVOKED] 821
210:15-5-67. [REVOKED] 821
210:15-5-68. [REVOKED] 821
210:15-5-69. [REVOKED] 821
210:15-5-70. [REVOKED] 821
210:15-5-71. [REVOKED] 821
210:15-5-72. [REVOKED] 821
210:15-5-73. [REVOKED] 821
210:15-5-74. [REVOKED] 821
210:15-5-75. [REVOKED] 821
210:15-5-76. [REVOKED] 821
210:15-5-77. [REVOKED] 821
210:15-5-78. [REVOKED] 821
210:15-5-81. [REVOKED] 821
210:15-5-81.1. [REVOKED] 821
210:15-5-81.2. [REVOKED] 821
210:15-5-82. [REVOKED] 821
210:15-5-83. [REVOKED] 821
210:15-5-84. [REVOKED] 821
210:15-5-85. [REVOKED] 821
210:15-5-85.1. [REVOKED] 821
210:15-5-85.2. [REVOKED] 821
210:15-5-85.3. [REVOKED] 821
210:15-5-86. [REVOKED] 821
210:15-5-87. [REVOKED] 821
210:15-5-88. [REVOKED] 821
210:15-5-89. [REVOKED] 821
210:15-5-101. [REVOKED] 821
210:15-5-101.1. [REVOKED] 821
210:15-5-102.1. [REVOKED] 821
210:15-5-102.2. [REVOKED] 821
210:15-5-102.3. [REVOKED] 821
210:15-5-102.4. [REVOKED] 821
210:15-5-102.5. [REVOKED] 821
210:15-5-102.6. [REVOKED] 821
210:15-5-102.7. [REVOKED] 821
210:15-5-102.8. [REVOKED] 821
210:15-5-102.9. [REVOKED] 821
210:15-5-111. [REVOKED] 821
210:15-5-111.1. [REVOKED] 821
210:15-5-111.2. [REVOKED] 821
210:15-5-112. [REVOKED] 821
210:15-5-114. [REVOKED] 821
210:15-5-115. [REVOKED] 821
210:15-5-115.1. [REVOKED] 821
210:15-5-115.2. [REVOKED] 821
210:15-5-116. [REVOKED] 821
210:15-5-116.1. [REVOKED] 821
210:15-5-116.2. [REVOKED] 821
210:15-5-117. [REVOKED] 821
210:15-5-117.1. [REVOKED] 821
210:15-5-118. [REVOKED] 821
210:15-5-118.1. [REVOKED] 821
210:15-5-119. [REVOKED] 821
210:15-5-131. [REVOKED] 821
210:15-5-131.1. [REVOKED] 821
210:15-5-132. [REVOKED] 821
210:15-5-132.1. [REVOKED] 821
210:15-5-134. [REVOKED] 821
210:15-5-151. [REVOKED] 821
210:15-5-151.1. [REVOKED] 821
210:15-5-152. [REVOKED] 821
210:15-5-153. [REVOKED] 821
210:15-5-154. [REVOKED] 821
210:15-5-155. [REVOKED] 821
210:15-5-161. [REVOKED] 821
210:15-5-161.1. [REVOKED] 821
210:15-5-161.2. [REVOKED] 821
210:15-5-162. [REVOKED] 821
210:15-5-163. [REVOKED] 821
210:15-5-164. [REVOKED] 821
210:15-5-165. [REVOKED] 821
210:15-5-167. [REVOKED] 821
210:15-5-168. [REVOKED] 821
210:15-5-169. [REVOKED] 821
210:15-5-170. [REVOKED] 821
210:15-5-181. [REVOKED] 821
210:15-5-182. [REVOKED] 821
210:20-9-91. [AMENDED] (E) 611
210:20-9-101. [NEW] 822
210:20-9-102. [NEW] 822
210:25-3-7. [AMENDED] 823
210:25-5-4. [AMENDED] 824
210:30-5-1. [AMENDED] 825
210:35-21-2. [AMENDED] 831
215:15-3-20. [NEW] 821
215:15-3-22. [NEW] 821
219:15-3-162. [NEW] 821
230:10-3-8. [AMENDED] (E) 468
230:10-3-8. [AMENDED] 1086
230:10-7-59. [AMENDED] (E) 469
230:10-7-59. [AMENDED] 1086
230:10-7-76. [AMENDED] (E) 469
230:10-7-76. [AMENDED] 1087
230:10-7-82. [AMENDED] (E) 469
230:10-7-82. [AMENDED] 1087
230:15-3-24. [AMENDED] 1088
230:15-3-26. [AMENDED] (E) 470
230:15-3-26. [AMENDED] 1089
230:15-5-73. [AMENDED] (E) 471
230:15-5-73. [AMENDED] 1089
230:15-5-83.1. [NEW] 1089
230:15-5-84. [AMENDED] (E) 471
230:15-5-84. [AMENDED] 1090
230:15-9-3.1. [NEW] 1091
230:15-9-18.1. [AMENDED] (E) 472
230:15-9-18.1. [AMENDED] 1091
230:15-9-25. [NEW] (E) 473
230:15-9-25. [NEW] 1092
230:15-11-6. [AMENDED] (E) 473
230:15-11-6. [AMENDED] 1093
230:20-3-35. [AMENDED] (E) 474
230:20-3-35. [AMENDED] 1094
230:20-3-37. [AMENDED] (E) 474
230:20-3-37. [AMENDED] 1094
230:20-3-39. [REVOKED] (E) 475
230:20-3-39. [REVOKED] 1095
230:20-3-39.1. [NEW] (E) 475
230:20-3-39.1. [NEW] 1095
230:20-3-48. [AMENDED] (E) 475
230:20-3-48. [AMENDED] 1095
230:20-3-61. [AMENDED] (E) 475
230:20-3-61. [AMENDED] 1095
230:20-3-62. [AMENDED] (E) 475
230:20-3-62. [AMENDED] 1095
230:20-3-63. [AMENDED] (E) 475
230:20-3-63. [AMENDED] 1095
230:20-3-64. [AMENDED] (E) 475
230:20-3-64. [AMENDED] 1095
230:20-3-65. [AMENDED] (E) 475
230:20-3-65. [AMENDED] 1095

230:20-5-15. . . . . [AMENDED] (E) . . . . . 476
230:20-5-15. . . . . [AMENDED] . . . . . 1095
230:25-7-1. . . . . [AMENDED] (E) . . . . . 476
230:25-7-1. . . . . [AMENDED] . . . . . 1096
230:25-7-4. . . . . [AMENDED] (E) . . . . . 476
230:25-7-4. . . . . [AMENDED] . . . . . 1096
230:25-7-5. . . . . [AMENDED] (E) . . . . . 476
230:25-7-5. . . . . [AMENDED] . . . . . 1096
230:30-1-2. . . . . [NEW] (E) . . . . . 478
230:30-1-2. . . . . [NEW] . . . . . 1098
230:30-3-3. . . . . [AMENDED] (E) . . . . . 478
230:30-3-3. . . . . [AMENDED] . . . . . 1098
230:30-3-4. . . . . [NEW] (E) . . . . . 478
230:30-3-4. . . . . [NEW] . . . . . 1099
230:30-5-8.1. . . . . [AMENDED] (E) . . . . . 479
230:30-5-8.1. . . . . [AMENDED] . . . . . 1099
230:30-7-6. . . . . [AMENDED] (E) . . . . . 479
230:30-7-6. . . . . [AMENDED] . . . . . 1099
230:30-7-9. . . . . [AMENDED] (E) . . . . . 479
230:30-7-9. . . . . [AMENDED] . . . . . 1099
230:30-7-11.1. . . . . [AMENDED] (E) . . . . . 480
230:30-7-11.1. . . . . [AMENDED] . . . . . 1100
230:30-7-11.2. . . . . [AMENDED] (E) . . . . . 480
230:30-7-11.2. . . . . [AMENDED] . . . . . 1101
230:30-7-11.3. . . . . [AMENDED] (E) . . . . . 480
230:30-7-11.3. . . . . [AMENDED] . . . . . 1101
230:30-7-13. . . . . [AMENDED] (E) . . . . . 481
230:30-7-13. . . . . [AMENDED] . . . . . 1101
230:30-7-14. . . . . [AMENDED] (E) . . . . . 481
230:30-7-14. . . . . [AMENDED] . . . . . 1101
230:30-9-3. . . . . [AMENDED] (E) . . . . . 481
230:30-9-3. . . . . [AMENDED] . . . . . 1102
230:30-9-7. . . . . [NEW] . . . . . 1102
230:30-11-1. . . . . [AMENDED] (E) . . . . . 482
230:30-11-1. . . . . [AMENDED] . . . . . 1103
230:30-11-2. . . . . [AMENDED] (E) . . . . . 482
230:30-11-2. . . . . [AMENDED] . . . . . 1103
230:30-11-3. . . . . [AMENDED] (E) . . . . . 483
230:30-11-3. . . . . [AMENDED] . . . . . 1103
230:30-11-6. . . . . [AMENDED] (E) . . . . . 483
230:30-11-6. . . . . [AMENDED] . . . . . 1103
230:30-11-7. . . . . [NEW] (E) . . . . . 483
230:30-11-7. . . . . [NEW] . . . . . 1104
230:30-17-1. . . . . [AMENDED] (E) . . . . . 484
230:30-17-1. . . . . [AMENDED] . . . . . 1104
230:30-17-2. . . . . [AMENDED] (E) . . . . . 484
230:30-17-2. . . . . [AMENDED] . . . . . 1104
230:30-17-3. . . . . [AMENDED] (E) . . . . . 484
230:30-17-3. . . . . [AMENDED] . . . . . 1105
230:30-17-4. . . . . [AMENDED] (E) . . . . . 484
230:30-17-4. . . . . [AMENDED] . . . . . 1105
230:30-23-1. . . . . [AMENDED] (E) . . . . . 484
230:30-23-1. . . . . [AMENDED] . . . . . 1105
230:35-3-101. . . . . [AMENDED] (E) . . . . . 485
230:35-3-101. . . . . [AMENDED] . . . . . 1106
230:35-5-111. . . . . [AMENDED] (E) . . . . . 486
230:35-5-111. . . . . [AMENDED] . . . . . 1106
230:35-5-114. . . . . [AMENDED] (E) . . . . . 486
230:35-5-114. . . . . [AMENDED] . . . . . 1107
230:35-5-129. . . . . [AMENDED] (E) . . . . . 487
230:35-5-129. . . . . [AMENDED] . . . . . 1107
230:40-1-2. . . . . [NEW] (E) . . . . . 488
230:40-1-2. . . . . [NEW] . . . . . 1109
230:40-3-10. . . . . [AMENDED] (E) . . . . . 488
230:40-3-10. . . . . [AMENDED] . . . . . 1109
230:40-3-11. . . . . [NEW] (E) . . . . . 488
230:40-3-11. . . . . [NEW] . . . . . 1109
230:40-7-1. . . . . [AMENDED] (E) . . . . . 488
230:40-7-1. . . . . [AMENDED] . . . . . 1109
230:40-7-3. . . . . [AMENDED] (E) . . . . . 488
230:40-7-3. . . . . [AMENDED] . . . . . 1109
230:40-7-26. . . . . [AMENDED] (E) . . . . . 489
230:40-7-26. . . . . [AMENDED] . . . . . 1110
230:40-7-27. . . . . [REVOKED] (E) . . . . . 489
230:40-7-27. . . . . [REVOKED] . . . . . 1110
230:40-7-34. . . . . [AMENDED] (E) . . . . . 489
230:40-7-34. . . . . [AMENDED] . . . . . 1110
230:40-7-35. . . . . [AMENDED] (E) . . . . . 489
230:40-7-35. . . . . [AMENDED] . . . . . 1110
230:40-7-35.1. . . . . [NEW] (E) . . . . . 489
230:40-7-35.1. . . . . [NEW] . . . . . 1110
230:40-7-37. . . . . [AMENDED] (E) . . . . . 490
230:40-7-37. . . . . [AMENDED] . . . . . 1111
230:40-7-39. . . . . [AMENDED] (E) . . . . . 490
230:40-7-39. . . . . [AMENDED] . . . . . 1111
230:40-7-40. . . . . [AMENDED] (E) . . . . . 490
230:40-7-40. . . . . [AMENDED] . . . . . 1111
230:40-7-47. . . . . [AMENDED] (E) . . . . . 490
230:40-7-47. . . . . [AMENDED] . . . . . 1111
230:40-7-50. . . . . [REVOKED] (E) . . . . . 490
230:40-7-50. . . . . [REVOKED] . . . . . 1112
230:40-7-50.1. . . . . [REVOKED] (E) . . . . . 491
230:40-7-50.1. . . . . [REVOKED] . . . . . 1112
230:40-7-50.2. . . . . [REVOKED] (E) . . . . . 491
230:40-7-50.2. . . . . [AMENDED] . . . . . 1112
230:40-7-50.3. . . . . [REVOKED] (E) . . . . . 492
230:40-7-50.3. . . . . [REVOKED] . . . . . 1113
230:40-7-51. . . . . [REVOKED] (E) . . . . . 492
230:40-7-51. . . . . [REVOKED] . . . . . 1113
230:40-7-51.1. . . . . [REVOKED] (E) . . . . . 492
230:40-7-51.1. . . . . [REVOKED] . . . . . 1113
230:40-7-51.2. . . . . [REVOKED] (E) . . . . . 492
230:40-7-51.2. . . . . [REVOKED] . . . . . 1113
230:40-7-51.3. . . . . [REVOKED] (E) . . . . . 492
230:40-7-51.3. . . . . [REVOKED] . . . . . 1114
230:40-7-56.1. . . . . [REVOKED] . . . . . 1114
230:40-7-97. . . . . [AMENDED] (E) . . . . . 493
230:40-7-97. . . . . [AMENDED] . . . . . 1114
230:45-3-36. . . . . [REVOKED] (E) . . . . . 493
230:45-3-36. . . . . [REVOKED] . . . . . 1115
230:45-3-36.1. . . . . [NEW] (E) . . . . . 494
230:45-3-36.1. . . . . [NEW] . . . . . 1115
240:1-5-1. . . . . [NEW] . . . . . 832
240:1-5-2. . . . . [NEW] . . . . . 832
240:1-5-3. . . . . [NEW] . . . . . 833
240:1-5-4. . . . . [NEW] . . . . . 833
240:1-5-5. . . . . [NEW] . . . . . 833
240:1-5-6. . . . . [NEW] . . . . . 833
240:1-5-7. . . . . [NEW] . . . . . 833
240:10-3-60. . . . . [NEW] . . . . . 834
240:10-3-61. . . . . [NEW] . . . . . 834
240:10-3-62. . . . . [NEW] . . . . . 834
240:10-3-63. . . . . [NEW] . . . . . 834
240:10-3-64. . . . . [NEW] . . . . . 835
240:10-3-65. . . . . [NEW] . . . . . 835
240:10-3-66. . . . . [NEW] . . . . . 835
240:10-3-67. . . . . [NEW] . . . . . 835
240:10-3-68. . . . . [NEW] . . . . . 835
240:10-3-69. . . . . [NEW] . . . . . 835
240:10-11-8. . . . . [AMENDED] . . . . . 835
240:10-13-5. . . . . [AMENDED] . . . . . 835
240:10-13-9. . . . . [AMENDED] . . . . . 835
245:2-1-6. . . . . [AMENDED] . . . . . 1566
245:2-1-10. . . . . [AMENDED] . . . . . 1566

245:2-1-16. . . . . [AMENDED] . . . . . 1567
245:2-1-18. . . . . [AMENDED] . . . . . 1567
245:15-3-2. . . . . [AMENDED] . . . . . 1569
245:15-3-7. . . . . [AMENDED] . . . . . 1569
245:15-3-10. . . . . [AMENDED] . . . . . 1570
245:15-5-4. . . . . [AMENDED] . . . . . 1571
245:15-5-6. . . . . [AMENDED] . . . . . 1572
245:15-7-1. . . . . [AMENDED] . . . . . 1572
245:15-7-3. . . . . [AMENDED] . . . . . 1572
245:15-7-4. . . . . [AMENDED] . . . . . 1572
245:15-7-5. . . . . [AMENDED] . . . . . 1573
245:15-9-4. . . . . [AMENDED] . . . . . 1573
245:15-11-1. . . . . [AMENDED] . . . . . 1573
245:15-11-7. . . . . [AMENDED] . . . . . 1573
245:15-11-8. . . . . [AMENDED] . . . . . 1574
245:15-11-9. . . . . [AMENDED] . . . . . 1574
245:15-11-11. . . . . [AMENDED] . . . . . 1574
245:15-19-2. . . . . [AMENDED] . . . . . 1574
245:15-19-3. . . . . [AMENDED] . . . . . 1575
245:15-19-4. . . . . [AMENDED] . . . . . 1575
245:15-19-7. . . . . [AMENDED] . . . . . 1575
245:15-23-2. . . . . [AMENDED] . . . . . 1575
245:15-23-9. . . . . [AMENDED] . . . . . 1575
245:15-23-22. . . . . [AMENDED] . . . . . 1576
252:4-7-13. . . . . [AMENDED] . . . . . 1116
252:4-7-32. . . . . [AMENDED] . . . . . 1117
252:4-7-33. . . . . [AMENDED] . . . . . 1117
252:100-1-1. . . . . [AMENDED] . . . . . 1576
252:100-1-2. . . . . [AMENDED] . . . . . 1577
252:100-1-3. . . . . [AMENDED] . . . . . 1577
252:100-1-4. . . . . [NEW] . . . . . 1588
252:100-4-5. . . . . [AMENDED] . . . . . 1118
252:100-7-1.1. . . . . [AMENDED] . . . . . 1588
252:100-7-60.3. . . . . [NEW] . . . . . 1589
252:100-7-60.4. . . . . [NEW] . . . . . 1589
252:100-8-2. . . . . [AMENDED] . . . . . 1119
252:100-8-5. . . . . [AMENDED] . . . . . 1123
252:100-8-7.2. . . . . [AMENDED] . . . . . 1125
252:100-11-1. . . . . [AMENDED] . . . . . 1127
252:100-11-2. . . . . [AMENDED] . . . . . 1127
252:100-11-3. . . . . [AMENDED] . . . . . 1128
252:100-11-4. . . . . [AMENDED] . . . . . 1128
252:100-11-5. . . . . [AMENDED] . . . . . 1129
252:100-11-6. . . . . [AMENDED] . . . . . 1129
252:100-11-7. . . . . [NEW] . . . . . 1130
252:100-17-1. . . . . [AMENDED] . . . . . 1596
252:100-17-1.2. . . . . [AMENDED] . . . . . 1596
252:100-17-2.2. . . . . [AMENDED] . . . . . 1589
252:100-17-14.1. . . . . [AMENDED] . . . . . 1596
252:100-17-14.2. . . . . [NEW] . . . . . 1596
252:100-17-20. . . . . [AMENDED] . . . . . 1596
252:100-17-21. . . . . [AMENDED] . . . . . 1598
252:100-17-22. . . . . [AMENDED] . . . . . 1598
252:100-17-25. . . . . [AMENDED] . . . . . 1599
252:100-17-26. . . . . [AMENDED] . . . . . 1599
252:100-17-41. . . . . [AMENDED] . . . . . 1599
252:100-17-45. . . . . [AMENDED] . . . . . 1599
252:100-17-46. . . . . [AMENDED] . . . . . 1599
252:100-17-47. . . . . [AMENDED] . . . . . 1599
252:100-17-49. . . . . [AMENDED] . . . . . 1600
252:100-17-60. . . . . [NEW] . . . . . 1600
252:100-17-61. . . . . [NEW] . . . . . 1600
252:100-17-62. . . . . [NEW] . . . . . 1600
252:100-17-63. . . . . [NEW] . . . . . 1600
252:100-17-64. . . . . [NEW] . . . . . 1601
252:100-17-65. . . . . [NEW] . . . . . 1601
252:100-17-66. . . . . [NEW] . . . . . 1601
252:100-17-67. . . . . [NEW] . . . . . 1601
252:100-17-68. . . . . [NEW] . . . . . 1602
252:100-17-69. . . . . [NEW] . . . . . 1602
252:100-17-70. . . . . [NEW] . . . . . 1602
252:100-17-71. . . . . [NEW] . . . . . 1602
252:100-17-72. . . . . [NEW] . . . . . 1602
252:100-17-73. . . . . [NEW] . . . . . 1602
252:100-17-74. . . . . [NEW] . . . . . 1602
252:100-17-75. . . . . [NEW] . . . . . 1602
252:100-17-76. . . . . [NEW] . . . . . 1602
252:100-31-2. . . . . [AMENDED] . . . . . 1589
252:100-31-7. . . . . [AMENDED] . . . . . 1603
252:100-31-26. . . . . [AMENDED] . . . . . 1603
252:100-33-1.2. . . . . [AMENDED] (E) . . . . . 737
252:100-35-1.1. . . . . [AMENDED] . . . . . 1590
252:100-37-2. . . . . [AMENDED] . . . . . 1590
252:100-37-25. . . . . [AMENDED] . . . . . 1591
252:100-39-30. . . . . [AMENDED] . . . . . 1592
252:100-39-41. . . . . [AMENDED] . . . . . 1131
252:100-39-41.1. . . . . [NEW] . . . . . 1133
252:100-39-46. . . . . [AMENDED] . . . . . 1593
252:100-39-47. . . . . [AMENDED] . . . . . 1138
252:100-41-15. . . . . [AMENDED] . . . . . 1147
252:100-43-1. . . . . [AMENDED] . . . . . 1134
252:100-43-1.1. . . . . [NEW] . . . . . 1134
252:100-43-1.2. . . . . [NEW] . . . . . 1134
252:100-43-2. . . . . [AMENDED] . . . . . 1134
252:100-43-3. . . . . [AMENDED] . . . . . 1134
252:100-43-4. . . . . [NEW] . . . . . 1135
252:100-43-5. . . . . [NEW] . . . . . 1135
252:100-43-6. . . . . [NEW] . . . . . 1135
252:100-43-7. . . . . [NEW] . . . . . 1135
252:100-43-15. . . . . [AMENDED AND RENUMBERED TO 252:100-39-41.1] . . . . . 1136
252:100-45-1. . . . . [REVOKED] . . . . . 1136
252:100-45-2. . . . . [AMENDED AND RENUMBERED TO 252:100-43-4] . . . . . 1136
252:100-45-3. . . . . [AMENDED AND RENUMBERED TO 252:100-43-7] . . . . . 1136
252:100-45-4. . . . . [REVOKED] . . . . . 1137
252:100-45-5. . . . . [REVOKED] . . . . . 1137
252:100-47-3. . . . . [AMENDED] . . . . . 1147
252:100-47-6. . . . . [AMENDED] . . . . . 1148
252:100-47-7. . . . . [AMENDED] . . . . . 1148
252:100-47-8. . . . . [AMENDED] . . . . . 1148
252:100-47-9. . . . . [AMENDED] . . . . . 1148
252:100-47-10. . . . . [AMENDED] . . . . . 1148
252:100-47-11. . . . . [AMENDED] . . . . . 1148
252:100-47-12. . . . . [AMENDED] . . . . . 1148
252:100-47-13. . . . . [AMENDED] . . . . . 1148
252:100-47-14. . . . . [AMENDED] . . . . . 1149
252:100, App. N. . . . . [AMENDED] . . . . . 1143
252:205-3-1. . . . . [AMENDED] . . . . . 1605
252:205-3-2. . . . . [AMENDED] . . . . . 1605
252:205-3-3. . . . . [AMENDED] (E) . . . . . 61
252:205-3-3. . . . . [REVOKED] . . . . . 1606
252:205-17-20. . . . . [REVOKED] . . . . . 1149
252:205-17-21. . . . . [REVOKED] . . . . . 1149
252:205-17-22. . . . . [REVOKED] . . . . . 1149
252:205-17-23. . . . . [REVOKED] . . . . . 1149
252:205-17-24. . . . . [REVOKED] . . . . . 1150
252:205-17-25. . . . . [REVOKED] . . . . . 1150
252:205-17-26. . . . . [REVOKED] . . . . . 1150
252:205-17-27. . . . . [REVOKED] . . . . . 1150
252:410-10-121. . . . . [NEW] . . . . . 1606
252:510-1-1. . . . . [REVOKED] . . . . . 1150
252:510-1-4. . . . . [REVOKED] . . . . . 1150

252:510-1-5. ..... [REVOKED] ..... 1150
252:510-1-6. ..... [REVOKED] ..... 1150
252:510-1-7. ..... [REVOKED] ..... 1150
252:510-1-9. ..... [REVOKED] ..... 1150
252:510-3-1. ..... [REVOKED] ..... 1150
252:510-3-7. ..... [REVOKED] ..... 1150
252:510-3-10. ..... [REVOKED] ..... 1150
252:510-3-14. ..... [REVOKED] ..... 1150
252:510-3-15. ..... [REVOKED] ..... 1150
252:510-5-2. ..... [REVOKED] ..... 1150
252:510-5-3. ..... [REVOKED] ..... 1150
252:510-5-4. ..... [REVOKED] ..... 1150
252:510-5-5. ..... [REVOKED] ..... 1150
252:510-5-6. ..... [REVOKED] ..... 1150
252:510-5-7. ..... [REVOKED] ..... 1150
252:510-5-8. ..... [REVOKED] ..... 1150
252:510-7-2. ..... [REVOKED] ..... 1150
252:510-11-1. ..... [REVOKED] ..... 1150
252:510-11-2. ..... [REVOKED] ..... 1150
252:510-11-3. ..... [REVOKED] ..... 1150
252:510-11-4. ..... [REVOKED] ..... 1150
252:510-11-5. ..... [REVOKED] ..... 1150
252:510-11-6. ..... [REVOKED] ..... 1150
252:510-11-7. ..... [REVOKED] ..... 1150
252:510-11-8. ..... [REVOKED] ..... 1150
252:510-11-9. ..... [REVOKED] ..... 1150
252:510-11-10. ..... [REVOKED] ..... 1150
252:510-11-11. ..... [REVOKED] ..... 1150
252:510-11-12. ..... [REVOKED] ..... 1150
252:510-13-1. ..... [REVOKED] ..... 1150
252:510-13-2. ..... [REVOKED] ..... 1150
252:510-13-3. ..... [REVOKED] ..... 1150
252:510-13-4. ..... [REVOKED] ..... 1150
252:510-13-5. ..... [REVOKED] ..... 1150
252:510-13-6. ..... [REVOKED] ..... 1150
252:510-13-7. ..... [REVOKED] ..... 1150
252:510-13-8. ..... [REVOKED] ..... 1150
252:510-13-9. ..... [REVOKED] ..... 1150
252:510-13-10. ..... [REVOKED] ..... 1150
252:510-13-11. ..... [REVOKED] ..... 1150
252:510-13-12. ..... [REVOKED] ..... 1150
252:510-13-13. ..... [REVOKED] ..... 1150
252:510-13-14. ..... [REVOKED] ..... 1150
252:510-15-1. ..... [REVOKED] ..... 1150
252:510-15-2. ..... [REVOKED] ..... 1150
252:510-15-3. ..... [REVOKED] ..... 1150
252:510-15-4. ..... [REVOKED] ..... 1150
252:510-15-5. ..... [REVOKED] ..... 1150
252:510-15-6. ..... [REVOKED] ..... 1150
252:510-15-7. ..... [REVOKED] ..... 1150
252:510-15-8. ..... [REVOKED] ..... 1150
252:510-15-9. ..... [REVOKED] ..... 1150
252:510-16-1. ..... [REVOKED] ..... 1150
252:510-16-2. ..... [REVOKED] ..... 1150
252:510-16-3. ..... [REVOKED] ..... 1150
252:510-16-4. ..... [REVOKED] ..... 1150
252:510-16-5. ..... [REVOKED] ..... 1150
252:510-16-6. ..... [REVOKED] ..... 1150
252:510-16-7. ..... [REVOKED] ..... 1150
252:510-16-8. ..... [REVOKED] ..... 1150
252:510-16-9. ..... [REVOKED] ..... 1150
252:510-16-10. ..... [REVOKED] ..... 1150
252:510-16-11. ..... [REVOKED] ..... 1150
252:510-17-1. ..... [REVOKED] ..... 1150
252:510-17-2. ..... [REVOKED] ..... 1150
252:510-17-3. ..... [REVOKED] ..... 1150
252:510-17-4. ..... [REVOKED] ..... 1150
252:510-17-5. ..... [REVOKED] ..... 1150
252:510-17-6. ..... [REVOKED] ..... 1150
252:510-17-7. ..... [REVOKED] ..... 1150
252:510-17-8. ..... [REVOKED] ..... 1150
252:510-17-9. ..... [REVOKED] ..... 1150
252:510-17-10. ..... [REVOKED] ..... 1150
252:510-19-1. ..... [REVOKED] ..... 1150
252:510-19-2. ..... [REVOKED] ..... 1150
252:510-19-3. ..... [REVOKED] ..... 1150
252:510-19-4. ..... [REVOKED] ..... 1150
252:510-19-5. ..... [REVOKED] ..... 1150
252:510-19-6. ..... [REVOKED] ..... 1150
252:510-19-7. ..... [REVOKED] ..... 1150
252:510-19-8. ..... [REVOKED] ..... 1150
252:510-19-9. ..... [REVOKED] ..... 1150
252:510-19-10. ..... [REVOKED] ..... 1150
252:510-19-11. ..... [REVOKED] ..... 1150
252:510-19-12. ..... [REVOKED] ..... 1150
252:510-21-1. ..... [REVOKED] ..... 1150
252:510-21-2. ..... [REVOKED] ..... 1150
252:510-21-3. ..... [REVOKED] ..... 1150
252:510-21-4. ..... [REVOKED] ..... 1150
252:510-21-5. ..... [REVOKED] ..... 1150
252:510-21-6. ..... [REVOKED] ..... 1150
252:510-21-7. ..... [REVOKED] ..... 1150
252:510-21-8. ..... [REVOKED] ..... 1150
252:510-21-9. ..... [REVOKED] ..... 1150
252:510-21-10. ..... [REVOKED] ..... 1150
252:510-21-12. ..... [REVOKED] ..... 1150
252:510, App. A. ..... [REVOKED] ..... 1150
252:510, App. B. ..... [REVOKED] ..... 1150
252:510, App. C. ..... [REVOKED] ..... 1150
252:510, App. D. ..... [REVOKED] ..... 1150
252:510, App. E. ..... [REVOKED] ..... 1150
252:510, App. F. ..... [REVOKED] ..... 1150
252:510, App. G. ..... [REVOKED] ..... 1150
252:515-1-1. ..... [NEW] ..... 1151
252:515-1-2. ..... [NEW] ..... 1151
252:515-1-3. ..... [NEW] ..... 1151
252:515-1-4. ..... [NEW] ..... 1151
252:515-1-5. ..... [NEW] ..... 1151
252:515-1-6. ..... [NEW] ..... 1151
252:515-1-7. ..... [NEW] ..... 1151
252:515-1-8. ..... [NEW] ..... 1151
252:515-3-1. ..... [NEW] ..... 1151
252:515-3-2. ..... [NEW] ..... 1151
252:515-3-3. ..... [NEW] ..... 1151
252:515-3-4. ..... [NEW] ..... 1151
252:515-3-5. ..... [NEW] ..... 1151
252:515-3-6. ..... [NEW] ..... 1151
252:515-3-31. ..... [NEW] ..... 1151
252:515-3-32. ..... [NEW] ..... 1151
252:515-3-33. ..... [NEW] ..... 1151
252:515-3-34. ..... [NEW] ..... 1151
252:515-3-35. ..... [NEW] ..... 1151
252:515-3-36. ..... [NEW] ..... 1151
252:515-3-37. ..... [NEW] ..... 1151
252:515-3-38. ..... [NEW] ..... 1151
252:515-3-39. ..... [NEW] ..... 1151
252:515-3-40. ..... [NEW] ..... 1151
252:515-3-41. ..... [NEW] ..... 1151
252:515-3-51. ..... [NEW] ..... 1151
252:515-3-52. ..... [NEW] ..... 1151
252:515-3-53. ..... [NEW] ..... 1151
252:515-3-54. ..... [NEW] ..... 1151
252:515-3-55. ..... [NEW] ..... 1151
252:515-3-56. ..... [NEW] ..... 1151

252:515-3-57. ..... [NEW] ..... 1151
252:515-3-71. ..... [NEW] ..... 1151
252:515-3-72. ..... [NEW] ..... 1151
252:515-3-73. ..... [NEW] ..... 1151
252:515-3-74. ..... [NEW] ..... 1151
252:515-3-75. ..... [NEW] ..... 1151
252:515-3-76. ..... [NEW] ..... 1151
252:515-3-77. ..... [NEW] ..... 1151
252:515-3-78. ..... [NEW] ..... 1151
252:515-3-79. ..... [NEW] ..... 1151
252:515-3-80. ..... [NEW] ..... 1151
252:515-5-1. ..... [NEW] ..... 1151
252:515-5-31. ..... [NEW] ..... 1151
252:515-5-32. ..... [NEW] ..... 1151
252:515-5-51. ..... [NEW] ..... 1151
252:515-5-52. ..... [NEW] ..... 1151
252:515-7-1. ..... [NEW] ..... 1151
252:515-7-2. ..... [NEW] ..... 1151
252:515-7-3. ..... [NEW] ..... 1151
252:515-7-4. ..... [NEW] ..... 1151
252:515-7-5. ..... [NEW] ..... 1151
252:515-7-31. ..... [NEW] ..... 1151
252:515-7-32. ..... [NEW] ..... 1151
252:515-7-33. ..... [NEW] ..... 1151
252:515-7-34. ..... [NEW] ..... 1151
252:515-7-35. ..... [NEW] ..... 1151
252:515-7-36. ..... [NEW] ..... 1151
252:515-7-37. ..... [NEW] ..... 1151
252:515-7-38. ..... [NEW] ..... 1151
252:515-7-51. ..... [NEW] ..... 1151
252:515-7-52. ..... [NEW] ..... 1151
252:515-7-53. ..... [NEW] ..... 1151
252:515-7-54. ..... [NEW] ..... 1151
252:515-7-55. ..... [NEW] ..... 1151
252:515-7-56. ..... [NEW] ..... 1151
252:515-7-71. ..... [NEW] ..... 1151
252:515-9-1. ..... [NEW] ..... 1151
252:515-9-2. ..... [NEW] ..... 1151
252:515-9-3. ..... [NEW] ..... 1151
252:515-9-4. ..... [NEW] ..... 1151
252:515-9-5. ..... [NEW] ..... 1151
252:515-9-6. ..... [NEW] ..... 1151
252:515-9-7. ..... [NEW] ..... 1151
252:515-9-31. ..... [NEW] ..... 1151
252:515-9-51. ..... [NEW] ..... 1151
252:515-9-52. ..... [NEW] ..... 1151
252:515-9-53. ..... [NEW] ..... 1151
252:515-9-54. ..... [NEW] ..... 1151
252:515-9-71. ..... [NEW] ..... 1151
252:515-9-72. ..... [NEW] ..... 1151
252:515-9-73. ..... [NEW] ..... 1151
252:515-9-74. ..... [NEW] ..... 1151
252:515-9-91. ..... [NEW] ..... 1151
252:515-9-92. ..... [NEW] ..... 1151
252:515-9-93. ..... [NEW] ..... 1151
252:515-9-94. ..... [NEW] ..... 1151
252:515-9-95. ..... [NEW] ..... 1151
252:515-9-96. ..... [NEW] ..... 1151
252:515-9-111. ..... [NEW] ..... 1151
252:515-9-112. ..... [NEW] ..... 1151
252:515-9-113. ..... [NEW] ..... 1151
252:515-9-131. ..... [NEW] ..... 1151
252:515-9-132. ..... [NEW] ..... 1151
252:515-9-133. ..... [NEW] ..... 1151
252:515-9-134. ..... [NEW] ..... 1151
252:515-9-135. ..... [NEW] ..... 1151
252:515-9-151. ..... [NEW] ..... 1151
252:515-9-152. ..... [NEW] ..... 1151
252:515-9-153. ..... [NEW] ..... 1151
252:515-9-154. ..... [NEW] ..... 1151
252:515-9-155. ..... [NEW] ..... 1151
252:515-9-156. ..... [NEW] ..... 1151
252:515-11-1. ..... [NEW] ..... 1151
252:515-11-2. ..... [NEW] ..... 1151
252:515-11-3. ..... [NEW] ..... 1151
252:515-11-4. ..... [NEW] ..... 1151
252:515-11-5. ..... [NEW] ..... 1151
252:515-11-6. ..... [NEW] ..... 1151
252:515-11-7. ..... [NEW] ..... 1151
252:515-11-31. ..... [NEW] ..... 1151
252:515-11-32. ..... [NEW] ..... 1151
252:515-11-33. ..... [NEW] ..... 1151
252:515-11-34. ..... [NEW] ..... 1151
252:515-11-35. ..... [NEW] ..... 1151
252:515-11-36. ..... [NEW] ..... 1151
252:515-11-37. ..... [NEW] ..... 1151
252:515-11-38. ..... [NEW] ..... 1151
252:515-11-39. ..... [NEW] ..... 1151
252:515-11-51. ..... [NEW] ..... 1151
252:515-11-52. ..... [NEW] ..... 1151
252:515-11-53. ..... [NEW] ..... 1151
252:515-11-54. ..... [NEW] ..... 1151
252:515-11-55. ..... [NEW] ..... 1151
252:515-11-56. ..... [NEW] ..... 1151
252:515-11-57. ..... [NEW] ..... 1151
252:515-11-58. ..... [NEW] ..... 1151
252:515-11-59. ..... [NEW] ..... 1151
252:515-11-60. ..... [NEW] ..... 1151
252:515-11-71. ..... [NEW] ..... 1151
252:515-11-72. ..... [NEW] ..... 1151
252:515-11-73. ..... [NEW] ..... 1151
252:515-11-74. ..... [NEW] ..... 1151
252:515-11-75. ..... [NEW] ..... 1151
252:515-11-76. ..... [NEW] ..... 1151
252:515-13-1. ..... [NEW] ..... 1151
252:515-13-2. ..... [NEW] ..... 1151
252:515-13-31. ..... [NEW] ..... 1151
252:515-13-32. ..... [NEW] ..... 1151
252:515-13-33. ..... [NEW] ..... 1151
252:515-13-34. ..... [NEW] ..... 1151
252:515-13-35. ..... [NEW] ..... 1151
252:515-13-51. ..... [NEW] ..... 1151
252:515-13-52. ..... [NEW] ..... 1151
252:515-13-53. ..... [NEW] ..... 1151
252:515-13-54. ..... [NEW] ..... 1151
252:515-13-55. ..... [NEW] ..... 1151
252:515-13-56. ..... [NEW] ..... 1151
252:515-13-57. ..... [NEW] ..... 1151
252:515-15-1. ..... [NEW] ..... 1151
252:515-15-2. ..... [NEW] ..... 1151
252:515-15-3. ..... [NEW] ..... 1151
252:515-15-4. ..... [NEW] ..... 1151
252:515-15-5. ..... [NEW] ..... 1151
252:515-17-1. ..... [NEW] ..... 1151
252:515-17-2. ..... [NEW] ..... 1151
252:515-17-3. ..... [NEW] ..... 1151
252:515-19-1. ..... [NEW] ..... 1151
252:515-19-31. ..... [NEW] ..... 1151
252:515-19-32. ..... [NEW] ..... 1151
252:515-19-33. ..... [NEW] ..... 1151
252:515-19-34. ..... [NEW] ..... 1151
252:515-19-35. ..... [NEW] ..... 1151
252:515-19-36. ..... [NEW] ..... 1151
252:515-19-37. ..... [NEW] ..... 1151

252:515-19-38. ..... [NEW] ..... 1151
252:515-19-39. ..... [NEW] ..... 1151
252:515-19-40. ..... [NEW] ..... 1151
252:515-19-51. ..... [NEW] ..... 1151
252:515-19-52. ..... [NEW] ..... 1151
252:515-19-53. ..... [NEW] ..... 1151
252:515-19-54. ..... [NEW] ..... 1151
252:515-19-55. ..... [NEW] ..... 1151
252:515-19-71. ..... [NEW] ..... 1151
252:515-19-72. ..... [NEW] ..... 1151
252:515-19-73. ..... [NEW] ..... 1151
252:515-19-74. ..... [NEW] ..... 1151
252:515-19-75. ..... [NEW] ..... 1151
252:515-19-91. ..... [NEW] ..... 1151
252:515-19-92. ..... [NEW] ..... 1151
252:515-19-93. ..... [NEW] ..... 1151
252:515-19-111. ..... [NEW] ..... 1151
252:515-19-112. ..... [NEW] ..... 1151
252:515-19-113. ..... [NEW] ..... 1151
252:515-19-114. ..... [NEW] ..... 1151
252:515-19-115. ..... [NEW] ..... 1151
252:515-19-116. ..... [NEW] ..... 1151
252:515-19-117. ..... [NEW] ..... 1151
252:515-19-118. ..... [NEW] ..... 1151
252:515-19-119. ..... [NEW] ..... 1151
252:515-19-120. ..... [NEW] ..... 1151
252:515-19-121. ..... [NEW] ..... 1151
252:515-19-122. ..... [NEW] ..... 1151
252:515-19-123. ..... [NEW] ..... 1151
252:515-19-124. ..... [NEW] ..... 1151
252:515-19-125. ..... [NEW] ..... 1151
252:515-19-126. ..... [NEW] ..... 1151
252:515-21-1. ..... [NEW] ..... 1151
252:515-21-2. ..... [NEW] ..... 1151
252:515-21-3. ..... [NEW] ..... 1151
252:515-21-4. ..... [NEW] ..... 1151
252:515-21-31. ..... [NEW] ..... 1151
252:515-21-32. ..... [NEW] ..... 1151
252:515-21-33. ..... [NEW] ..... 1151
252:515-21-34. ..... [NEW] ..... 1151
252:515-21-35. ..... [NEW] ..... 1151
252:515-21-51. ..... [NEW] ..... 1151
252:515-21-71. ..... [NEW] ..... 1151
252:515-21-72. ..... [NEW] ..... 1151
252:515-21-73. ..... [NEW] ..... 1151
252:515-21-74. ..... [NEW] ..... 1151
252:515-21-75. ..... [NEW] ..... 1151
252:515-21-91. ..... [NEW] ..... 1151
252:515-21-92. ..... [NEW] ..... 1151
252:515-21-111. ..... [NEW] ..... 1151
252:515-21-112. ..... [NEW] ..... 1151
252:515-23-1. ..... [NEW] ..... 1151
252:515-23-2. ..... [NEW] ..... 1151
252:515-23-3. ..... [NEW] ..... 1151
252:515-23-4. ..... [NEW] ..... 1151
252:515-23-5. ..... [NEW] ..... 1151
252:515-23-31. ..... [NEW] ..... 1151
252:515-23-32. ..... [NEW] ..... 1151
252:515-23-33. ..... [NEW] ..... 1151
252:515-23-34. ..... [NEW] ..... 1151
252:515-23-35. ..... [NEW] ..... 1151
252:515-23-51. ..... [NEW] ..... 1151
252:515-23-52. ..... [NEW] ..... 1151
252:515-23-53. ..... [NEW] ..... 1151
252:515-23-54. ..... [NEW] ..... 1151
252:515-23-55. ..... [NEW] ..... 1151
252:515-23-56. ..... [NEW] ..... 1151
252:515-25-1. ..... [NEW] ..... 1151
252:515-25-2. ..... [NEW] ..... 1151
252:515-25-3. ..... [NEW] ..... 1151
252:515-25-4. ..... [NEW] ..... 1151
252:515-25-31. ..... [NEW] ..... 1151
252:515-25-32. ..... [NEW] ..... 1151
252:515-25-33. ..... [NEW] ..... 1151
252:515-25-34. ..... [NEW] ..... 1151
252:515-25-35. ..... [NEW] ..... 1151
252:515-25-36. ..... [NEW] ..... 1151
252:515-25-51. ..... [NEW] ..... 1151
252:515-25-52. ..... [NEW] ..... 1151
252:515-25-53. ..... [NEW] ..... 1151
252:515-25-54. ..... [NEW] ..... 1151
252:515-25-55. ..... [NEW] ..... 1151
252:515-25-56. ..... [NEW] ..... 1151
252:515-25-57. ..... [NEW] ..... 1151
252:515-27-1. ..... [NEW] ..... 1151
252:515-27-2. ..... [NEW] ..... 1151
252:515-27-3. ..... [NEW] ..... 1151
252:515-27-4. ..... [NEW] ..... 1151
252:515-27-5. ..... [NEW] ..... 1151
252:515-27-6. ..... [NEW] ..... 1151
252:515-27-7. ..... [NEW] ..... 1151
252:515-27-8. ..... [NEW] ..... 1151
252:515-27-31. ..... [NEW] ..... 1151
252:515-27-32. ..... [NEW] ..... 1151
252:515-27-33. ..... [NEW] ..... 1151
252:515-27-34. ..... [NEW] ..... 1151
252:515-27-51. ..... [NEW] ..... 1151
252:515-27-52. ..... [NEW] ..... 1151
252:515-27-71. ..... [NEW] ..... 1151
252:515-27-72. ..... [NEW] ..... 1151
252:515-27-73. ..... [NEW] ..... 1151
252:515-27-74. ..... [NEW] ..... 1151
252:515-27-75. ..... [NEW] ..... 1151
252:515-27-76. ..... [NEW] ..... 1151
252:515-27-77. ..... [NEW] ..... 1151
252:515-27-78. ..... [NEW] ..... 1151
252:515-27-79. ..... [NEW] ..... 1151
252:515-27-80. ..... [NEW] ..... 1151
252:515-27-81. ..... [NEW] ..... 1151
252:515-27-82. ..... [NEW] ..... 1151
252:515-27-83. ..... [NEW] ..... 1151
252:515-27-84. ..... [NEW] ..... 1151
252:515-27-85. ..... [NEW] ..... 1151
252:515-29-1. ..... [NEW] ..... 1151
252:515-29-2. ..... [NEW] ..... 1151
252:515-29-3. ..... [NEW] ..... 1151
252:515-29-4. ..... [NEW] ..... 1151
252:515-31-1. ..... [NEW] ..... 1151
252:515-31-2. ..... [NEW] ..... 1151
252:515-31-3. ..... [NEW] ..... 1151
252:515-31-4. ..... [NEW] ..... 1151
252:515-33-1. ..... [NEW] ..... 1151
252:515-33-2. ..... [NEW] ..... 1151
252:515-33-3. ..... [NEW] ..... 1151
252:515-33-4. ..... [NEW] ..... 1151
252:515-35-1. ..... [NEW] ..... 1151
252:515-35-2. ..... [NEW] ..... 1151
252:515-35-3. ..... [NEW] ..... 1151
252:515-35-4. ..... [NEW] ..... 1151
252:515-37-1. ..... [NEW] ..... 1151
252:515-37-2. ..... [NEW] ..... 1151
252:515-37-3. ..... [NEW] ..... 1151
252:515-37-4. ..... [NEW] ..... 1151
252:515-37-5. ..... [NEW] ..... 1151

252:515-37-6. ..... [NEW] ..... 1151
252:515-37-7. ..... [NEW] ..... 1151
252:515-37-8. ..... [NEW] ..... 1151
252:515-37-9. ..... [NEW] ..... 1151
252:515-37-10. ..... [NEW] ..... 1151
252:515, App. A. ..... [AMENDED] ..... 1151
252:515, App. B. ..... [AMENDED] ..... 1151
252:515, App. C. ..... [AMENDED] ..... 1151
252:515, App. D. ..... [AMENDED] ..... 1151
252:515, App. E. ..... [AMENDED] ..... 1151
252:515, App. F. ..... [AMENDED] ..... 1151
252:515, App. G. ..... [AMENDED] ..... 1151
252:515, App. H. ..... [AMENDED] ..... 1151
252:515, App. I. ..... [AMENDED] ..... 1151
252:520-1-1. ..... [REVOKED] ..... 1151
252:520-1-3. ..... [REVOKED] ..... 1151
252:520-1-4. ..... [REVOKED] ..... 1151
252:520-1-5. ..... [REVOKED] ..... 1151
252:520-1-6. ..... [REVOKED] ..... 1151
252:520-1-7. ..... [REVOKED] ..... 1151
252:520-1-8. ..... [REVOKED] ..... 1151
252:520-1-10. ..... [REVOKED] ..... 1151
252:520-1-11. ..... [REVOKED] ..... 1151
252:520-2-1. ..... [REVOKED] ..... 1151
252:520-2-2. ..... [REVOKED] ..... 1151
252:520-2-3. ..... [REVOKED] ..... 1151
252:520-2-4. ..... [REVOKED] ..... 1151
252:520-2-5. ..... [REVOKED] ..... 1151
252:520-2-6. ..... [REVOKED] ..... 1151
252:520-2-7. ..... [REVOKED] ..... 1151
252:520-2-8. ..... [REVOKED] ..... 1151
252:520-2-9. ..... [REVOKED] ..... 1151
252:520-2-10. ..... [REVOKED] ..... 1151
252:520-2-11. ..... [REVOKED] ..... 1151
252:520-2-12. ..... [REVOKED] ..... 1151
252:520-2-13. ..... [REVOKED] ..... 1151
252:520-3-1. ..... [REVOKED] ..... 1151
252:520-3-1.1. ..... [AMENDED] (E) ..... 495
252:520-3-1.1. ..... [REVOKED] ..... 1151
252:520-3-7. ..... [REVOKED] ..... 1151
252:520-3-9. ..... [REVOKED] ..... 1151
252:520-3-14. ..... [REVOKED] ..... 1151
252:520-5-1. ..... [REVOKED] ..... 1151
252:520-5-2. ..... [AMENDED] (E) ..... 495
252:520-5-2. ..... [REVOKED] ..... 1151
252:520-5-3. ..... [AMENDED] (E) ..... 496
252:520-5-3. ..... [REVOKED] ..... 1151
252:520-5-4. ..... [REVOKED] ..... 1151
252:520-5-5. ..... [AMENDED] (E) ..... 496
252:520-5-5. ..... [REVOKED] ..... 1151
252:520-5-6. ..... [REVOKED] ..... 1151
252:520-5-7. ..... [REVOKED] ..... 1151
252:520-5-8. ..... [REVOKED] ..... 1151
252:520-7-1. ..... [REVOKED] ..... 1151
252:520-7-2. ..... [REVOKED] ..... 1151
252:520-9-1. ..... [REVOKED] ..... 1151
252:520-9-2. ..... [REVOKED] ..... 1151
252:520-9-3. ..... [REVOKED] ..... 1151
252:520-9-4. ..... [REVOKED] ..... 1151
252:520-9-5. ..... [REVOKED] ..... 1151
252:520-9-6. ..... [REVOKED] ..... 1151
252:520-9-7. ..... [REVOKED] ..... 1151
252:520-9-8. ..... [REVOKED] ..... 1151
252:520-9-9. ..... [REVOKED] ..... 1151
252:520-9-10. ..... [REVOKED] ..... 1151
252:520-9-11. ..... [AMENDED] (E) ..... 497
252:520-9-11. ..... [REVOKED] ..... 1151
252:520-9-12. ..... [REVOKED] ..... 1151
252:520-9-13. ..... [REVOKED] ..... 1151
252:520-9-14. ..... [REVOKED] ..... 1151
252:520-11-1. ..... [REVOKED] ..... 1151
252:520-11-2. ..... [REVOKED] ..... 1151
252:520-11-3. ..... [REVOKED] ..... 1151
252:520-13-1. ..... [REVOKED] ..... 1151
252:520-13-2. ..... [REVOKED] ..... 1151
252:520-13-3. ..... [REVOKED] ..... 1151
252:520-15-1. ..... [REVOKED] ..... 1151
252:520-15-2. ..... [REVOKED] ..... 1151
252:520-17-1. ..... [REVOKED] ..... 1151
252:520-17-2. ..... [REVOKED] ..... 1151
252:520-17-3. ..... [REVOKED] ..... 1151
252:520-19-1. ..... [REVOKED] ..... 1151
252:520-19-2. ..... [REVOKED] ..... 1151
252:520-19-3. ..... [REVOKED] ..... 1151
252:520-19-4. ..... [REVOKED] ..... 1151
252:520-19-5. ..... [REVOKED] ..... 1151
252:520-19-6. ..... [REVOKED] ..... 1151
252:520-19-7. ..... [REVOKED] ..... 1151
252:520-19-9. ..... [REVOKED] ..... 1151
252:520-19-10. ..... [AMENDED] (E) ..... 499
252:520-19-10. ..... [REVOKED] ..... 1151
252:520-21-1. ..... [REVOKED] ..... 1151
252:520-21-2. ..... [REVOKED] ..... 1151
252:520-21-3. ..... [REVOKED] ..... 1151
252:520-21-6. ..... [REVOKED] ..... 1151
252:520-21-7. ..... [REVOKED] ..... 1151
252:520-21-8. ..... [REVOKED] ..... 1151
252:520-21-9. ..... [REVOKED] ..... 1151
252:520-21-10. ..... [REVOKED] ..... 1151
252:520-21-11. ..... [REVOKED] ..... 1151
252:520-21-12. ..... [REVOKED] ..... 1151
252:520-21-13. ..... [REVOKED] ..... 1151
252:520-21-14. ..... [REVOKED] ..... 1151
252:520-21-15. ..... [AMENDED] (E) ..... 499
252:520-21-15. ..... [REVOKED] ..... 1151
252:520-21-16. ..... [REVOKED] ..... 1151
252:520-21-17. ..... [REVOKED] ..... 1151
252:520-21-18. ..... [REVOKED] ..... 1151
252:520-21-19. ..... [REVOKED] ..... 1151
252:520-21-20. ..... [NEW] (E) ..... 499
252:520-21-21. ..... [NEW] (E) ..... 500
252:520-23-1. ..... [REVOKED] ..... 1151
252:520-23-2. ..... [REVOKED] ..... 1151
252:520-23-3. ..... [REVOKED] ..... 1151
252:520-23-4. ..... [REVOKED] ..... 1151
252:520-23-5. ..... [REVOKED] ..... 1151
252:520-23-6. ..... [REVOKED] ..... 1151
252:520-23-7. ..... [REVOKED] ..... 1151
252:520-23-8. ..... [AMENDED] (E) ..... 500
252:520-23-8. ..... [REVOKED] ..... 1151
252:520-23-10. ..... [REVOKED] ..... 1151
252:520-23-11. ..... [REVOKED] ..... 1151
252:520-23-12. ..... [REVOKED] ..... 1151
252:520-23-13. ..... [REVOKED] ..... 1151
252:520-23-14. ..... [REVOKED] ..... 1151
252:520-23-15. ..... [REVOKED] ..... 1151
252:520-23-16. ..... [REVOKED] ..... 1151
252:520-23-17. ..... [REVOKED] ..... 1151
252:520-23-18. ..... [REVOKED] ..... 1151
252:520-23-19. ..... [REVOKED] ..... 1151
252:520-23-20. ..... [REVOKED] ..... 1151
252:520-23-21. ..... [REVOKED] ..... 1151
252:520-23-35. ..... [REVOKED] ..... 1151
252:520-23-36. ..... [REVOKED] ..... 1151

252:520-23-37. . . . . [REVOKED] . . . . . 1151
252:520-23-38. . . . . [REVOKED] . . . . . 1151
252:520-23-39. . . . . [REVOKED] . . . . . 1151
252:520-23-40. . . . . [REVOKED] . . . . . 1151
252:520-23-50. . . . . [REVOKED] . . . . . 1151
252:520-23-51. . . . . [REVOKED] . . . . . 1151
252:520-23-52. . . . . [REVOKED] . . . . . 1151
252:520-23-53. . . . . [REVOKED] . . . . . 1151
252:520-23-54. . . . . [REVOKED] . . . . . 1151
252:520-23-55. . . . . [REVOKED] . . . . . 1151
252:520-25-1. . . . . [REVOKED] . . . . . 1151
252:520-25-2. . . . . [REVOKED] . . . . . 1151
252:520-25-3. . . . . [REVOKED] . . . . . 1151
252:520-25-4. . . . . [REVOKED] . . . . . 1151
252:520-27-1. . . . . [NEW] (E) . . . . . 501
252:520-27-2. . . . . [NEW] (E) . . . . . 501
252:520-27-3. . . . . [NEW] (E) . . . . . 501
252:520-27-4. . . . . [NEW] (E) . . . . . 501
252:520-27-5. . . . . [NEW] (E) . . . . . 501
252:520-27-6. . . . . [NEW] (E) . . . . . 501
252:520-27-7. . . . . [NEW] (E) . . . . . 501
252:520-27-8. . . . . [NEW] (E) . . . . . 501
252:520-27-9. . . . . [NEW] (E) . . . . . 502
252:520-27-10. . . . . [NEW] (E) . . . . . 502
252:520, App. A. . . . . [REVOKED] . . . . . 1151
252:520, App. B. . . . . [REVOKED] . . . . . 1151
252:631-1-1. . . . . [AMENDED] . . . . . 1153
252:631-1-2. . . . . [AMENDED] (E) . . . . . 62
252:631-1-2. . . . . [AMENDED] . . . . . 1153
252:631-1-3. . . . . [AMENDED] (E) . . . . . 63
252:631-1-3. . . . . [AMENDED] . . . . . 1155
252:631-1-4. . . . . [AMENDED] (E) . . . . . 63
252:631-1-4. . . . . [AMENDED] . . . . . 1155
252:631-3-1. . . . . [AMENDED] (E) . . . . . 64
252:631-3-1. . . . . [AMENDED] . . . . . 1155
252:631-3-2. . . . . [AMENDED] (E) . . . . . 64
252:631-3-2. . . . . [AMENDED] . . . . . 1156
252:631-3-3. . . . . [AMENDED] (E) . . . . . 64
252:631-3-3. . . . . [AMENDED] . . . . . 1156
252:631-3-4. . . . . [AMENDED] . . . . . 1157
252:631-3-5. . . . . [REVOKED] (E) . . . . . 65
252:631-3-5. . . . . [REVOKED] . . . . . 1157
252:631-3-6. . . . . [AMENDED] (E) . . . . . 66
252:631-3-6. . . . . [AMENDED] . . . . . 1157
252:631-3-7. . . . . [REVOKED] (E) . . . . . 66
252:631-3-7. . . . . [REVOKED] . . . . . 1158
252:631-3-8. . . . . [AMENDED] (E) . . . . . 66
252:631-3-8. . . . . [AMENDED] . . . . . 1158
252:631-3-9. . . . . [AMENDED] (E) . . . . . 66
252:631-3-9. . . . . [AMENDED] . . . . . 1158
252:631-3-10. . . . . [AMENDED] (E) . . . . . 67
252:631-3-10. . . . . [AMENDED] . . . . . 1158
252:631-3-11. . . . . [AMENDED] (E) . . . . . 68
252:631-3-11. . . . . [AMENDED] . . . . . 1160
252:631-3-12. . . . . [AMENDED] (E) . . . . . 69
252:631-3-12. . . . . [AMENDED] . . . . . 1160
252:631-3-13. . . . . [AMENDED] (E) . . . . . 69
252:631-3-13. . . . . [AMENDED] . . . . . 1161
252:631-3-14. . . . . [REVOKED] (E) . . . . . 70
252:631-3-14. . . . . [REVOKED] . . . . . 1162
252:631-3-15. . . . . [AMENDED] . . . . . 1162
252:631-3-16. . . . . [AMENDED] . . . . . 1162
252:631-3-17. . . . . [AMENDED] . . . . . 1162
252:631-3-19. . . . . [AMENDED] . . . . . 1163
252:631-3-20. . . . . [AMENDED] . . . . . 1163
252:631-3-21. . . . . [AMENDED] (E) . . . . . 71
252:631-3-21. . . . . [AMENDED] . . . . . 1163
252:631-3-22. . . . . [NEW] (E) . . . . . 71
252:631-3-22. . . . . [NEW] . . . . . 1163
252:631-5-1. . . . . [NEW] (E) . . . . . 71
252:631-5-1. . . . . [NEW] . . . . . 1164
252:631-5-2. . . . . [NEW] (E) . . . . . 72
252:631-5-2. . . . . [NEW] . . . . . 1164
252:631-5-3. . . . . [NEW] (E) . . . . . 72
252:631-5-3. . . . . [NEW] . . . . . 1164
252:631-5-4. . . . . [NEW] (E) . . . . . 72
252:631-5-4. . . . . [NEW] . . . . . 1164
252:631-5-5. . . . . [NEW] (E) . . . . . 72
252:631-5-5. . . . . [NEW] . . . . . 1164
252:631, App. A. . . . . [REVOKED] (E) . . . . . 73
252:631, App. A. . . . . [REVOKED] . . . . . 1165
252:631, App. B. . . . . [REVOKED] (E) . . . . . 76
252:631, App. B. . . . . [REVOKED] . . . . . 1168
252:631, App. C. . . . . [REVOKED] (E) . . . . . 87
252:631, App. C. . . . . [REVOKED] . . . . . 1179
304:10-1-2. . . . . [AMENDED] . . . . . 2349
304:10-1-3. . . . . [AMENDED] . . . . . 2349
304:10-1-4. . . . . [AMENDED] . . . . . 2351
304:10-1-5. . . . . [AMENDED] . . . . . 2351
304:10-1-8. . . . . [AMENDED] . . . . . 2351
304:10-1-10. . . . . [AMENDED] . . . . . 2352
304:10-1-11. . . . . [AMENDED] . . . . . 2352
304:10-1-12. . . . . [NEW] . . . . . 2352
310:2-3-5. . . . . [AMENDED] . . . . . 1180
310:2-7-3. . . . . [AMENDED] (E) . . . . . 88
310:2-7-3. . . . . [AMENDED] . . . . . 1181
310:4-1-11. . . . . [AMENDED] . . . . . 2353
310:6-1-1. . . . . [REVOKED] . . . . . 1607
310:6-1-2. . . . . [REVOKED] . . . . . 1607
310:6-1-3. . . . . [REVOKED] . . . . . 1607
310:6-1-4. . . . . [REVOKED] . . . . . 1607
310:6-1-5. . . . . [REVOKED] . . . . . 1607
310:6-1-6. . . . . [REVOKED] . . . . . 1607
310:6-1-7. . . . . [REVOKED] . . . . . 1608
310:6-1-8. . . . . [REVOKED] . . . . . 1608
310:6-1-9. . . . . [REVOKED] . . . . . 1608
310:6-1-10. . . . . [REVOKED] . . . . . 1608
310:7-1-1. . . . . [REVOKED] . . . . . 1609
310:7-1-2. . . . . [REVOKED] . . . . . 1609
310:7-1-3. . . . . [REVOKED] . . . . . 1609
310:7-1-4. . . . . [REVOKED] . . . . . 1609
310:7-1-5. . . . . [REVOKED] . . . . . 1609
310:7-1-6. . . . . [REVOKED] . . . . . 1609
310:7-1-7. . . . . [REVOKED] . . . . . 1610
310:7-1-8. . . . . [REVOKED] . . . . . 1610
310:7-1-9. . . . . [REVOKED] . . . . . 1610
310:7-1-10. . . . . [REVOKED] . . . . . 1610
310:105-1-3. . . . . [AMENDED] . . . . . 2353
310:110-1-1. . . . . [AMENDED] (E) . . . . . 502
310:110-1-1. . . . . [AMENDED] . . . . . 1611
310:110-3-2. . . . . [REVOKED] . . . . . 1611
310:110-5-1. . . . . [REVOKED] . . . . . 1612
310:110-5-2. . . . . [REVOKED] . . . . . 1612
310:110-5-3. . . . . [AMENDED] . . . . . 1612
310:110-5-6. . . . . [NEW] (E) . . . . . 502
310:110-5-6. . . . . [NEW] . . . . . 1612
310:110-5-7. . . . . [NEW] (E) . . . . . 503
310:110-5-7. . . . . [NEW] . . . . . 1613
310:205-3-2. . . . . [AMENDED] (E) . . . . . 504
310:205-3-2. . . . . [AMENDED] . . . . . 2355
310:205-3-3. . . . . [AMENDED] (E) . . . . . 505
310:205-3-3. . . . . [AMENDED] . . . . . 2356
310:205-3-4. . . . . [AMENDED] (E) . . . . . 506
310:205-3-4. . . . . [AMENDED] . . . . . 2357

310:205, App. A. . . . . [REVOKED] (E) . . . . . 509
310:205, App. A. . . . . [NEW] (E) . . . . . 509
310:205, App. A. . . . . [REVOKED] . . . . . 2360
310:205, App. A. . . . . [NEW] . . . . . 2360
310:234-3-4. . . . . [AMENDED] . . . . . 1614
310:234-3-5. . . . . [AMENDED] . . . . . 1615
310:245-1-1. . . . . [REVOKED] . . . . . 1617
310:245-1-2. . . . . [REVOKED] . . . . . 1617
310:245-1-3. . . . . [REVOKED] . . . . . 1617
310:245-3-1. . . . . [REVOKED] . . . . . 1617
310:245-3-2. . . . . [REVOKED] . . . . . 1618
310:245-3-3. . . . . [REVOKED] . . . . . 1618
310:245-5-1. . . . . [REVOKED] . . . . . 1618
310:245-5-2. . . . . [REVOKED] . . . . . 1618
310:245-5-3. . . . . [REVOKED] . . . . . 1618
310:245-7-1. . . . . [REVOKED] . . . . . 1619
310:245-7-2. . . . . [REVOKED] . . . . . 1619
310:245-7-3. . . . . [REVOKED] . . . . . 1619
310:245-7-4. . . . . [REVOKED] . . . . . 1620
310:245-7-5. . . . . [REVOKED] . . . . . 1620
310:245-9-1. . . . . [REVOKED] . . . . . 1620
310:245-9-2. . . . . [REVOKED] . . . . . 1620
310:245-9-3. . . . . [REVOKED] . . . . . 1620
310:245-11-1. . . . . [REVOKED] . . . . . 1621
310:245-13-1. . . . . [REVOKED] . . . . . 1621
310:245-13-2. . . . . [REVOKED] . . . . . 1622
310:245-13-3. . . . . [REVOKED] . . . . . 1622
310:256-1-2. . . . . [AMENDED] . . . . . 1623
310:256-1-4. . . . . [NEW] . . . . . 1628
310:256-3-4. . . . . [AMENDED] . . . . . 1628
310:256-3-5. . . . . [AMENDED] . . . . . 1629
310:256-3-6. . . . . [AMENDED] . . . . . 1629
310:256-5-5. . . . . [AMENDED] . . . . . 1630
310:256-5-15. . . . . [AMENDED] . . . . . 1630
310:256-5-39. . . . . [AMENDED] . . . . . 1630
310:256-5-40. . . . . [AMENDED] . . . . . 1630
310:256-5-45. . . . . [AMENDED] . . . . . 1630
310:256-5-57. . . . . [AMENDED] . . . . . 1631
310:256-5-67. . . . . [NEW] . . . . . 1631
310:256-5-68. . . . . [AMENDED] . . . . . 1631
310:256-5-69. . . . . [AMENDED] . . . . . 1631
310:256-7-42. . . . . [AMENDED] . . . . . 1632
310:256-7-51. . . . . [AMENDED] . . . . . 1632
310:256-7-79. . . . . [AMENDED] . . . . . 1632
310:256-9-8. . . . . [AMENDED] . . . . . 1632
310:256-11-40. . . . . [AMENDED] . . . . . 1633
310:256-15-6. . . . . [AMENDED] . . . . . 1633
310:256-15-7. . . . . [AMENDED] . . . . . 1633
310:256-15-8. . . . . [AMENDED] . . . . . 1633
310:256-15-9. . . . . [AMENDED] . . . . . 1633
310:256-15-11. . . . . [AMENDED] . . . . . 1633
310:256-15-14. . . . . [AMENDED] . . . . . 1633
310:256-15-16. . . . . [AMENDED] . . . . . 1633
310:256-15-20. . . . . [AMENDED] . . . . . 1634
310:256-15-33. . . . . [AMENDED] . . . . . 1634
310:256-15-38. . . . . [AMENDED] . . . . . 1634
310:256-15-41. . . . . [AMENDED] . . . . . 1634
310:256-15-42. . . . . [AMENDED] . . . . . 1635
310:275-1-1. . . . . [REVOKED] . . . . . 1636
310:275-1-2. . . . . [REVOKED] . . . . . 1636
310:275-3-1. . . . . [REVOKED] . . . . . 1636
310:275-3-2. . . . . [REVOKED] . . . . . 1637
310:275-3-3. . . . . [REVOKED] . . . . . 1637
310:275-3-4. . . . . [REVOKED] . . . . . 1637
310:275-3-5. . . . . [REVOKED] . . . . . 1637
310:276-1-1. . . . . [NEW] (E) . . . . . 511
310:276-1-1. . . . . [NEW] . . . . . 1639
310:276-1-2. . . . . [NEW] (E) . . . . . 511
310:276-1-2. . . . . [NEW] . . . . . 1639
310:276-1-3. . . . . [NEW] (E) . . . . . 513
310:276-1-3. . . . . [NEW] . . . . . 1640
310:276-3-1. . . . . [NEW] (E) . . . . . 515
310:276-3-1. . . . . [NEW] . . . . . 1642
310:276-5-1. . . . . [NEW] (E) . . . . . 515
310:276-5-1. . . . . [NEW] . . . . . 1643
310:276-5-2. . . . . [NEW] (E) . . . . . 515
310:276-5-2. . . . . [NEW] . . . . . 1643
310:276-9-1. . . . . [NEW] (E) . . . . . 516
310:276-9-1. . . . . [NEW] . . . . . 1643
310:276-9-2. . . . . [NEW] (E) . . . . . 516
310:276-9-2. . . . . [NEW] . . . . . 1643
310:276-9-3. . . . . [NEW] (E) . . . . . 516
310:276-9-3. . . . . [NEW] . . . . . 1643
310:276-9-4. . . . . [NEW] (E) . . . . . 516
310:276-9-4. . . . . [NEW] . . . . . 1644
310:276-9-5. . . . . [NEW] (E) . . . . . 516
310:276-9-5. . . . . [NEW] . . . . . 1644
310:276-9-6. . . . . [NEW] (E) . . . . . 517
310:276-9-6. . . . . [NEW] . . . . . 1644
310:276-9-7. . . . . [NEW] (E) . . . . . 517
310:276-9-7. . . . . [NEW] . . . . . 1644
310:276-9-8. . . . . [NEW] (E) . . . . . 517
310:276-9-8. . . . . [NEW] . . . . . 1644
310:276-11-1. . . . . [NEW] (E) . . . . . 517
310:276-11-1. . . . . [NEW] . . . . . 1645
310:276-11-2. . . . . [NEW] (E) . . . . . 517
310:276-11-2. . . . . [NEW] . . . . . 1645
310:285-3-14. . . . . [AMENDED] . . . . . 1182
310:290-1-1. . . . . [REVOKED] . . . . . 1646
310:290-1-2. . . . . [REVOKED] . . . . . 1646
310:290-1-3. . . . . [REVOKED] . . . . . 1647
310:290-1-4. . . . . [REVOKED] . . . . . 1647
310:290-3-1. . . . . [REVOKED] . . . . . 1647
310:290-3-2. . . . . [REVOKED] . . . . . 1647
310:290-3-3. . . . . [REVOKED] . . . . . 1648
310:290-3-4. . . . . [REVOKED] . . . . . 1648
310:290-3-5. . . . . [REVOKED] . . . . . 1649
310:290-3-6. . . . . [REVOKED] . . . . . 1649
310:290-3-7. . . . . [REVOKED] . . . . . 1649
310:290-3-8. . . . . [REVOKED] . . . . . 1650
310:290-5-1. . . . . [REVOKED] . . . . . 1650
310:290-5-2. . . . . [REVOKED] . . . . . 1650
310:290-5-3. . . . . [REVOKED] . . . . . 1651
310:290-5-4. . . . . [REVOKED] . . . . . 1651
310:310-1-1. . . . . [REVOKED] . . . . . 1652
310:310-1-2. . . . . [REVOKED] . . . . . 1652
310:310-3-1. . . . . [REVOKED] . . . . . 1652
310:310-3-2. . . . . [REVOKED] . . . . . 1652
310:310-3-3. . . . . [REVOKED] . . . . . 1653
310:310-3-4. . . . . [REVOKED] . . . . . 1653
310:310-5-1. . . . . [REVOKED] . . . . . 1653
310:310-5-2. . . . . [REVOKED] . . . . . 1653
310:310-5-3. . . . . [REVOKED] . . . . . 1653
310:310-5-4. . . . . [REVOKED] . . . . . 1654
310:310-7-1. . . . . [REVOKED] . . . . . 1654
310:310-7-2. . . . . [REVOKED] . . . . . 1654
310:310-7-3. . . . . [REVOKED] . . . . . 1654
310:310-7-4. . . . . [REVOKED] . . . . . 1655
310:345-1-1. . . . . [AMENDED] . . . . . 1656
310:345-1-1.1. . . . . [AMENDED] . . . . . 1656
310:345-1-2. . . . . [AMENDED] . . . . . 1656
310:345-3-1. . . . . [AMENDED] . . . . . 1656
310:345-3-3. . . . . [AMENDED] . . . . . 1657
310:345-3-4. . . . . [AMENDED] . . . . . 1657

310:345-3-6. . . . . [AMENDED] . . . . . 1657
310:345-5-1. . . . . [AMENDED] . . . . . 1657
310:345-5-2. . . . . [AMENDED] . . . . . 1658
310:345-5-3. . . . . [AMENDED] . . . . . 1658
310:345-7-1. . . . . [AMENDED] . . . . . 1658
310:345-7-2. . . . . [AMENDED] . . . . . 1658
310:400-5-3. . . . . [AMENDED] (E) . . . . . 518
310:400-5-3. . . . . [AMENDED] . . . . . 2362
310:400-17-2.1. . . . . [AMENDED] (E) . . . . . 519
310:400-17-2.1. . . . . [AMENDED] . . . . . 2363
310:403-7-2. . . . . [AMENDED] (E) . . . . . 520
310:403-7-2. . . . . [AMENDED] . . . . . 2364
310:403-15-1. . . . . [AMENDED] (E) . . . . . 521
310:403-15-1. . . . . [AMENDED] . . . . . 2365
310:405-3-2. . . . . [AMENDED] (E) . . . . . 521
310:405-3-2. . . . . [AMENDED] . . . . . 2365
310:515-1-3. . . . . [AMENDED] . . . . . 2366
310:515-1-4. . . . . [AMENDED] . . . . . 2367
310:528-1-1. . . . . [NEW] . . . . . 1659
310:528-1-2. . . . . [NEW] . . . . . 1659
310:528-1-3. . . . . [NEW] . . . . . 1659
310:528-1-4. . . . . [NEW] . . . . . 1659
310:529-1-1. . . . . [NEW] . . . . . 1660
310:529-1-2. . . . . [NEW] . . . . . 1660
310:529-1-3. . . . . [NEW] . . . . . 1660
310:529-3-1. . . . . [NEW] . . . . . 1660
310:529-3-2. . . . . [NEW] . . . . . 1660
310:529-3-3. . . . . [NEW] . . . . . 1660
310:529-3-4. . . . . [NEW] . . . . . 1661
310:529-3-5. . . . . [NEW] . . . . . 1661
310:530-1-5. . . . . [AMENDED] . . . . . 1659
310:535-1-2. . . . . [AMENDED] . . . . . 1662
310:535-1-3. . . . . [AMENDED] . . . . . 1663
310:535-3-1. . . . . [AMENDED] (E) . . . . . 1863
310:535-3-2. . . . . [AMENDED] (E) . . . . . 1863
310:605-1-2. . . . . [AMENDED] . . . . . 1183
310:605-7-2. . . . . [AMENDED] . . . . . 1184
310:605-7-4. . . . . [AMENDED] . . . . . 1184
310:605-7-5. . . . . [AMENDED] . . . . . 1185
310:605-9-1. . . . . [AMENDED] . . . . . 1186
310:605-9-2. . . . . [AMENDED] . . . . . 1187
310:605-11-1. . . . . [AMENDED] . . . . . 1187
310:605-11-2. . . . . [AMENDED] . . . . . 1187
310:605-11-3. . . . . [AMENDED] . . . . . 1187
310:605-11-4. . . . . [AMENDED] . . . . . 1188
310:605-11-5. . . . . [AMENDED] . . . . . 1188
310:605-13-1. . . . . [AMENDED] . . . . . 1188
310:605-13-2. . . . . [AMENDED] . . . . . 1190
310:605-13-3. . . . . [AMENDED] . . . . . 1191
310:605-15-1. . . . . [AMENDED] . . . . . 1191
310:605-15-2. . . . . [AMENDED] . . . . . 1191
310:605-15-3. . . . . [AMENDED] . . . . . 1192
310:605-15-5. . . . . [AMENDED] . . . . . 1192
310:605-15-6. . . . . [AMENDED] . . . . . 1192
310:605-15-7. . . . . [AMENDED] . . . . . 1192
310:605-15-8. . . . . [AMENDED] . . . . . 1193
310:641-3-2. . . . . [AMENDED] . . . . . 2368
310:641-3-15. . . . . [AMENDED] . . . . . 2369
310:641-3-20. . . . . [AMENDED] . . . . . 2370
310:641-3-23. . . . . [AMENDED] . . . . . 2371
310:641-3-31. . . . . [AMENDED] . . . . . 2373
310:641-3-41. . . . . [AMENDED] . . . . . 2373
310:641-3-110. . . . . [AMENDED] . . . . . 2373
310:641-5-14. . . . . [AMENDED] . . . . . 2373
310:641-5-16. . . . . [REVOKED] . . . . . 2375
310:641-7-10. . . . . [AMENDED] . . . . . 2376
310:641-7-11. . . . . [AMENDED] . . . . . 2376
310:641-7-12. . . . . [AMENDED] . . . . . 2376
310:641-7-13. . . . . [AMENDED] . . . . . 2376
310:641-7-14. . . . . [AMENDED] . . . . . 2377
310:641-7-15. . . . . [AMENDED] . . . . . 2377
310:641-7-20. . . . . [AMENDED] . . . . . 2378
310:641-7-21. . . . . [AMENDED] . . . . . 2378
310:655-25-1. . . . . [AMENDED] . . . . . 2379
310:655-25-11. . . . . [REVOKED] . . . . . 2380
310:655-25-12. . . . . [NEW] . . . . . 2380
310:655-29-2. . . . . [AMENDED] . . . . . 2380
310:655-39-1. . . . . [AMENDED] . . . . . 2380
310:655-39-2. . . . . [NEW] . . . . . 2381
310:655-47-6. . . . . [NEW] . . . . . 2381
310:655-47-7. . . . . [NEW] . . . . . 2381
310:655-47-8. . . . . [NEW] . . . . . 2382
310:655-47-9. . . . . [NEW] . . . . . 2382
310:655-47-10. . . . . [NEW] . . . . . 2382
310:655-47-11. . . . . [NEW] . . . . . 2382
310:655-47-12. . . . . [NEW] . . . . . 2383
310:655-53-1. . . . . [NEW] . . . . . 2383
310:655-53-2. . . . . [NEW] . . . . . 2383
310:655-53-3. . . . . [NEW] . . . . . 2383
310:655-53-4. . . . . [NEW] . . . . . 2383
310:655-53-5. . . . . [NEW] . . . . . 2384
310:655-57-1. . . . . [NEW] . . . . . 2384
310:655-57-2. . . . . [NEW] . . . . . 2384
310:655-57-3. . . . . [NEW] . . . . . 2384
310:655-57-4. . . . . [RESERVED] . . . . . 2384
310:655-57-5. . . . . [NEW] . . . . . 2384
310:655-57-6. . . . . [NEW] . . . . . 2384
310:664-3-3. . . . . [AMENDED] . . . . . 2385
310:664-3-6. . . . . [AMENDED] . . . . . 2385
310:664-7-1. . . . . [AMENDED] . . . . . 2385
310:664-7-2. . . . . [AMENDED] . . . . . 2386
310:664-9-2. . . . . [AMENDED] . . . . . 2386
310:664-9-3. . . . . [AMENDED] . . . . . 2386
310:664-9-4. . . . . [AMENDED] . . . . . 2386
310:664-11-1. . . . . [AMENDED] . . . . . 2386
310:664-11-2. . . . . [AMENDED] . . . . . 2387
310:664-13-4. . . . . [AMENDED] . . . . . 2387
310:665-17-4. . . . . [AMENDED] . . . . . 1664
310:665-17-5. . . . . [AMENDED] . . . . . 1664
310:667-1-2. . . . . [AMENDED] . . . . . 1664
310:667-3-1. . . . . [AMENDED] . . . . . 1664
310:667-3-3. . . . . [AMENDED] . . . . . 1664
310:667-3-5. . . . . [AMENDED] . . . . . 1664
310:667-3-6. . . . . [AMENDED] . . . . . 1664
310:667-5-1. . . . . [AMENDED] . . . . . 1664
310:667-5-2. . . . . [AMENDED] . . . . . 1664
310:667-5-4. . . . . [AMENDED] . . . . . 1664
310:667-5-5. . . . . [NEW] . . . . . 1664
310:667-7-1. . . . . [AMENDED] . . . . . 1664
310:667-7-4. . . . . [AMENDED] . . . . . 1664
310:667-7-6. . . . . [AMENDED] . . . . . 1664
310:667-9-2. . . . . [AMENDED] . . . . . 1664
310:667-9-3. . . . . [AMENDED] . . . . . 1664
310:667-9-4. . . . . [AMENDED] . . . . . 1664
310:667-9-6. . . . . [AMENDED] . . . . . 1664
310:667-9-7. . . . . [AMENDED] . . . . . 1664
310:667-9-8. . . . . [AMENDED] . . . . . 1664
310:667-9-9. . . . . [AMENDED] . . . . . 1664
310:667-9-13. . . . . [AMENDED] . . . . . 1664
310:667-9-15. . . . . [AMENDED] . . . . . 1664
310:667-9-16. . . . . [AMENDED] . . . . . 1664
310:667-9-17. . . . . [AMENDED] . . . . . 1664
310:667-11-2. . . . . [AMENDED] . . . . . 1664
310:667-13-1. . . . . [AMENDED] . . . . . 1664

310:667-13-2. . . . . [AMENDED] . . . . . 1664
310:667-13-3. . . . . [AMENDED] . . . . . 1664
310:667-13-4. . . . . [AMENDED] . . . . . 1664
310:667-15-6. . . . . [AMENDED] . . . . . 1664
310:667-15-8. . . . . [AMENDED] . . . . . 1664
310:667-15-9. . . . . [AMENDED] . . . . . 1664
310:667-17-1. . . . . [AMENDED] . . . . . 1664
310:667-17-3. . . . . [AMENDED] . . . . . 1664
310:667-19-1. . . . . [AMENDED] . . . . . 1664
310:667-19-2. . . . . [AMENDED] . . . . . 1664
310:667-19-3. . . . . [AMENDED] . . . . . 1664
310:667-19-5. . . . . [AMENDED] . . . . . 1664
310:667-19-6. . . . . [AMENDED] . . . . . 1664
310:667-19-7. . . . . [AMENDED] . . . . . 1664
310:667-19-8. . . . . [AMENDED] . . . . . 1664
310:667-19-9. . . . . [AMENDED] . . . . . 1664
310:667-19-10. . . . . [AMENDED] . . . . . 1664
310:667-19-11. . . . . [AMENDED] . . . . . 1664
310:667-19-12. . . . . [AMENDED] . . . . . 1664
310:667-19-13. . . . . [AMENDED] . . . . . 1664
310:667-19-14. . . . . [AMENDED] . . . . . 1664
310:667-21-2. . . . . [AMENDED] . . . . . 1664
310:667-21-6. . . . . [AMENDED] . . . . . 1664
310:667-21-8. . . . . [AMENDED] . . . . . 1664
310:667-23-1. . . . . [AMENDED] . . . . . 1664
310:667-23-2. . . . . [AMENDED] . . . . . 1664
310:667-23-3. . . . . [AMENDED] . . . . . 1664
310:667-23-5. . . . . [AMENDED] . . . . . 1664
310:667-23-6. . . . . [AMENDED] . . . . . 1664
310:667-23-7. . . . . [NEW] . . . . . 1664
310:667-25-1. . . . . [AMENDED] . . . . . 1664
310:667-25-2. . . . . [AMENDED] . . . . . 1664
310:667-27-1. . . . . [AMENDED] . . . . . 1664
310:667-29-1. . . . . [AMENDED] . . . . . 1664
310:667-29-2. . . . . [AMENDED] . . . . . 1664
310:667-33-2. . . . . [AMENDED] . . . . . 1664
310:667-35-2. . . . . [AMENDED] . . . . . 1664
310:667-35-3. . . . . [AMENDED] . . . . . 1664
310:667-39-2. . . . . [AMENDED] . . . . . 1664
310:667-39-4. . . . . [AMENDED] . . . . . 1664
310:667-39-5. . . . . [AMENDED] . . . . . 1664
310:667-39-6. . . . . [AMENDED] . . . . . 1664
310:667-39-7. . . . . [AMENDED] . . . . . 1664
310:667-39-8. . . . . [AMENDED] . . . . . 1664
310:667-39-9. . . . . [AMENDED] . . . . . 1664
310:667-39-10. . . . . [AMENDED] . . . . . 1664
310:667-39-11. . . . . [AMENDED] . . . . . 1664
310:667-39-12. . . . . [AMENDED] . . . . . 1664
310:667-39-13. . . . . [AMENDED] . . . . . 1664
310:667-39-14. . . . . [AMENDED] . . . . . 1664
310:667-40-1. . . . . [NEW] . . . . . 1664
310:667-40-2. . . . . [NEW] . . . . . 1664
310:667-40-3. . . . . [NEW] . . . . . 1664
310:667-40-4. . . . . [NEW] . . . . . 1664
310:667-40-5. . . . . [NEW] . . . . . 1664
310:667-40-6. . . . . [NEW] . . . . . 1664
310:667-40-7. . . . . [NEW] . . . . . 1664
310:667-40-8. . . . . [NEW] . . . . . 1664
310:667-40-9. . . . . [NEW] . . . . . 1664
310:667-40-10. . . . . [NEW] . . . . . 1664
310:667-40-11. . . . . [NEW] . . . . . 1664
310:667-40-12. . . . . [NEW] . . . . . 1664
310:667-40-13. . . . . [NEW] . . . . . 1664
310:667-40-14. . . . . [NEW] . . . . . 1664
310:667-40-15. . . . . [NEW] . . . . . 1664
310:667-40-16. . . . . [NEW] . . . . . 1664
310:667-41-1. . . . . [AMENDED] . . . . . 1664
310:667-41-2. . . . . [AMENDED] . . . . . 1664
310:667-41-3. . . . . [AMENDED] . . . . . 1664
310:667-41-4. . . . . [AMENDED] . . . . . 1664
310:667-41-5. . . . . [AMENDED] . . . . . 1664
310:667-43-1. . . . . [AMENDED] . . . . . 1664
310:667-45-2. . . . . [AMENDED] . . . . . 1664
310:667-47-6. . . . . [AMENDED] . . . . . 1664
310:667-47-9. . . . . [NEW] . . . . . 1664
310:667-49-2. . . . . [AMENDED] . . . . . 1664
310:667-49-3. . . . . [AMENDED] . . . . . 1664
310:667-49-4. . . . . [AMENDED] . . . . . 1664
310:667-49-5. . . . . [AMENDED] . . . . . 1664
310:667-49-6. . . . . [AMENDED] . . . . . 1664
310:667-49-7. . . . . [AMENDED] . . . . . 1664
310:667-49-8. . . . . [AMENDED] . . . . . 1664
310:667-49-9. . . . . [AMENDED] . . . . . 1664
310:667-49-10. . . . . [AMENDED] . . . . . 1664
310:667-49-11. . . . . [AMENDED] . . . . . 1664
310:667-49-12. . . . . [AMENDED] . . . . . 1664
310:667-49-13. . . . . [AMENDED] . . . . . 1664
310:667-49-17. . . . . [AMENDED] . . . . . 1664
310:667-49-28. . . . . [AMENDED] . . . . . 1664
310:667-49-30. . . . . [AMENDED] . . . . . 1664
310:667-49-32. . . . . [AMENDED] . . . . . 1664
310:667-49-33. . . . . [AMENDED] . . . . . 1664
310:667-49-34. . . . . [AMENDED] . . . . . 1664
310:667-49-36. . . . . [NEW] . . . . . 1664
310:667-51-1. . . . . [AMENDED] . . . . . 1664
310:667-51-2. . . . . [AMENDED] . . . . . 1664
310:667-51-5. . . . . [AMENDED] . . . . . 1664
310:667-51-7. . . . . [AMENDED] . . . . . 1664
310:667-51-9. . . . . [AMENDED] . . . . . 1664
310:667-51-10. . . . . [AMENDED] . . . . . 1664
310:667-51-12. . . . . [AMENDED] . . . . . 1664
310:667-51-15. . . . . [AMENDED] . . . . . 1664
310:667-51-17. . . . . [AMENDED] . . . . . 1664
310:667-51-21. . . . . [AMENDED] . . . . . 1664
310:667-51-23. . . . . [AMENDED] . . . . . 1664
310:667-51-24. . . . . [AMENDED] . . . . . 1664
310:667-51-26. . . . . [AMENDED] . . . . . 1664
310:667-53-1. . . . . [AMENDED] . . . . . 1664
310:667-53-2. . . . . [AMENDED] . . . . . 1664
310:667-53-3. . . . . [AMENDED] . . . . . 1664
310:667-53-9. . . . . [AMENDED] . . . . . 1664
310:667-53-24. . . . . [AMENDED] . . . . . 1664
310:667-56-1. . . . . [NEW] . . . . . 1664
310:667-56-2. . . . . [NEW] . . . . . 1664
310:667-59-3. . . . . [AMENDED] . . . . . 1664
310:667-59-9. . . . . [AMENDED] . . . . . 1664
310:667-59-11. . . . . [AMENDED] . . . . . 1664
310:667-59-13. . . . . [AMENDED] . . . . . 1664
310:667-59-15. . . . . [AMENDED] . . . . . 1664
310:667-59-17. . . . . [AMENDED] . . . . . 1664
310:667-59-19. . . . . [AMENDED] . . . . . 1664
310:667-59-21. . . . . [AMENDED] . . . . . 1664
310:667-59-23. . . . . [AMENDED] . . . . . 1664
310:667-59-25. . . . . [AMENDED] . . . . . 1664
310:667, App. A. . . . . [REVOKED] . . . . . 1664
310:667, App. A. . . . . [NEW] . . . . . 1664
310:667, App. B. . . . . [REVOKED] . . . . . 1664
310:667, App. B. . . . . [NEW] . . . . . 1664
310:667, App. C. . . . . [REVOKED] . . . . . 1664
310:667, App. C. . . . . [NEW] . . . . . 1664
310:667, App. D. . . . . [REVOKED] . . . . . 1664
310:667, App. D. . . . . [NEW] . . . . . 1664
310:667, App. E. . . . . [REVOKED] . . . . . 1664
310:667, App. E. . . . . [NEW] . . . . . 1664

310:669-5-1. . . . . [AMENDED] . . . . . 1666
310:670-1-2. . . . . [AMENDED] . . . . . 2388
310:670-1-3. . . . . [AMENDED] . . . . . 2388
310:670-3-1. . . . . [AMENDED] . . . . . 2388
310:670-5-1. . . . . [AMENDED] . . . . . 2389
310:670-5-2. . . . . [AMENDED] . . . . . 2390
310:670-5-3. . . . . [AMENDED] . . . . . 2392
310:670-5-4. . . . . [AMENDED] . . . . . 2393
310:670-5-5. . . . . [AMENDED] . . . . . 2393
310:670-5-6. . . . . [AMENDED] . . . . . 2394
310:670-5-7. . . . . [AMENDED] . . . . . 2395
310:670-5-8. . . . . [AMENDED] . . . . . 2395
310:670-5-9. . . . . [AMENDED] . . . . . 2396
310:670-5-10. . . . . [AMENDED] . . . . . 2397
310:670-5-11. . . . . [AMENDED] . . . . . 2397
310:670-7-1. . . . . [AMENDED] . . . . . 2399
310:675-1-2. . . . . [AMENDED] . . . . . 2400
310:675-1-5. . . . . [NEW] . . . . . 2402
310:675-3-2.1. . . . . [AMENDED] . . . . . 2403
310:675-3-3.1. . . . . [AMENDED] . . . . . 2403
310:675-3-4.1. . . . . [AMENDED] . . . . . 2403
310:675-3-5. . . . . [AMENDED] . . . . . 2403
310:675-3-5.1. . . . . [AMENDED] . . . . . 2403
310:675-3-8. . . . . [NEW] . . . . . 2404
310:675-7-4. . . . . [AMENDED] . . . . . 2404
310:675-7-5.1. . . . . [AMENDED] . . . . . 2405
310:675-7-6.1. . . . . [AMENDED] . . . . . 2405
310:675-7-16.1. . . . . [AMENDED] . . . . . 2407
310:675-7-20. . . . . [NEW] . . . . . 2407
310:675-9-4.1. . . . . [AMENDED] . . . . . 2407
310:675-9-5.1. . . . . [AMENDED] . . . . . 2407
310:675-13-12. . . . . [AMENDED] . . . . . 2408
310:675-15-3. . . . . [AMENDED] . . . . . 2409
310:675-15-8. . . . . [AMENDED] . . . . . 2409
310:675-15-11. . . . . [AMENDED] . . . . . 2410
310:675-15-12. . . . . [AMENDED] . . . . . 2410
310:675-15-15. . . . . [AMENDED] . . . . . 2410
310:675-15-16. . . . . [AMENDED] . . . . . 2410
310:675-15-17. . . . . [NEW] . . . . . 2410
310:675-17-3. . . . . [NEW] . . . . . 2410
317:2-1-2. . . . . [AMENDED] . . . . . 1919
317:2-1-2.2. . . . . [AMENDED] (E) . . . . . 2756
317:2-1-2.3. . . . . [AMENDED] (E) . . . . . 2756
317:2-1-4. . . . . [AMENDED] (E) . . . . . 2759
317:25-5-13. . . . . [AMENDED] (E) . . . . . 2760
317:25-7-13. . . . . [AMENDED] (E) . . . . . 2760
317:30-3-3.1. . . . . [AMENDED] . . . . . 1195
317:30-3-5. . . . . [AMENDED] (E) . . . . . 374
317:30-3-5. . . . . [AMENDED] . . . . . 1921
317:30-3-14. . . . . [AMENDED] (E) . . . . . 2761
317:30-3-25. . . . . [AMENDED] . . . . . 1196
317:30-3-58. . . . . [REVOKED] (E) . . . . . 2762
317:30-3-59. . . . . [AMENDED] . . . . . 1924
317:30-3-70. . . . . [AMENDED] (E) . . . . . 2762
317:30-3-71. . . . . [AMENDED] (E) . . . . . 2763
317:30-3-72. . . . . [REVOKED] (E) . . . . . 2763
317:30-3-78. . . . . [AMENDED] . . . . . 1925
317:30-3-82. . . . . [AMENDED] . . . . . 1925
317:30-3-84. . . . . [REVOKED] (E) . . . . . 2763
317:30-5-2. . . . . [AMENDED] . . . . . 1196
317:30-5-7. . . . . [AMENDED] . . . . . 1925
317:30-5-14. . . . . [AMENDED] . . . . . 1932
317:30-5-41. . . . . [AMENDED] (E) . . . . . 2763
317:30-5-44. . . . . [AMENDED] . . . . . 1201
317:30-5-47. . . . . [AMENDED] . . . . . 1933
317:30-5-47.1. . . . . [NEW] (E) . . . . . 1864
317:30-5-65. . . . . [AMENDED] . . . . . 1926
317:30-5-70.2. . . . . [AMENDED] . . . . . 1201
317:30-5-70.3. . . . . [AMENDED] . . . . . 1202
317:30-5-72. . . . . [AMENDED] . . . . . 1202
317:30-5-72. . . . . [AMENDED] (E) . . . . . 2766
317:30-5-72.1. . . . . [AMENDED] . . . . . 1202
317:30-5-72.1. . . . . [AMENDED] (E) . . . . . 2772
317:30-5-77. . . . . [AMENDED] (E) . . . . . 2775
317:30-5-77.2. . . . . [AMENDED] . . . . . 1203
317:30-5-77.2. . . . . [AMENDED] (E) . . . . . 2773
317:30-5-78.1. . . . . [AMENDED] . . . . . 1204
317:30-5-78.1. . . . . [AMENDED] . . . . . 1942
317:30-5-78.2. . . . . [AMENDED] . . . . . 1205
317:30-5-80. . . . . [AMENDED] . . . . . 1205
317:30-5-86. . . . . [AMENDED] . . . . . 1205
317:30-5-95.3. . . . . [AMENDED] . . . . . 1205
317:30-5-96. . . . . [AMENDED] . . . . . 1205
317:30-5-104. . . . . [AMENDED] . . . . . 1208
317:30-5-122. . . . . [AMENDED] . . . . . 1208
317:30-5-131.2. . . . . [AMENDED] (E) . . . . . 160
317:30-5-131.2. . . . . [AMENDED] . . . . . 1218
317:30-5-131.2. . . . . [AMENDED] . . . . . 1928
317:30-5-214. . . . . [AMENDED] . . . . . 1208
317:30-5-226. . . . . [AMENDED] . . . . . 1208
317:30-5-241. . . . . [AMENDED] (E) . . . . . 2768
317:30-5-261. . . . . [AMENDED] . . . . . 1209
317:30-5-276. . . . . [AMENDED] . . . . . 1209
317:30-5-291. . . . . [AMENDED] . . . . . 1210
317:30-5-306. . . . . [AMENDED] . . . . . 1210
317:30-5-339. . . . . [AMENDED] . . . . . 1210
317:30-5-359. . . . . [AMENDED] . . . . . 1210
317:30-5-376. . . . . [AMENDED] . . . . . 1210
317:30-5-412. . . . . [AMENDED] (E) . . . . . 164
317:30-5-412. . . . . [AMENDED] . . . . . 1220
317:30-5-431. . . . . [AMENDED] . . . . . 1211
317:30-5-451. . . . . [AMENDED] . . . . . 1211
317:30-5-466. . . . . [AMENDED] . . . . . 1211
317:30-5-546. . . . . [AMENDED] . . . . . 1212
317:30-5-547. . . . . [AMENDED] (E) . . . . . 376
317:30-5-547. . . . . [AMENDED] . . . . . 1923
317:30-5-567. . . . . [AMENDED] . . . . . 1213
317:30-5-606. . . . . [AMENDED] . . . . . 1213
317:30-5-607. . . . . [AMENDED] . . . . . 1926
317:30-5-661. . . . . [AMENDED] . . . . . 1213
317:30-5-696. . . . . [AMENDED] . . . . . 1214
317:30-5-696. . . . . [AMENDED] . . . . . 1926
317:30-5-700.1. . . . . [AMENDED] (E) . . . . . 522
317:30-5-700.1. . . . . [AMENDED] . . . . . 1222
317:30-5-721. . . . . [AMENDED] . . . . . 1215
317:30-5-740. . . . . [AMENDED] (E) . . . . . 524
317:30-5-740. . . . . [AMENDED] . . . . . 1223
317:30-5-740.1. . . . . [AMENDED] (E) . . . . . 525
317:30-5-740.1. . . . . [AMENDED] . . . . . 1224
317:30-5-741. . . . . [AMENDED] (E) . . . . . 525
317:30-5-741. . . . . [AMENDED] . . . . . 1224
317:30-5-742. . . . . [AMENDED] (E) . . . . . 526
317:30-5-742. . . . . [AMENDED] . . . . . 1225
317:30-5-742.1. . . . . [AMENDED] (E) . . . . . 526
317:30-5-742.1. . . . . [AMENDED] . . . . . 1225
317:30-5-742.2. . . . . [AMENDED] (E) . . . . . 526
317:30-5-742.2. . . . . [AMENDED] . . . . . 1225
317:30-5-745. . . . . [AMENDED] (E) . . . . . 528
317:30-5-745. . . . . [AMENDED] . . . . . 1227
317:30-5-764. . . . . [AMENDED] (E) . . . . . 645
317:30-5-764. . . . . [AMENDED] . . . . . 1923
317:30-5-903. . . . . [AMENDED] . . . . . 1216
317:30-5-951. . . . . [AMENDED] . . . . . 1943
317:30-5-952. . . . . [AMENDED] . . . . . 1943

317:30-5-953. . . . . [AMENDED] . . . . . 1943
317:30-5-1076. . . . . [AMENDED] . . . . . 1216
317:35-1-2. . . . . [AMENDED] (E) . . . . . 2776
317:35-3-1. . . . . [AMENDED] (E) . . . . . 646
317:35-3-1. . . . . [AMENDED] . . . . . 1944
317:35-3-1. . . . . [AMENDED] (E) . . . . . 2778
317:35-3-2. . . . . [AMENDED] (E) . . . . . 2778
317:35-5-1. . . . . [AMENDED] (E) . . . . . 2784
317:35-5-25. . . . . [AMENDED] (E) . . . . . 2794
317:35-5-46. . . . . [AMENDED] (E) . . . . . 2784
317:35-6-36. . . . . [AMENDED] (E) . . . . . 2784
317:35-6-60. . . . . [AMENDED] (E) . . . . . 647
317:35-6-60. . . . . [AMENDED] . . . . . 1944
317:35-6-60. . . . . [AMENDED] (E) . . . . . 2784
317:35-6-63. . . . . [AMENDED] (E) . . . . . 2785
317:35-7-1. . . . . [AMENDED] (E) . . . . . 2786
317:35-7-37. . . . . [AMENDED] (E) . . . . . 2786
317:35-7-39. . . . . [REVOKED] (E) . . . . . 2786
317:35-7-41. . . . . [AMENDED] (E) . . . . . 2787
317:35-7-45. . . . . [REVOKED] (E) . . . . . 2787
317:35-7-60. . . . . [AMENDED] (E) . . . . . 648
317:35-7-60. . . . . [AMENDED] . . . . . 1946
317:35-7-60. . . . . [AMENDED] (E) . . . . . 2788
317:35-7-62. . . . . [AMENDED] (E) . . . . . 2797
317:35-7-64. . . . . [AMENDED] (E) . . . . . 2791
317:35-9-1. . . . . [AMENDED] (E) . . . . . 2791
317:35-10-26. . . . . [AMENDED] (E) . . . . . 2791
317:35-10-29. . . . . [AMENDED] (E) . . . . . 2792
317:35-10-31. . . . . [AMENDED] (E) . . . . . 2792
317:35-13-6. . . . . [AMENDED] (E) . . . . . 2798
317:35-13-7. . . . . [NEW] (E) . . . . . 2798
317:35-15-1. . . . . [AMENDED] . . . . . 1959
317:35-15-1. . . . . [AMENDED] (E) . . . . . 2793
317:35-15-2. . . . . [AMENDED] . . . . . 1959
317:35-15-3. . . . . [AMENDED] . . . . . 1959
317:35-15-4. . . . . [AMENDED] (E) . . . . . 1063
317:35-15-6. . . . . [AMENDED] . . . . . 1960
317:35-15-6. . . . . [AMENDED] (E) . . . . . 2793
317:35-15-8. . . . . [AMENDED] (E) . . . . . 1070
317:35-15-8. . . . . [AMENDED] . . . . . 1950
317:35-15-8.1. . . . . [NEW] (E) . . . . . 1071
317:35-15-8.1. . . . . [NEW] . . . . . 1951
317:35-15-10. . . . . [AMENDED] . . . . . 1960
317:35-15-13. . . . . [REVOKED] (E) . . . . . 1072
317:35-15-13. . . . . [REVOKED] . . . . . 1952
317:35-15-13.1. . . . . [NEW] (E) . . . . . 1075
317:35-15-13.1. . . . . [NEW] . . . . . 1955
317:35-15-13.2. . . . . [NEW] (E) . . . . . 1076
317:35-15-13.2. . . . . [NEW] . . . . . 1956
317:35-15-14. . . . . [AMENDED] . . . . . 1961
317:35-15-15. . . . . [AMENDED] . . . . . 1962
317:35-17-1. . . . . [AMENDED] (E) . . . . . 377
317:35-17-1. . . . . [AMENDED] . . . . . 1980
317:35-17-2. . . . . [AMENDED] (E) . . . . . 1065
317:35-17-3. . . . . [AMENDED] . . . . . 1962
317:35-17-4. . . . . [AMENDED] . . . . . 1963
317:35-17-5. . . . . [AMENDED] . . . . . 1964
317:35-17-10. . . . . [AMENDED] . . . . . 1966
317:35-17-14. . . . . [AMENDED] . . . . . 1968
317:35-17-16. . . . . [AMENDED] . . . . . 1970
317:35-17-17. . . . . [AMENDED] . . . . . 1970
317:35-17-18. . . . . [AMENDED] . . . . . 1971
317:35-17-19. . . . . [AMENDED] . . . . . 1971
317:35-17-22. . . . . [AMENDED] (E) . . . . . 653
317:35-17-22. . . . . [AMENDED] . . . . . 1980
317:35-17-24. . . . . [AMENDED] . . . . . 1972
317:35-19-2. . . . . [AMENDED] . . . . . 1972
317:35-19-7.1. . . . . [AMENDED] (E) . . . . . 1068
317:35-19-18. . . . . [AMENDED] . . . . . 1973
317:35-19-19. . . . . [AMENDED] . . . . . 1973
317:35-19-20. . . . . [AMENDED] . . . . . 1974
317:35-19-21. . . . . [AMENDED] . . . . . 1976
317:35-19-22. . . . . [AMENDED] . . . . . 1979
317:40-5-103. . . . . [NEW] (E) . . . . . 166
317:40-5-103. . . . . [NEW] . . . . . 1228
317:40-5-152. . . . . [NEW] (E) . . . . . 1865
318:10-1-3. . . . . [AMENDED] . . . . . 836
318:10-1-4. . . . . [AMENDED] . . . . . 836
318:10-1-6. . . . . [AMENDED] . . . . . 836
318:10-1-7. . . . . [AMENDED] . . . . . 837
318:10-1-8. . . . . [AMENDED] . . . . . 837
318:10-1-10. . . . . [AMENDED] . . . . . 837
318:10-1-11. . . . . [AMENDED] . . . . . 837
325:25-1-19. . . . . [AMENDED] . . . . . 1230
325:35-1-5. . . . . [AMENDED] . . . . . 1231
325:45-1-2. . . . . [AMENDED] . . . . . 1232
325:45-1-4. . . . . [AMENDED] . . . . . 1233
325:45-1-5. . . . . [AMENDED] . . . . . 1233
325:45-1-6. . . . . [AMENDED] . . . . . 1233
325:45-1-7. . . . . [AMENDED] . . . . . 1233
325:45-1-8. . . . . [AMENDED] . . . . . 1233
325:45-1-9. . . . . [AMENDED] . . . . . 1233
325:45-1-10. . . . . [AMENDED] . . . . . 1234
325:45-1-11. . . . . [AMENDED] . . . . . 1234
325:45-1-12. . . . . [AMENDED] . . . . . 1234
325:45-1-15. . . . . [AMENDED] . . . . . 1234
325:75-1-3. . . . . [AMENDED] . . . . . 1235
325:75-1-3. . . . . [AMENDED] . . . . . 1238
325:75-1-12. . . . . [AMENDED] . . . . . 1240
330:30-2-1. . . . . [AMENDED] . . . . . 2412
330:30-2-2. . . . . [AMENDED] . . . . . 2412
330:30-2-3. . . . . [REVOKED] . . . . . 2416
330:30-2-3.1. . . . . [NEW] . . . . . 2416
330:30-2-4. . . . . [REVOKED] . . . . . 2417
330:30-2-4.1. . . . . [NEW] . . . . . 2419
330:30-2-5. . . . . [REVOKED] . . . . . 2419
330:30-2-5.1. . . . . [NEW] . . . . . 2420
330:30-2-6. . . . . [REVOKED] . . . . . 2420
330:30-2-6.1. . . . . [NEW] . . . . . 2420
330:30-2-7. . . . . [REVOKED] . . . . . 2421
330:30-2-7.1. . . . . [NEW] . . . . . 2422
330:30-2-8. . . . . [REVOKED] . . . . . 2422
330:30-2-8.1. . . . . [NEW] . . . . . 2422
330:30-2-9. . . . . [REVOKED] . . . . . 2423
330:30-2-9.1. . . . . [NEW] . . . . . 2423
330:30-2-10. . . . . [NEW] . . . . . 2423
330:30-2-11. . . . . [NEW] . . . . . 2424
330:30-4-1. . . . . [REVOKED] . . . . . 2424
330:30-4-1.1. . . . . [NEW] . . . . . 2424
330:30-4-2. . . . . [REVOKED] . . . . . 2424
330:30-4-2.1. . . . . [NEW] . . . . . 2425
330:30-4-3. . . . . [REVOKED] . . . . . 2426
330:30-4-3.1. . . . . [NEW] . . . . . 2427
330:30-4-4. . . . . [REVOKED] . . . . . 2427
330:30-4-4.1. . . . . [NEW] . . . . . 2428
330:30-4-5. . . . . [REVOKED] . . . . . 2430
330:30-4-6. . . . . [REVOKED] . . . . . 2430
330:30-6-1. . . . . [REVOKED] . . . . . 2431
330:30-6-2. . . . . [REVOKED] . . . . . 2431
330:30-6-3. . . . . [REVOKED] . . . . . 2433
330:30-6-4. . . . . [REVOKED] . . . . . 2434
330:30-6-5. . . . . [REVOKED] . . . . . 2434
330:30-8-1. . . . . [AMENDED] . . . . . 2434
330:30-8-2. . . . . [AMENDED] . . . . . 2434

330:30-8-3. . . . . [AMENDED] . . . . . 2435
330:30-8-4. . . . . [AMENDED] . . . . . 2435
330:30-8-5. . . . . [AMENDED] . . . . . 2435
330:30-8-6. . . . . [AMENDED] . . . . . 2435
330:30-8-7. . . . . [AMENDED] . . . . . 2435
330:30-10-1. . . . . [REVOKED] . . . . . 2436
330:30-10-2. . . . . [REVOKED] . . . . . 2436
330:30-10-3. . . . . [REVOKED] . . . . . 2437
330:30-12-1. . . . . [REVOKED] . . . . . 2437
330:30-12-2. . . . . [AMENDED] . . . . . 2437
330:30-12-3. . . . . [AMENDED] . . . . . 2438
330:30-14-1. . . . . [AMENDED] . . . . . 2438
330:36-1-4. . . . . [AMENDED] . . . . . 2439
330:36-1-9. . . . . [AMENDED] . . . . . 2441
330:36-1-11. . . . . [AMENDED] . . . . . 2441
330:36-2-1. . . . . [AMENDED] . . . . . 2442
330:36-2-2. . . . . [AMENDED] . . . . . 2442
330:36-2-12. . . . . [RESERVED] . . . . . 2442
330:36-2-13. . . . . [NEW] . . . . . 2442
330:36-2-14. . . . . [RESERVED] . . . . . 2443
330:36-2-15. . . . . [NEW] . . . . . 2443
330:36-4-2. . . . . [AMENDED] . . . . . 2443
330:36-4-2.1. . . . . [AMENDED] . . . . . 2446
330:36-4-3. . . . . [AMENDED] . . . . . 2448
330:36-6-1. . . . . [AMENDED] . . . . . 2449
330:36-6-5. . . . . [AMENDED] . . . . . 2450
330:36-6-7. . . . . [AMENDED] . . . . . 2450
340:1-1-17. . . . . [AMENDED] . . . . . 838
340:1-1-18. . . . . [AMENDED] . . . . . 839
340:2-1-1. . . . . [AMENDED] . . . . . 1982
340:2-1-2. . . . . [AMENDED] . . . . . 1982
340:2-1-3. . . . . [AMENDED] . . . . . 1982
340:2-1-5. . . . . [AMENDED] . . . . . 1982
340:2-1-6. . . . . [AMENDED] . . . . . 1983
340:2-1-25. . . . . [AMENDED] . . . . . 1983
340:2-1-26. . . . . [AMENDED] . . . . . 1984
340:2-1-27. . . . . [AMENDED] . . . . . 1984
340:2-1-28. . . . . [AMENDED] . . . . . 1985
340:2-1-29. . . . . [AMENDED] . . . . . 1986
340:2-1-31. . . . . [AMENDED] . . . . . 1987
340:2-1-32. . . . . [AMENDED] . . . . . 1988
340:2-1-34. . . . . [AMENDED] . . . . . 1988
340:2-1-55. . . . . [AMENDED] . . . . . 1988
340:2-1-56. . . . . [AMENDED] . . . . . 1989
340:2-1-57. . . . . [AMENDED] (E) . . . . . 738
340:2-1-57. . . . . [AMENDED] . . . . . 1989
340:2-1-58. . . . . [AMENDED] . . . . . 1989
340:2-1-75. . . . . [AMENDED] . . . . . 1990
340:2-1-76. . . . . [AMENDED] . . . . . 1990
340:2-1-77. . . . . [AMENDED] . . . . . 1991
340:2-1-78. . . . . [AMENDED] . . . . . 1991
340:2-1-79. . . . . [AMENDED] . . . . . 1991
340:2-1-80. . . . . [AMENDED] . . . . . 1992
340:2-1-81. . . . . [AMENDED] . . . . . 1992
340:2-1-82. . . . . [AMENDED] . . . . . 1992
340:2-1-83. . . . . [AMENDED] . . . . . 1992
340:2-1-84. . . . . [AMENDED] . . . . . 1993
340:2-1-85. . . . . [AMENDED] . . . . . 1993
340:2-1-86. . . . . [AMENDED] . . . . . 1993
340:2-1-88. . . . . [AMENDED] . . . . . 1993
340:2-1-89. . . . . [AMENDED] . . . . . 1993
340:2-3-1. . . . . [AMENDED] . . . . . 1995
340:2-3-2. . . . . [AMENDED] . . . . . 1995
340:2-3-12. . . . . [AMENDED] . . . . . 1999
340:2-3-32. . . . . [AMENDED] . . . . . 2000
340:2-3-33. . . . . [AMENDED] . . . . . 2002
340:2-3-34. . . . . [AMENDED] . . . . . 2003
340:2-3-35. . . . . [AMENDED] . . . . . 2004
340:2-3-36. . . . . [AMENDED] . . . . . 2005
340:2-3-37. . . . . [AMENDED] . . . . . 2009
340:2-3-38. . . . . [AMENDED] . . . . . 2010
340:2-3-45. . . . . [AMENDED] . . . . . 2013
340:2-3-46. . . . . [AMENDED] . . . . . 2019
340:2-3-50. . . . . [AMENDED] . . . . . 2020
340:2-3-51. . . . . [AMENDED] . . . . . 2020
340:2-3-52. . . . . [AMENDED] . . . . . 2021
340:2-3-53. . . . . [AMENDED] . . . . . 2023
340:2-3-55. . . . . [AMENDED] . . . . . 2023
340:2-3-61. . . . . [AMENDED] . . . . . 2024
340:2-3-63. . . . . [AMENDED] . . . . . 2025
340:2-3-64. . . . . [AMENDED] . . . . . 2025
340:2-3-71. . . . . [AMENDED] . . . . . 2026
340:2-3-72. . . . . [AMENDED] . . . . . 2029
340:2-3-73. . . . . [AMENDED] . . . . . 2030
340:2-3-74. . . . . [AMENDED] . . . . . 2031
340:2-3-75. . . . . [AMENDED] . . . . . 2033
340:2-28-1. . . . . [AMENDED] . . . . . 2034
340:2-28-2. . . . . [AMENDED] . . . . . 2034
340:2-28-3. . . . . [AMENDED] . . . . . 2036
340:2-28-4. . . . . [AMENDED] . . . . . 2036
340:2-28-4.1. . . . . [NEW] . . . . . 2036
340:2-28-4.2. . . . . [NEW] . . . . . 2036
340:2-28-4.3. . . . . [NEW] . . . . . 2036
340:2-28-5. . . . . [REVOKED] . . . . . 2036
340:2-28-6. . . . . [REVOKED] . . . . . 2036
340:2-28-7. . . . . [REVOKED] . . . . . 2037
340:2-28-8. . . . . [AMENDED] . . . . . 2037
340:2-28-9. . . . . [AMENDED] . . . . . 2037
340:2-28-10. . . . . [REVOKED] . . . . . 2038
340:2-28-11. . . . . [AMENDED] . . . . . 2038
340:2-28-12. . . . . [AMENDED] . . . . . 2039
340:2-28-13. . . . . [AMENDED AND RENUMBERED TO 340:2-28-4.1 ] . . . . . 2039
340:2-28-14. . . . . [AMENDED AND RENUMBERED TO 340:2-28-4.2] . . . . . 2039
340:2-28-15. . . . . [AMENDED AND RENUMBERED TO 340:2-28-4.3] . . . . . 2039
340:2-28-16. . . . . [REVOKED] . . . . . 2039
340:2-28-16.1. . . . . [NEW] . . . . . 2040
340:2-28-16.2. . . . . [NEW] . . . . . 2040
340:2-28-17. . . . . [REVOKED] . . . . . 2040
340:2-28-17.1. . . . . [NEW] . . . . . 2040
340:2-28-17.2. . . . . [NEW] . . . . . 2040
340:2-28-18. . . . . [AMENDED] . . . . . 2041
340:2-28-19. . . . . [AMENDED] . . . . . 2042
340:2-28-20. . . . . [AMENDED] . . . . . 2042
340:2-28-21. . . . . [AMENDED] . . . . . 2042
340:2-28-22. . . . . [AMENDED] . . . . . 2042
340:2-28-23. . . . . [AMENDED] . . . . . 2043
340:2-28-24. . . . . [AMENDED] . . . . . 2043
340:2-28-25. . . . . [AMENDED] . . . . . 2043
340:2-28-26. . . . . [AMENDED] . . . . . 2043
340:2-28-27. . . . . [AMENDED AND RENUMBERED TO 340:2-28-17.2] . . . . . 2043
340:2-28-28. . . . . [REVOKED] . . . . . 2043
340:2-28-29. . . . . [AMENDED] . . . . . 2043
340:2-28-30. . . . . [AMENDED] . . . . . 2043
340:2-28-31. . . . . [AMENDED] . . . . . 2044
340:2-28-32. . . . . [REVOKED] . . . . . 2044
340:2-28-33. . . . . [AMENDED] . . . . . 2044
340:2-28-34. . . . . [AMENDED] . . . . . 2044
340:2-28-35. . . . . [REVOKED] . . . . . 2044
340:2-28-36. . . . . [REVOKED] . . . . . 2044
340:2-28-37. . . . . [REVOKED] . . . . . 2045

340:2-28-38. [REVOKED] 2045
340:2-28-39. [REVOKED] 2045
340:2-28-40. [REVOKED] 2045
340:2-28-41. [REVOKED] 2046
340:2-28-42. [REVOKED] 2046
340:2-28-43. [REVOKED] 2046
340:2-28-44. [REVOKED] 2046
340:2-28-45. [REVOKED] 2046
340:2-28-46. [REVOKED] 2046
340:2-28-47. [REVOKED] 2047
340:2-28-48. [AMENDED] 2047
340:2-28-49. [REVOKED] 2047
340:2-28-50. [AMENDED] 2047
340:2-28-51. [REVOKED] 2047
340:2-28-52. [REVOKED] 2047
340:2-28-53. [REVOKED] 2047
340:2-28-54. [REVOKED] 2047
340:2-28-55. [AMENDED] 2047
340:2-28-56. [REVOKED] 2048
340:5-1-1. [NEW] 840
340:5-1-2. [NEW] 841
340:5-1-3. [NEW] 841
340:5-1-4. [NEW] 841
340:5-1-5. [NEW] 841
340:5-1-6. [NEW] 842
340:5-1-7. [NEW] 843
340:5-1-8. [NEW] 843
340:5-3-1. [NEW] 844
340:5-3-2. [NEW] 844
340:5-3-3. [NEW] 844
340:5-3-4. [NEW] 844
340:5-3-5. [NEW] 845
340:5-3-6. [NEW] 845
340:5-5-1. [NEW] 845
340:5-5-2. [NEW] 845
340:5-5-3. [NEW] 845
340:5-5-4. [NEW] 847
340:5-5-5. [NEW] 848
340:5-5-6. [NEW] 848
340:5-5-7. [NEW] 850
340:5-7-1. [NEW] 850
340:10-2-1. [AMENDED] 851
340:10-2-3. [AMENDED] 851
340:10-2-6. [AMENDED] 852
340:10-2-7. [AMENDED] 853
340:10-2-8. [AMENDED] (E) 89
340:10-2-8. [AMENDED] 855
340:10-3-5. [AMENDED] 857
340:10-3-10. [AMENDED] 859
340:10-3-26. [AMENDED] 860
340:10-3-32. [AMENDED] 860
340:10-3-40. [AMENDED] 861
340:10-3-56. [AMENDED] 862
340:10-3-59. [AMENDED] 865
340:10-3-81. [AMENDED] 865
340:10-10-4. [AMENDED] 866
340:10-10-5. [AMENDED] 866
340:10-10-6. [AMENDED] 867
340:10-10-7. [AMENDED] 868
340:10-14-1. [AMENDED] 869
340:10-20-1. [AMENDED] 869
340:20-1-12. [AMENDED] 870
340:20-1-14. [AMENDED] 871
340:20-1-17. [AMENDED] 871
340:25-1-1.1. [AMENDED] 1241
340:25-1-2.1. [AMENDED] 1243
340:25-5-66. [AMENDED] 1243
340:25-5-67. [AMENDED] 1243
340:25-5-110.1. [AMENDED] 1244
340:25-5-114. [AMENDED] 1244
340:25-5-118. [AMENDED] 1244
340:25-5-123. [AMENDED] 1244
340:25-5-124. [AMENDED] (E) 529
340:25-5-124. [AMENDED] 1245
340:25-5-124.1. [AMENDED] 1245
340:25-5-124.2. [NEW] (E) 529
340:25-5-124.2. [NEW] 1245
340:25-5-133. [NEW] 1246
340:25-5-140.1. [AMENDED] 1246
340:25-5-178. [AMENDED] 1246
340:25-5-179.1. [AMENDED] 1247
340:25-5-183. [AMENDED] 1247
340:25-5-185.1. [AMENDED] 1247
340:25-5-198.1. [AMENDED] 1247
340:25-5-198.2. [AMENDED] 1248
340:25-5-200.2. [NEW] 1248
340:25-5-201.1. [NEW] 1248
340:25-5-265.1. [AMENDED] 1248
340:25-5-305. [AMENDED] 1248
340:25-5-312. [AMENDED] 1249
340:25-5-336. [AMENDED] 1250
340:25-5-350.1. [AMENDED] 1250
340:25-5-350.3. [AMENDED] 1250
340:25-5-351. [AMENDED] 1251
340:40-3-1. [AMENDED] (E) 531
340:40-3-1. [AMENDED] 873
340:40-5-1. [AMENDED] (E) 531
340:40-5-1. [AMENDED] 874
340:40-5-1. [AMENDED] (E) 2800
340:40-7-1. [AMENDED] (E) 2802
340:40-7-3. [AMENDED] (E) 533
340:40-7-3. [AMENDED] 876
340:40-7-6. [AMENDED] (E) 2803
340:40-7-8. [AMENDED] (E) 533
340:40-7-8. [AMENDED] 876
340:40-7-8. [AMENDED] (E) 2803
340:40-7-9. [AMENDED] 2049
340:40-7-10. [AMENDED] 2049
340:40-7-11. [AMENDED] (E) 534
340:40-7-11. [AMENDED] 2049
340:40-7-11. [AMENDED] (E) 2805
340:40-7-12. [AMENDED] 2051
340:40-7-12. [AMENDED] (E) 2807
340:40-7-13. [AMENDED] 2053
340:40-7-13. [AMENDED] (E) 2809
340:40-9-2. [AMENDED] 2053
340:40-9-3. [AMENDED] 2054
340:40-13-1. [AMENDED] 2054
340:40-13-2. [AMENDED] 2056
340:40-13-3. [AMENDED] (E) 536
340:40-13-3. [AMENDED] 877
340:40-13-5. [AMENDED] (E) 537
340:40-13-5. [AMENDED] 2057
340:50-1-3. [AMENDED] 879
340:50-1-5. [AMENDED] 879
340:50-1-9. [AMENDED] 880
340:50-3-1. [AMENDED] 881
340:50-3-3. [AMENDED] 883
340:50-5-5. [AMENDED] 885
340:50-5-7. [AMENDED] 885
340:50-5-28. [AMENDED] 886
340:50-5-45. [AMENDED] 887
340:50-5-46. [AMENDED] 889
340:50-5-68. [AMENDED] 889

340:50-5-88. . . . . [AMENDED] . . . . . 890
340:50-7-1. . . . . [AMENDED] . . . . . 117
340:50-7-2. . . . . [AMENDED] . . . . . 892
340:50-7-22. . . . . [AMENDED] . . . . . 895
340:50-7-23. . . . . [AMENDED] . . . . . 897
340:50-7-24. . . . . [AMENDED] . . . . . 897
340:50-7-25. . . . . [REVOKED] . . . . . 898
340:50-7-26. . . . . [AMENDED] . . . . . 898
340:50-7-28. . . . . [AMENDED] . . . . . 898
340:50-7-29. . . . . [AMENDED] . . . . . 898
340:50-7-31. . . . . [AMENDED] . . . . . 900
340:50-9-4. . . . . [AMENDED] . . . . . 902
340:50-13-3. . . . . [AMENDED] . . . . . 903
340:50-15-5. . . . . [AMENDED] . . . . . 903
340:50-15-27. . . . . [AMENDED] . . . . . 903
340:50, App. B. . . . . [REVOKED] . . . . . 904
340:50, App. C. . . . . [REVOKED] . . . . . 906
340:50, App. N. . . . . [REVOKED] . . . . . 916
340:65-1-5. . . . . [AMENDED] . . . . . 2060
340:65-3-1. . . . . [AMENDED] . . . . . 918
340:65-3-4. . . . . [AMENDED] . . . . . 2060
340:65-3-5. . . . . [AMENDED] (E) . . . . . 301
340:65-3-5. . . . . [AMENDED] . . . . . 919
340:65-5-6. . . . . [AMENDED] . . . . . 920
340:65-5-35. . . . . [REVOKED] . . . . . 2061
340:65-5-36. . . . . [REVOKED] . . . . . 2062
340:65-5-37. . . . . [REVOKED] . . . . . 2062
340:65-5-38. . . . . [REVOKED] . . . . . 2062
340:65-5-39. . . . . [REVOKED] . . . . . 2062
340:65-5-40. . . . . [REVOKED] . . . . . 2062
340:65-5-41. . . . . [REVOKED] . . . . . 2062
340:65-5-42. . . . . [REVOKED] . . . . . 2063
340:65-5-43. . . . . [REVOKED] . . . . . 2063
340:65-5-44. . . . . [REVOKED] . . . . . 2063
340:65-9-1. . . . . [NEW] . . . . . 2064
340:65-9-2. . . . . [NEW] . . . . . 2064
340:65-9-3. . . . . [NEW] . . . . . 2065
340:65-9-4. . . . . [NEW] . . . . . 2065
340:65-9-5. . . . . [NEW] . . . . . 2066
340:65-9-6. . . . . [NEW] . . . . . 2066
340:65-9-7. . . . . [NEW] . . . . . 2066
340:65-9-8. . . . . [NEW] . . . . . 2066
340:75-1-9. . . . . [AMENDED] (E) . . . . . 91
340:75-1-9. . . . . [AMENDED] . . . . . 922
340:75-1-16. . . . . [AMENDED] (E) . . . . . 91
340:75-1-16. . . . . [AMENDED] . . . . . 922
340:75-1-18.1. . . . . [AMENDED] (E) . . . . . 92
340:75-1-18.1. . . . . [AMENDED] . . . . . 2067
340:75-1-20. . . . . [AMENDED] (E) . . . . . 93
340:75-1-20. . . . . [AMENDED] . . . . . 923
340:75-1-21. . . . . [AMENDED] (E) . . . . . 94
340:75-1-21. . . . . [AMENDED] . . . . . 924
340:75-1-22. . . . . [AMENDED] . . . . . 2068
340:75-1-150. . . . . [AMENDED] . . . . . 1253
340:75-1-151. . . . . [AMENDED] . . . . . 1254
340:75-1-151.1. . . . . [NEW] . . . . . 1254
340:75-1-151.2. . . . . [NEW] . . . . . 1254
340:75-1-152. . . . . [AMENDED] . . . . . 1254
340:75-1-152.1. . . . . [REVOKED] . . . . . 1254
340:75-1-152.2. . . . . [REVOKED] . . . . . 1254
340:75-1-152.3. . . . . [NEW] . . . . . 1254
340:75-1-152.4. . . . . [NEW] . . . . . 1254
340:75-1-152.5. . . . . [NEW] . . . . . 1254
340:75-1-152.6. . . . . [NEW] . . . . . 1255
340:75-1-152.7. . . . . [NEW] . . . . . 1255
340:75-1-152.8. . . . . [NEW] . . . . . 1255
340:75-1-152.9. . . . . [NEW] . . . . . 1255
340:75-1-153. . . . . [REVOKED] . . . . . 1255
340:75-1-154. . . . . [AMENDED] . . . . . 1255
340:75-1-155. . . . . [NEW] . . . . . 1255
340:75-1-175. . . . . [AMENDED] . . . . . 1256
340:75-1-176. . . . . [AMENDED] . . . . . 1256
340:75-1-177. . . . . [REVOKED] . . . . . 1256
340:75-1-178. . . . . [REVOKED] . . . . . 1256
340:75-1-179. . . . . [AMENDED] . . . . . 1256
340:75-1-180. . . . . [REVOKED] . . . . . 1257
340:75-1-181. . . . . [REVOKED] . . . . . 1257
340:75-1-182. . . . . [REVOKED] . . . . . 1257
340:75-1-183. . . . . [REVOKED] . . . . . 1257
340:75-1-184. . . . . [REVOKED] . . . . . 1257
340:75-1-185. . . . . [NEW] . . . . . 1258
340:75-1-241. . . . . [NEW] . . . . . 934
340:75-3-5. . . . . [AMENDED] (E) . . . . . 540
340:75-3-5. . . . . [AMENDED] . . . . . 925
340:75-3-10.1. . . . . [AMENDED] (E) . . . . . 541
340:75-3-10.1. . . . . [AMENDED] . . . . . 926
340:75-4-9. . . . . [AMENDED] . . . . . 2073
340:75-4-10. . . . . [REVOKED] . . . . . 2073
340:75-4-11. . . . . [AMENDED] . . . . . 2073
340:75-4-12. . . . . [REVOKED] . . . . . 2074
340:75-4-12.1. . . . . [NEW] . . . . . 2074
340:75-4-12.2. . . . . [NEW] . . . . . 2076
340:75-4-13. . . . . [AMENDED] . . . . . 2076
340:75-4-14. . . . . [AMENDED] . . . . . 2077
340:75-6-30. . . . . [AMENDED] . . . . . 2068
340:75-6-31. . . . . [AMENDED] . . . . . 2070
340:75-6-31.3. . . . . [AMENDED] (E) . . . . . 2693
340:75-6-40.1. . . . . [AMENDED] . . . . . 935
340:75-6-40.5. . . . . [AMENDED] (E) . . . . . 95
340:75-6-40.5. . . . . [AMENDED] . . . . . 2072
340:75-6-40.6. . . . . [AMENDED] . . . . . 936
340:75-6-48. . . . . [AMENDED] (E) . . . . . 2694
340:75-6-85. . . . . [AMENDED] (E) . . . . . 95
340:75-6-85. . . . . [AMENDED] . . . . . 929
340:75-6-86. . . . . [AMENDED] (E) . . . . . 97
340:75-6-86. . . . . [AMENDED] . . . . . 930
340:75-6-115.2. . . . . [REVOKED] . . . . . 1258
340:75-7-54. . . . . [AMENDED] (E) . . . . . 739
340:75-7-54. . . . . [AMENDED] . . . . . 2091
340:75-7-65. . . . . [AMENDED] (E) . . . . . 748
340:75-7-65. . . . . [AMENDED] . . . . . 2092
340:75-13-83. . . . . [NEW] . . . . . 936
340:75-15-5. . . . . [AMENDED] . . . . . 2078
340:75-15-6. . . . . [AMENDED] . . . . . 2079
340:75-15-7. . . . . [AMENDED] . . . . . 2079
340:75-15-8. . . . . [AMENDED] . . . . . 2080
340:75-15-9. . . . . [AMENDED] . . . . . 2080
340:75-15-41. . . . . [AMENDED] . . . . . 2081
340:75-15-42. . . . . [AMENDED] . . . . . 2082
340:75-15-43. . . . . [AMENDED] . . . . . 2082
340:75-15-45. . . . . [AMENDED] . . . . . 2082
340:75-15-47. . . . . [AMENDED] . . . . . 2082
340:75-15-59. . . . . [AMENDED] . . . . . 2082
340:75-15-61. . . . . [AMENDED] . . . . . 2082
340:75-15-82. . . . . [AMENDED] . . . . . 2083
340:75-15-83. . . . . [AMENDED] . . . . . 2083
340:75-15-84. . . . . [AMENDED] . . . . . 2083
340:75-15-85. . . . . [AMENDED] . . . . . 2084
340:75-15-87. . . . . [AMENDED] . . . . . 2084
340:75-15-88. . . . . [AMENDED] . . . . . 2085
340:75-15-91. . . . . [AMENDED] . . . . . 2086
340:75-15-93. . . . . [AMENDED] . . . . . 2086
340:75-15-103. . . . . [AMENDED] . . . . . 2088
340:75-15-104. . . . . [REVOKED] . . . . . 2088

340:75-15-106. . . . . [AMENDED] . . . . . 2088
340:75-15-108. . . . . [AMENDED] . . . . . 2089
340:75-15-124. . . . . [AMENDED] . . . . . 2089
340:75-15-128. . . . . [AMENDED] (E) . . . . . 303
340:75-15-128. . . . . [AMENDED] . . . . . 931
340:75-15-128.1. . . . . [AMENDED] (E) . . . . . 303
340:75-15-128.1. . . . . [AMENDED] (E) . . . . . 741
340:75-15-128.1. . . . . [AMENDED] . . . . . 2093
340:75-15-128.2. . . . . [AMENDED] (E) . . . . . 307
340:75-15-128.2. . . . . [AMENDED] . . . . . 932
340:75-15-128.3. . . . . [AMENDED] (E) . . . . . 307
340:75-15-128.3. . . . . [AMENDED] . . . . . 932
340:75-15-128.4. . . . . [AMENDED] (E) . . . . . 308
340:75-15-128.4. . . . . [AMENDED] (E) . . . . . 744
340:75-15-128.4. . . . . [AMENDED] . . . . . 2097
340:75-15-128.5. . . . . [AMENDED] (E) . . . . . 309
340:75-15-128.5. . . . . [AMENDED] (E) . . . . . 745
340:75-15-128.5. . . . . [AMENDED] . . . . . 2098
340:75-15-128.6. . . . . [AMENDED] (E) . . . . . 311
340:75-15-128.6. . . . . [AMENDED] . . . . . 933
340:75-15-128.7. . . . . [REVOKED] (E) . . . . . 312
340:75-15-128.7. . . . . [REVOKED] . . . . . 934
340:100-1-2. . . . . [AMENDED] (E) . . . . . 98
340:100-1-2. . . . . [AMENDED] . . . . . 936
340:100-1-4. . . . . [REVOKED] (E) . . . . . 104
340:100-1-4. . . . . [REVOKED] . . . . . 936
340:100-3-6. . . . . [AMENDED] (E) . . . . . 105
340:100-3-6. . . . . [AMENDED] . . . . . 936
340:100-3-14. . . . . [NEW] (E) . . . . . 107
340:100-3-14. . . . . [NEW] . . . . . 936
340:100-3-27. . . . . [AMENDED] . . . . . 936
340:100-3-27.1. . . . . [NEW] . . . . . 936
340:100-3-27.2. . . . . [NEW] . . . . . 936
340:100-3-27.3. . . . . [NEW] . . . . . 936
340:100-3-27.4. . . . . [NEW] . . . . . 936
340:100-3-27.5. . . . . [NEW] . . . . . 936
340:100-3-28. . . . . [AMENDED] . . . . . 936
340:100-3-33.1. . . . . [NEW] . . . . . 936
340:100-3-38. . . . . [AMENDED] . . . . . 936
340:100-3-38.1. . . . . [NEW] . . . . . 936
340:100-3-38.2. . . . . [NEW] . . . . . 936
340:100-3-38.3. . . . . [NEW] . . . . . 936
340:100-3-38.4. . . . . [NEW] . . . . . 936
340:100-3-38.5. . . . . [NEW] . . . . . 936
340:100-3-38.6. . . . . [NEW] . . . . . 936
340:100-3-38.7. . . . . [NEW] . . . . . 936
340:100-3-38.8. . . . . [NEW] . . . . . 936
340:100-3-38.9. . . . . [NEW] . . . . . 936
340:100-3-38.10. . . . . [NEW] . . . . . 936
340:100-3-38.11. . . . . [NEW] . . . . . 936
340:100-5-22.1. . . . . [AMENDED] . . . . . 936
340:100-5-22.4. . . . . [NEW] (E) . . . . . 544
340:100-5-22.4. . . . . [NEW] . . . . . 936
340:100-5-22.5. . . . . [NEW] (E) . . . . . 544
340:100-5-22.5. . . . . [NEW] . . . . . 936
340:100-5-26. . . . . [AMENDED] . . . . . 936
340:100-5-26.1. . . . . [NEW] . . . . . 936
340:100-5-26.2. . . . . [NEW] (E) . . . . . 1079
340:100-5-31. . . . . [RESERVED] . . . . . 936
340:100-5-32. . . . . [NEW] . . . . . 936
340:100-5-33. . . . . [NEW] . . . . . 936
340:100-5-50. . . . . [AMENDED] . . . . . 936
340:100-5-51. . . . . [AMENDED] . . . . . 936
340:100-5-52. . . . . [AMENDED] . . . . . 936
340:100-5-53. . . . . [AMENDED] . . . . . 936
340:100-5-55. . . . . [REVOKED] . . . . . 936
340:100-5-56. . . . . [AMENDED] (E) . . . . . 109
340:100-5-56. . . . . [AMENDED] . . . . . 936
340:100-5-57. . . . . [AMENDED] (E) . . . . . 109
340:100-5-57. . . . . [AMENDED] . . . . . 936
340:100-5-57.1. . . . . [NEW] (E) . . . . . 113
340:100-5-57.1. . . . . [NEW] . . . . . 936
340:100-5-58. . . . . [AMENDED] (E) . . . . . 114
340:100-5-58. . . . . [AMENDED] . . . . . 936
340:100-6-70. . . . . [AMENDED] . . . . . 936
340:105-1-8. . . . . [AMENDED] . . . . . 938
340:105-3-1. . . . . [REVOKED] . . . . . 939
340:105-3-2. . . . . [REVOKED] . . . . . 939
340:105-3-3. . . . . [REVOKED] . . . . . 941
340:105-3-20. . . . . [REVOKED] . . . . . 941
340:105-3-21. . . . . [REVOKED] . . . . . 941
340:105-3-22. . . . . [REVOKED] . . . . . 941
340:105-3-23. . . . . [REVOKED] . . . . . 941
340:105-3-24. . . . . [REVOKED] . . . . . 941
340:105-3-25. . . . . [REVOKED] . . . . . 941
340:105-3-25.1. . . . . [REVOKED] . . . . . 941
340:105-3-25.4. . . . . [REVOKED] . . . . . 942
340:105-3-25.5. . . . . [REVOKED] . . . . . 942
340:105-3-25.6. . . . . [REVOKED] . . . . . 942
340:105-3-25.7. . . . . [REVOKED] . . . . . 942
340:105-3-26. . . . . [REVOKED] . . . . . 942
340:105-3-27. . . . . [REVOKED] . . . . . 942
340:105-3-28. . . . . [REVOKED] . . . . . 942
340:105-3-29. . . . . [REVOKED] . . . . . 942
340:105-3-30. . . . . [REVOKED] . . . . . 942
340:105-3-31. . . . . [REVOKED] . . . . . 942
340:105-3-32. . . . . [REVOKED] . . . . . 943
340:105-3-33. . . . . [REVOKED] . . . . . 943
340:105-3-34. . . . . [REVOKED] . . . . . 943
340:105-3-35. . . . . [REVOKED] . . . . . 945
340:105-3-36. . . . . [REVOKED] . . . . . 945
340:105-3-37. . . . . [REVOKED] . . . . . 947
340:105-10-32. . . . . [AMENDED] . . . . . 947
340:105-10-51. . . . . [AMENDED] . . . . . 948
340:105-10-52. . . . . [AMENDED] . . . . . 950
340:105-10-72. . . . . [AMENDED] . . . . . 951
340:105-10-73. . . . . [AMENDED] . . . . . 951
340:105-10-74. . . . . [AMENDED] . . . . . 952
340:105-10-86. . . . . [AMENDED] . . . . . 952
340:105-10-95. . . . . [AMENDED] . . . . . 953
340:105-11-255. . . . . [AMENDED] . . . . . 954
340:110-1-5. . . . . [AMENDED] . . . . . 1260
340:110-1-6. . . . . [AMENDED] . . . . . 1260
340:110-1-8.3. . . . . [AMENDED] . . . . . 1261
340:110-1-9. . . . . [AMENDED] . . . . . 1267
340:110-1-9.1. . . . . [AMENDED] . . . . . 1268
340:110-1-9.3. . . . . [AMENDED] . . . . . 1270
340:110-1-9.4. . . . . [AMENDED] . . . . . 1271
340:110-1-9.5. . . . . [AMENDED] . . . . . 1272
340:110-1-10. . . . . [AMENDED] . . . . . 1272
340:110-1-20. . . . . [AMENDED] . . . . . 1273
340:110-1-40. . . . . [AMENDED] . . . . . 1275
340:110-1-41. . . . . [AMENDED] . . . . . 1275
340:110-1-42. . . . . [AMENDED] . . . . . 1275
340:110-1-43. . . . . [AMENDED] . . . . . 1275
340:110-1-43.1. . . . . [AMENDED] . . . . . 1276
340:110-1-44. . . . . [AMENDED] . . . . . 1276
340:110-1-45. . . . . [AMENDED] . . . . . 1277
340:110-1-46. . . . . [AMENDED] . . . . . 1277
340:110-1-47. . . . . [AMENDED] . . . . . 1278
340:110-1-47.1. . . . . [NEW] . . . . . 1278
340:110-1-47.2. . . . . [NEW] . . . . . 1279
340:110-1-51. . . . . [AMENDED] . . . . . 1281
340:110-1-52. . . . . [AMENDED] . . . . . 1282

340:110-1-53. . . . . [AMENDED] . . . . . 1283
340:110-1-54. . . . . [AMENDED] . . . . . 1283
340:110-1-55. . . . . [AMENDED] . . . . . 1284
340:110-3-1. . . . . [AMENDED] (E) . . . . . 1866
340:110-3-2. . . . . [AMENDED] (E) . . . . . 1866
340:110-3-3. . . . . [AMENDED] (E) . . . . . 1866
340:110-3-4. . . . . [REVOKED] (E) . . . . . 1866
340:110-3-5. . . . . [AMENDED] (E) . . . . . 1866
340:110-3-5.1. . . . . [AMENDED] (E) . . . . . 1866
340:110-3-6. . . . . [AMENDED] (E) . . . . . 1866
340:110-3-7.1. . . . . [AMENDED] (E) . . . . . 1866
340:110-3-9.1. . . . . [AMENDED] (E) . . . . . 1866
340:110-3-10. . . . . [AMENDED] (E) . . . . . 1866
340:110-3-11. . . . . [AMENDED] (E) . . . . . 1866
340:110-3-14. . . . . [AMENDED] (E) . . . . . 1866
340:110-3-22. . . . . [AMENDED] (E) . . . . . 1866
340:110-3-25. . . . . [AMENDED] (E) . . . . . 1866
340:110-3-25.1. . . . . [AMENDED] (E) . . . . . 1866
340:110-3-25.2. . . . . [AMENDED] (E) . . . . . 1866
340:110-3-25.3. . . . . [AMENDED] (E) . . . . . 1866
340:110-3-25.4. . . . . [AMENDED] (E) . . . . . 1866
340:110-3-25.5. . . . . [AMENDED] (E) . . . . . 1866
340:110-3-25.6. . . . . [AMENDED] (E) . . . . . 1866
340:110-3-26. . . . . [AMENDED] (E) . . . . . 1866
340:110-3-27. . . . . [AMENDED] (E) . . . . . 1866
340:110-3-28. . . . . [AMENDED] (E) . . . . . 1866
340:110-3-29. . . . . [AMENDED] (E) . . . . . 1866
340:110-3-31. . . . . [AMENDED] (E) . . . . . 1866
340:110-3-33. . . . . [AMENDED] (E) . . . . . 1866
340:110-3-33.1. . . . . [AMENDED] (E) . . . . . 1866
340:110-3-220. . . . . [NEW] (E) . . . . . 1866
340:110-3-221. . . . . [NEW] (E) . . . . . 1866
340:110-3-222. . . . . [NEW] (E) . . . . . 1866
340:110-3-223. . . . . [AMENDED] (E) . . . . . 1866
340:110-3-224. . . . . [NEW] (E) . . . . . 1866
340:110-3-225. . . . . [NEW] (E) . . . . . 1866
340:110-3-226. . . . . [NEW] (E) . . . . . 1866
340:110-3-227. . . . . [NEW] (E) . . . . . 1866
340:110-3-228. . . . . [NEW] (E) . . . . . 1866
340:110-3-229. . . . . [NEW] (E) . . . . . 1866
340:110-3-230. . . . . [NEW] (E) . . . . . 1866
340:110-3-231. . . . . [NEW] (E) . . . . . 1866
340:110-3-232. . . . . [NEW] (E) . . . . . 1866
340:110-3-233. . . . . [NEW] (E) . . . . . 1866
340:110-3-234. . . . . [NEW] (E) . . . . . 1866
340:110-3-235. . . . . [NEW] (E) . . . . . 1866
340:110-3-236. . . . . [NEW] (E) . . . . . 1866
340:110-3-237. . . . . [NEW] (E) . . . . . 1866
340:110-3-238. . . . . [NEW] (E) . . . . . 1866
340:110-3-239. . . . . [NEW] (E) . . . . . 1866
340:110-3-240. . . . . [NEW] (E) . . . . . 1866
340:110-3-241. . . . . [NEW] (E) . . . . . 1866
340:110-3-242. . . . . [NEW] (E) . . . . . 1866
340:110-5-3. . . . . [AMENDED] . . . . . 955
340:110-5-24. . . . . [NEW] . . . . . 957
340:110-5-25. . . . . [AMENDED] . . . . . 957
340:110-5-26. . . . . [REVOKED] . . . . . 957
340:110-5-27. . . . . [AMENDED] . . . . . 958
340:110-5-28. . . . . [REVOKED] . . . . . 958
340:110-5-29. . . . . [AMENDED] . . . . . 958
340:110-5-30. . . . . [AMENDED] . . . . . 959
340:110-5-31. . . . . [AMENDED] . . . . . 960
340:110-5-32. . . . . [AMENDED] . . . . . 960
340:110-5-33. . . . . [AMENDED] . . . . . 960
340:110-5-34. . . . . [AMENDED] . . . . . 961
340:110-5-35. . . . . [AMENDED] . . . . . 961
340:110-5-36. . . . . [AMENDED] . . . . . 961
340:110-5-37. . . . . [AMENDED] . . . . . 961
340:110-5-37.1. . . . . [NEW] . . . . . 961
340:110-5-38. . . . . [AMENDED] . . . . . 961
360:1-3-8. . . . . [AMENDED] . . . . . 1284
360:1-3-8.1. . . . . [NEW] . . . . . 1285
360:10-1-2. . . . . [AMENDED] . . . . . 1286
360:10-3-3.5. . . . . [AMENDED] . . . . . 1288
360:10-3-4. . . . . [AMENDED] . . . . . 1289
360:10-3-20. . . . . [AMENDED] . . . . . 1289
360:10-3-24. . . . . [AMENDED] . . . . . 1289
360:10-3-25. . . . . [AMENDED] . . . . . 1290
360:10-3-27. . . . . [AMENDED] . . . . . 1291
360:10-5-20. . . . . [AMENDED] . . . . . 1291
360:10-5-32. . . . . [AMENDED] . . . . . 1292
360:10-5-34. . . . . [AMENDED] . . . . . 1292
360:10-5-61. . . . . [AMENDED] . . . . . 1292
360:15-1-18. . . . . [AMENDED] . . . . . 1293
365:10-5-127. . . . . [AMENDED] . . . . . 1667
365:10-5-128.1. . . . . [AMENDED] . . . . . 1670
365:10-5-129.1. . . . . [AMENDED] . . . . . 1672
365:10-5-132. . . . . [AMENDED] . . . . . 1674
365:10-19-1. . . . . [NEW] (E) . . . . . 224
365:10-19-1. . . . . [NEW] . . . . . 1731
365:10-19-2. . . . . [NEW] (E) . . . . . 224
365:10-19-2. . . . . [NEW] . . . . . 1731
365:10-19-3. . . . . [NEW] (E) . . . . . 225
365:10-19-3. . . . . [NEW] . . . . . 1732
365:10-19-4. . . . . [NEW] (E) . . . . . 225
365:10-19-4. . . . . [NEW] . . . . . 1732
365:10-19-5. . . . . [NEW] (E) . . . . . 225
365:10-19-5. . . . . [NEW] . . . . . 1732
365:10-19-6. . . . . [NEW] (E) . . . . . 226
365:10-19-6. . . . . [NEW] . . . . . 1733
365:10-19-7. . . . . [NEW] (E) . . . . . 226
365:10-19-7. . . . . [NEW] . . . . . 1733
365:10-19-8. . . . . [NEW] (E) . . . . . 226
365:10-19-8. . . . . [NEW] . . . . . 1733
365:10-21-1. . . . . [NEW] . . . . . 1734
365:10-21-2. . . . . [NEW] . . . . . 1734
365:10-21-3. . . . . [NEW] . . . . . 1734
365:10-21-4. . . . . [NEW] . . . . . 1734
365:10-21-5. . . . . [NEW] . . . . . 1735
365:10-21-6. . . . . [NEW] . . . . . 1735
365:10-21-7. . . . . [NEW] . . . . . 1735
365:10-21-8. . . . . [NEW] . . . . . 1736
365:10-21-9. . . . . [NEW] . . . . . 1736
365:10, App. Q. . . . . [REVOKED] . . . . . 1676
365:10, App. Q. . . . . [NEW] . . . . . 1676
365:10, App. S. . . . . [REVOKED] . . . . . 1682
365:10, App. S. . . . . [NEW] . . . . . 1682
365:10, App. V. . . . . [REVOKED] . . . . . 1716
365:10, App. V. . . . . [NEW] . . . . . 1716
365:15-1-3. . . . . [AMENDED] . . . . . 1736
377:3-11-1. . . . . [AMENDED] . . . . . 1294
377:3-11-2. . . . . [AMENDED] . . . . . 1294
377:3-11-3. . . . . [AMENDED] . . . . . 1294
377:3-11-5. . . . . [AMENDED] . . . . . 1294
377:3-11-9. . . . . [AMENDED] . . . . . 1294
377:3-11-10. . . . . [AMENDED] . . . . . 1294
377:3-11-11. . . . . [AMENDED] . . . . . 1295
380:25-19-1. . . . . [AMENDED] . . . . . 2697
380:30-1-7. . . . . [AMENDED] . . . . . 2699
380:30-1-14. . . . . [NEW] . . . . . 2700
380:30-3-3. . . . . [AMENDED] . . . . . 2700
380:30-5-2. . . . . [AMENDED] . . . . . 2700
380:40-1-9. . . . . [AMENDED] . . . . . 2701
380:40-1-18. . . . . [AMENDED] . . . . . 2701

390:10-1-5. . . . . [AMENDED] . . . . . 2453
390:10-1-6. . . . . [AMENDED] . . . . . 2453
390:15-1-3. . . . . [AMENDED] . . . . . 2454
390:15-1-13. . . . . [AMENDED] . . . . . 2454
390:20-1-3. . . . . [AMENDED] . . . . . 2456
390:35-5-3. . . . . [AMENDED] . . . . . 2457
390:40-5-4. . . . . [AMENDED] . . . . . 2457
395:10-1-2.1. . . . . [NEW] . . . . . 962
395:10-1-2.2. . . . . [NEW] . . . . . 962
395:10-1-2.3. . . . . [NEW] . . . . . 963
395:10-1-2.4. . . . . [NEW] . . . . . 963
395:10-1-3. . . . . [AMENDED] . . . . . 963
395:10-1-4. . . . . [AMENDED] . . . . . 964
395:10-1-4.1. . . . . [NEW] . . . . . 964
395:10-1-4.2. . . . . [NEW] . . . . . 964
395:10-1-7.1. . . . . [NEW] . . . . . 964
395:10-1-9. . . . . [AMENDED] . . . . . 964
395:10-1-9.1. . . . . [NEW] . . . . . 965
395:10-1-10.1. . . . . [NEW] . . . . . 966
395:10-1-11. . . . . [AMENDED] . . . . . 966
395:10-1-11.1. . . . . [NEW] . . . . . 967
395:10-1-13. . . . . [AMENDED] . . . . . 968
395:10-1-14. . . . . [AMENDED] . . . . . 968
435:5-1-6.1. . . . . [AMENDED] . . . . . 969
435:10-4-4. . . . . [AMENDED] . . . . . 970
435:10-4-5. . . . . [AMENDED] . . . . . 971
435:10-15-1. . . . . [AMENDED] . . . . . 972
435:15-1-1.1. . . . . [AMENDED] . . . . . 973
435:15-9-4. . . . . [AMENDED] . . . . . 973
435:15-11-2. . . . . [AMENDED] (E) . . . . . 17
435:15-11-2. . . . . [AMENDED] . . . . . 2458
435:20-3-5. . . . . [AMENDED] . . . . . 976
435:20-3-6. . . . . [AMENDED] . . . . . 977
435:20-5-8. . . . . [NEW] . . . . . 2460
435:20-5-9. . . . . [NEW] (E) . . . . . 653
435:20-9-1. . . . . [AMENDED] . . . . . 978
435:20-9-2. . . . . [AMENDED] . . . . . 978
435:20-9-3. . . . . [AMENDED] . . . . . 979
435:20-9-4. . . . . [AMENDED] . . . . . 981
435:30-1-15. . . . . [AMENDED] . . . . . 982
435:30-1-17. . . . . [NEW] . . . . . 983
435:40-1-5. . . . . [AMENDED] . . . . . 983
435:40-1-8. . . . . [AMENDED] . . . . . 984
435:45-1-2. . . . . [AMENDED] . . . . . 985
435:50-1-4. . . . . [AMENDED] . . . . . 2462
435:55-5-2. . . . . [AMENDED] . . . . . 987
435:55-5-3. . . . . [AMENDED] . . . . . 987
450:1-1-1.1. . . . . [AMENDED] . . . . . 2100
450:1-1-2. . . . . [AMENDED] . . . . . 2101
450:1-1-5. . . . . [AMENDED] . . . . . 2101
450:1-1-10. . . . . [AMENDED] . . . . . 2101
450:1-3-3. . . . . [AMENDED] . . . . . 2102
450:1-3-22. . . . . [NEW] . . . . . 2102
450:1-5-5. . . . . [AMENDED] . . . . . 2102
450:1-5-11. . . . . [AMENDED] . . . . . 2102
450:1-7-4. . . . . [AMENDED] . . . . . 2103
450:1-7-5. . . . . [REVOKED] . . . . . 2104
450:1-7-6. . . . . [NEW] . . . . . 2104
450:1-9-1. . . . . [AMENDED] . . . . . 2105
450:1-9-4. . . . . [AMENDED] . . . . . 2105
450:1-9-5. . . . . [AMENDED] . . . . . 2105
450:1-9-6. . . . . [AMENDED] . . . . . 2106
450:1-9-7. . . . . [AMENDED] . . . . . 2107
450:1-9-8. . . . . [AMENDED] . . . . . 2108
450:1-9-8.1. . . . . [NEW] . . . . . 2109
450:1-9-11. . . . . [REVOKED] . . . . . 2109
450:1-9-12. . . . . [AMENDED] . . . . . 2109
450:1-9-13. . . . . [AMENDED] . . . . . 2109
450:1-9-14. . . . . [AMENDED] . . . . . 2109
450:1-11-2. . . . . [AMENDED] . . . . . 2110
450:15-1-1. . . . . [AMENDED] . . . . . 2111
450:15-1-2. . . . . [AMENDED] (E) . . . . . 654
450:15-1-2. . . . . [AMENDED] . . . . . 2111
450:15-3-1. . . . . [AMENDED] . . . . . 2113
450:15-3-2. . . . . [AMENDED] . . . . . 2113
450:15-3-3. . . . . [AMENDED] . . . . . 2113
450:15-3-4. . . . . [AMENDED] . . . . . 2113
450:15-3-5. . . . . [AMENDED] . . . . . 2113
450:15-3-6. . . . . [AMENDED] . . . . . 2114
450:15-3-8. . . . . [AMENDED] . . . . . 2114
450:15-3-9. . . . . [AMENDED] . . . . . 2114
450:15-3-10. . . . . [AMENDED] . . . . . 2114
450:15-3-11. . . . . [AMENDED] . . . . . 2115
450:15-3-13. . . . . [AMENDED] . . . . . 2115
450:15-3-14. . . . . [AMENDED] . . . . . 2115
450:15-3-16. . . . . [AMENDED] . . . . . 2116
450:15-3-17. . . . . [AMENDED] . . . . . 2116
450:15-3-18. . . . . [AMENDED] . . . . . 2116
450:15-3-20. . . . . [REVOKED] (E) . . . . . 656
450:15-3-20. . . . . [REVOKED] . . . . . 2116
450:15-3-20.1. . . . . [NEW] (E) . . . . . 657
450:15-3-20.1. . . . . [NEW] . . . . . 2117
450:15-3-21. . . . . [AMENDED] . . . . . 2117
450:15-3-23. . . . . [REVOKED] . . . . . 2118
450:15-3-24. . . . . [REVOKED] . . . . . 2118
450:15-3-25. . . . . [AMENDED] . . . . . 2118
450:15-3-26. . . . . [REVOKED] . . . . . 2119
450:15-3-35. . . . . [AMENDED] . . . . . 2119
450:15-3-36. . . . . [REVOKED] . . . . . 2119
450:15-3-43. . . . . [REVOKED] . . . . . 2120
450:15-3-44. . . . . [REVOKED] . . . . . 2120
450:15-3-45. . . . . [AMENDED] . . . . . 2120
450:15-3-60. . . . . [NEW] (E) . . . . . 657
450:15-3-60. . . . . [NEW] . . . . . 2121
450:15-3-61. . . . . [NEW] (E) . . . . . 657
450:15-3-61. . . . . [NEW] . . . . . 2121
450:15-3-62. . . . . [NEW] (E) . . . . . 658
450:15-3-62. . . . . [NEW] . . . . . 2121
450:15-3-63. . . . . [NEW] (E) . . . . . 658
450:15-3-63. . . . . [NEW] . . . . . 2122
450:15-3-64. . . . . [NEW] (E) . . . . . 658
450:15-3-64. . . . . [NEW] . . . . . 2122
450:15-3-65. . . . . [NEW] (E) . . . . . 659
450:15-3-65. . . . . [NEW] . . . . . 2123
450:15-3-66. . . . . [NEW] (E) . . . . . 659
450:15-3-66. . . . . [NEW] . . . . . 2123
450:15-7-2. . . . . [AMENDED] . . . . . 2123
450:15-7-3. . . . . [AMENDED] . . . . . 2124
450:15-7-4. . . . . [AMENDED] . . . . . 2124
450:15-7-5. . . . . [REVOKED] . . . . . 2125
450:15-7-6. . . . . [AMENDED] . . . . . 2125
450:15-7-7. . . . . [AMENDED] . . . . . 2125
450:15-7-8. . . . . [AMENDED] . . . . . 2126
450:15-7-9. . . . . [AMENDED] . . . . . 2126
450:15-7-10. . . . . [AMENDED] . . . . . 2126
450:15-7-11. . . . . [AMENDED] . . . . . 2126
450:15-7-12. . . . . [AMENDED] . . . . . 2126
450:15-7-14. . . . . [AMENDED] . . . . . 2127
450:15-7-15. . . . . [AMENDED] . . . . . 2127
450:15-9-1. . . . . [AMENDED] . . . . . 2129
450:15-9-6. . . . . [REVOKED] . . . . . 2129
450:15-9-7. . . . . [AMENDED] . . . . . 2129
450:16-1-2. . . . . [AMENDED] . . . . . 1296
450:16-1-5. . . . . [REVOKED] . . . . . 1298

450:16-7-3. . . . . [AMENDED] . . . . . 1298
450:16-13-2. . . . . [AMENDED] . . . . . 1298
450:16-13-4. . . . . [AMENDED] . . . . . 1298
450:16-13-13. . . . . [AMENDED] . . . . . 1298
450:16-13-15. . . . . [AMENDED] . . . . . 1298
450:16-13-17. . . . . [AMENDED] . . . . . 1299
450:16-13-24. . . . . [AMENDED] . . . . . 1299
450:16-13-45. . . . . [AMENDED] . . . . . 1299
450:16-13-46. . . . . [AMENDED] . . . . . 1299
450:16-13-48.1. . . . . [AMENDED] . . . . . 1299
450:16-15-1. . . . . [AMENDED] . . . . . 1299
450:16-15-5. . . . . [AMENDED] . . . . . 1300
450:16-17-1. . . . . [AMENDED] (E) . . . . . 660
450:16-17-1. . . . . [AMENDED] . . . . . 1300
450:16-17-3. . . . . [REVOKED] (E) . . . . . 660
450:16-17-3. . . . . [REVOKED] . . . . . 1301
450:16-17-3.1. . . . . [NEW] (E) . . . . . 661
450:16-17-3.1. . . . . [NEW] . . . . . 1301
450:16-17-4. . . . . [AMENDED] . . . . . 1302
450:16-21-1. . . . . [AMENDED] . . . . . 1302
450:16-21-2. . . . . [AMENDED] . . . . . 1302
450:16-21-5. . . . . [AMENDED] . . . . . 1302
450:16-27-3. . . . . [AMENDED] . . . . . 1302
450:16-29-1. . . . . [REVOKED] . . . . . 1303
450:16-29-3. . . . . [AMENDED] . . . . . 1303
450:16-29-6. . . . . [REVOKED] . . . . . 1303
450:16-29-7. . . . . [AMENDED] . . . . . 1303
450:16-29-8. . . . . [AMENDED] . . . . . 1303
450:17-1-1. . . . . [AMENDED] . . . . . 1304
450:17-1-2. . . . . [AMENDED] . . . . . 1305
450:17-1-5. . . . . [REVOKED] . . . . . 1309
450:17-1-6. . . . . [AMENDED] . . . . . 1309
450:17-3-3. . . . . [AMENDED] . . . . . 1310
450:17-3-21. . . . . [AMENDED] . . . . . 1310
450:17-3-22. . . . . [AMENDED] . . . . . 1310
450:17-3-41. . . . . [AMENDED] . . . . . 1310
450:17-3-42. . . . . [AMENDED] . . . . . 1311
450:17-3-43. . . . . [AMENDED] . . . . . 1311
450:17-3-62. . . . . [AMENDED] . . . . . 1311
450:17-3-81. . . . . [AMENDED] . . . . . 1311
450:17-3-82. . . . . [AMENDED] . . . . . 1311
450:17-3-83. . . . . [AMENDED] . . . . . 1312
450:17-3-101. . . . . [AMENDED] . . . . . 1312
450:17-3-101.1. . . . . [AMENDED] . . . . . 1312
450:17-3-103. . . . . [AMENDED] . . . . . 1312
450:17-3-106. . . . . [AMENDED] (E) . . . . . 662
450:17-3-106. . . . . [AMENDED] . . . . . 1313
450:17-3-122. . . . . [AMENDED] . . . . . 1313
450:17-3-141. . . . . [AMENDED] . . . . . 1313
450:17-3-142. . . . . [AMENDED] . . . . . 1313
450:17-3-144. . . . . [AMENDED] . . . . . 1314
450:17-3-144.1. . . . . [AMENDED] . . . . . 1314
450:17-3-161. . . . . [AMENDED] . . . . . 1314
450:17-5-22. . . . . [AMENDED] . . . . . 1315
450:17-5-45. . . . . [AMENDED] . . . . . 1315
450:17-5-56. . . . . [AMENDED] . . . . . 1315
450:17-5-67. . . . . [AMENDED] . . . . . 1315
450:17-5-67.1. . . . . [AMENDED] . . . . . 1315
450:17-5-67.2. . . . . [AMENDED] . . . . . 1316
450:17-5-67.3. . . . . [AMENDED] . . . . . 1316
450:17-5-81. . . . . [NEW] . . . . . 1316
450:17-5-100. . . . . [AMENDED] . . . . . 1316
450:17-5-111. . . . . [REVOKED] (E) . . . . . 662
450:17-5-112. . . . . [REVOKED] (E) . . . . . 663
450:17-5-113. . . . . [REVOKED] (E) . . . . . 663
450:17-5-114. . . . . [REVOKED] (E) . . . . . 663
450:17-5-115. . . . . [REVOKED] (E) . . . . . 663
450:17-5-116. . . . . [REVOKED] (E) . . . . . 664
450:17-5-117. . . . . [REVOKED] (E) . . . . . 664
450:17-5-118. . . . . [REVOKED] (E) . . . . . 664
450:17-5-119. . . . . [REVOKED] (E) . . . . . 665
450:17-5-120. . . . . [REVOKED] (E) . . . . . 665
450:17-5-121. . . . . [REVOKED] (E) . . . . . 666
450:17-5-122. . . . . [REVOKED] (E) . . . . . 666
450:17-5-123. . . . . [REVOKED] (E) . . . . . 667
450:17-5-124. . . . . [REVOKED] (E) . . . . . 667
450:17-5-125. . . . . [REVOKED] (E) . . . . . 668
450:17-5-126. . . . . [REVOKED] (E) . . . . . 668
450:17-5-127. . . . . [NEW] (E) . . . . . 668
450:17-5-127. . . . . [NEW] . . . . . 1316
450:17-7-3. . . . . [AMENDED] . . . . . 1317
450:17-7-4. . . . . [AMENDED] . . . . . 1317
450:17-7-5. . . . . [AMENDED] . . . . . 1317
450:17-7-6. . . . . [AMENDED] . . . . . 1317
450:17-7-7. . . . . [AMENDED] . . . . . 1317
450:17-7-8. . . . . [AMENDED] . . . . . 1318
450:17-7-9. . . . . [AMENDED] . . . . . 1318
450:17-7-10. . . . . [AMENDED] . . . . . 1319
450:17-9-1. . . . . [REVOKED] (E) . . . . . 668
450:17-9-1.1. . . . . [NEW] (E) . . . . . 669
450:17-9-1.1. . . . . [NEW] . . . . . 1319
450:17-9-2. . . . . [REVOKED] (E) . . . . . 670
450:17-11-1. . . . . [AMENDED] . . . . . 1320
450:17-11-3. . . . . [AMENDED] . . . . . 1321
450:17-11-4. . . . . [AMENDED] . . . . . 1321
450:17-13-1. . . . . [AMENDED] . . . . . 1321
450:17-13-2. . . . . [AMENDED] . . . . . 1322
450:17-15-1.1. . . . . [AMENDED] . . . . . 1322
450:17-19-3. . . . . [AMENDED] . . . . . 1322
450:17-21-1. . . . . [AMENDED] . . . . . 1323
450:17-21-2. . . . . [AMENDED] . . . . . 1323
450:17-21-3. . . . . [AMENDED] . . . . . 1323
450:17-21-4. . . . . [NEW] . . . . . 1323
450:17-21-5. . . . . [NEW] . . . . . 1323
450:17-23-1. . . . . [AMENDED] . . . . . 1324
450:17-27-1. . . . . [AMENDED] . . . . . 1324
450:18-7-3. . . . . [REVOKED] (E) . . . . . 671
450:18-7-3.1. . . . . [NEW] (E) . . . . . 672
450:18-7-143. . . . . [AMENDED] (E) . . . . . 673
450:19-1-1. . . . . [AMENDED] . . . . . 2130
450:19-1-2. . . . . [AMENDED] . . . . . 2130
450:19-1-5. . . . . [REVOKED] . . . . . 2133
450:19-1-6. . . . . [AMENDED] . . . . . 2133
450:19-3-1. . . . . [AMENDED] . . . . . 2134
450:19-3-2. . . . . [AMENDED] . . . . . 2134
450:19-3-3. . . . . [AMENDED] . . . . . 2135
450:19-3-4. . . . . [AMENDED] . . . . . 2135
450:19-3-5. . . . . [REVOKED] . . . . . 2135
450:19-3-7. . . . . [AMENDED] . . . . . 2136
450:19-3-8. . . . . [AMENDED] . . . . . 2136
450:19-3-9. . . . . [AMENDED] . . . . . 2136
450:19-3-10. . . . . [NEW] . . . . . 2137
450:19-5-1. . . . . [AMENDED] . . . . . 2137
450:19-5-2. . . . . [AMENDED] (E) . . . . . 674
450:19-5-2. . . . . [AMENDED] . . . . . 2138
450:19-5-3. . . . . [AMENDED] . . . . . 2138
450:19-5-3.1. . . . . [AMENDED] . . . . . 2138
450:19-5-4. . . . . [AMENDED] (E) . . . . . 674
450:19-5-4. . . . . [AMENDED] . . . . . 2140
450:19-5-7. . . . . [REVOKED] (E) . . . . . 674
450:19-5-7. . . . . [REVOKED] . . . . . 2140
450:19-5-8. . . . . [REVOKED] (E) . . . . . 674
450:19-5-8. . . . . [REVOKED] . . . . . 2140
450:19-5-9. . . . . [REVOKED] (E) . . . . . 674

450:19-5-9. [REVOKED] 2140
450:19-5-10. [NEW] (E) 674
450:19-5-10. [NEW] 2140
450:19-7-6. [AMENDED] 2141
450:19-9-10. [AMENDED] 2142
450:19-11-1. [AMENDED] 2142
450:19-11-2. [AMENDED] 2143
450:19-11-3. [AMENDED] 2144
450:19-13-9. [AMENDED] 2144
450:19-13-20.1. [AMENDED] 2144
450:19-13-20.2. [AMENDED] 2145
450:19-13-25. [AMENDED] 2145
450:19-13-29. [AMENDED] 2145
450:19-13-30. [AMENDED] 2145
450:21-1-1. [AMENDED] 989
450:21-1-2. [AMENDED] 989
450:21-1-3. [AMENDED] 989
450:21-1-5. [AMENDED] 990
450:21-1-6. [AMENDED] 990
450:21-1-7. [AMENDED] 991
450:21-1-7.2. [AMENDED] 991
450:21-1-8. [AMENDED] 992
450:21-1-9. [AMENDED] 992
450:21-1-10. [AMENDED] 993
450:21-1-11. [AMENDED] 994
450:21-3-1. [AMENDED] 994
450:21-3-2. [AMENDED] 995
450:21-3-3. [AMENDED] 996
450:21-5-1. [AMENDED] 996
450:21-5-2. [AMENDED] 996
450:22-1-1. [AMENDED] 997
450:22-1-1.1. [AMENDED] 997
450:22-1-2. [REVOKED] 998
450:22-1-3. [AMENDED] 998
450:22-1-4. [AMENDED] 998
450:22-1-5. [AMENDED] 998
450:22-1-6. [AMENDED] 998
450:22-1-7. [AMENDED] 999
450:22-1-8. [AMENDED] 999
450:22-1-9. [AMENDED] 999
450:22-1-10. [AMENDED] 999
450:22-1-11. [AMENDED] 999
450:22-1-12. [AMENDED] 1000
450:22-1-13. [AMENDED] 1000
450:22-1-14. [AMENDED] 1001
450:22-1-15. [AMENDED] 1001
450:22-1-16. [AMENDED] 1002
450:23-1-2. [AMENDED] 1325
450:23-3-2. [AMENDED] 1327
450:23-3-3. [AMENDED] 1327
450:23-3-5. [AMENDED] 1327
450:23-3-6. [AMENDED] 1328
450:23-3-7. [AMENDED] 1328
450:23-3-8. [AMENDED] 1328
450:23-5-2. [AMENDED] 1329
450:23-5-3. [AMENDED] 1329
450:23-5-4. [AMENDED] 1329
450:23-5-7. [AMENDED] 1329
450:23-5-7.1. [NEW] 1330
450:23-5-8. [AMENDED] 1330
450:23-7-1. [REVOKED] (E) 676
450:23-7-1. [REVOKED] 1330
450:23-7-1.1. [NEW] (E) 677
450:23-7-1.1. [NEW] 1331
450:23-7-2. [REVOKED] (E) 677
450:23-7-2. [REVOKED] 1332
450:23-9-1. [AMENDED] 1332
450:23-9-2. [AMENDED] 1333
450:23-9-3. [AMENDED] 1333
450:23-11-1. [AMENDED] 1333
450:23-11-2. [AMENDED] 1334
450:23-13-1. [AMENDED] 1334
450:23-13-5. [AMENDED] 1334
450:23-19-2. [AMENDED] 1335
450:23-19-3. [AMENDED] 1335
450:23-21-2. [AMENDED] 1335
450:30-9-1. [AMENDED] 2146
450:30-9-2. [AMENDED] 2146
450:30-9-3. [AMENDED] 2146
450:30-9-4. [AMENDED] 2147
450:30-9-5. [AMENDED] 2148
450:30-9-6. [AMENDED] 2148
450:30-9-7. [AMENDED] 2148
450:30-9-8. [AMENDED] 2148
450:30-9.3.1. [NEW] 2147
450:50-1-1. [NEW] (E) 678
450:50-1-2. [NEW] (E) 678
450:50-1-3. [NEW] (E) 679
450:50-3-1. [NEW] (E) 679
450:50-3-2. [NEW] (E) 679
450:50-3-3. [NEW] (E) 679
450:50-3-4. [NEW] (E) 680
450:50-3-5. [NEW] (E) 680
450:50-3-6. [NEW] (E) 680
450:50-5-1. [NEW] (E) 680
450:50-5-2. [NEW] (E) 680
450:50-5-3. [NEW] (E) 681
450:50-5-4. [NEW] (E) 681
450:50-7-1. [NEW] (E) 682
450:50-7-2. [NEW] (E) 682
450:50-7-3. [NEW] (E) 682
450:50-7-4. [NEW] (E) 682
450:50-7-5. [NEW] (E) 682
450:50-9-1. [NEW] (E) 682
450:55-1-1. [NEW] (E) 683
450:55-1-2. [NEW] (E) 684
450:55-1-3. [NEW] (E) 685
450:55-3-1. [NEW] (E) 685
450:55-3-2. [NEW] (E) 685
450:55-3-3. [NEW] (E) 685
450:55-3-4. [NEW] (E) 685
450:55-3-5. [NEW] (E) 686
450:55-3-6. [NEW] (E) 686
450:55-3-7. [NEW] (E) 686
450:55-3-8. [NEW] (E) 687
450:55-3-9. [NEW] (E) 687
450:55-3-10. [NEW] (E) 687
450:55-5-1. [NEW] (E) 689
450:55-5-2. [NEW] (E) 689
450:55-5-3. [NEW] (E) 689
450:55-5-4. [NEW] (E) 689
450:55-5-5. [NEW] (E) 690
450:55-5-6. [NEW] (E) 690
450:55-5-7. [NEW] (E) 690
450:55-5-8. [NEW] (E) 691
450:55-5-9. [NEW] (E) 691
450:55-5-10. [NEW] (E) 691
450:55-5-11. [NEW] (E) 691
450:55-7-1. [NEW] (E) 692
450:55-9-1. [NEW] (E) 692
450:55-9-2. [NEW] (E) 693
450:55-9-3. [NEW] (E) 693
450:55-11-1. [NEW] (E) 693
450:55-11-2. [NEW] (E) 694

450:55-11-3. . . . . [NEW] (E) . . . . . 694
450:55-13-1. . . . . [NEW] (E) . . . . . 694
450:55-13-2. . . . . [NEW] (E) . . . . . 695
450:55-15-1. . . . . [NEW] (E) . . . . . 695
450:55-15-2. . . . . [NEW] (E) . . . . . 695
450:55-17-1. . . . . [NEW] (E) . . . . . 695
450:55-17-2. . . . . [NEW] (E) . . . . . 695
450:55-17-3. . . . . [NEW] (E) . . . . . 696
450:55-19-1. . . . . [NEW] (E) . . . . . 696
450:55-19-2. . . . . [NEW] (E) . . . . . 696
450:55-21-1. . . . . [NEW] (E) . . . . . 697
450:55-23-1. . . . . [NEW] (E) . . . . . 697
450:55-23-2. . . . . [NEW] (E) . . . . . 697
460:2-9-4. . . . . [AMENDED] . . . . . 2815
460:10-9-5. . . . . [AMENDED] . . . . . 2816
460:10-15-3. . . . . [AMENDED] . . . . . 2816
460:20-33-12. . . . . [AMENDED] . . . . . 2817
460:25-9-5. . . . . [AMENDED] . . . . . 2818
460:25-10-9. . . . . [AMENDED] . . . . . 2818
460:25-10-10. . . . . [AMENDED] . . . . . 2818
460:25-10-12. . . . . [AMENDED] . . . . . 2818
460:30-1-1. . . . . [NEW] . . . . . 2819
460:30-1-2. . . . . [NEW] . . . . . 2819
460:30-1-3. . . . . [NEW] . . . . . 2819
460:30-1-4. . . . . [NEW] . . . . . 2819
460:30-3-1. . . . . [NEW] . . . . . 2820
460:30-3-2. . . . . [NEW] . . . . . 2820
460:30-3-3. . . . . [NEW] . . . . . 2820
460:30-3-4. . . . . [NEW] . . . . . 2821
460:30-3-5. . . . . [NEW] . . . . . 2821
460:30-3-6. . . . . [NEW] . . . . . 2821
460:30-3-7. . . . . [NEW] . . . . . 2821
460:30-3-8. . . . . [NEW] . . . . . 2822
460:30-3-9. . . . . [NEW] . . . . . 2823
460:30-3-10. . . . . [NEW] . . . . . 2823
460:30-3-11. . . . . [NEW] . . . . . 2824
460:30-5-1. . . . . [NEW] . . . . . 2824
460:30-5-2. . . . . [NEW] . . . . . 2824
460:30-5-3. . . . . [NEW] . . . . . 2824
460:30-5-4. . . . . [NEW] . . . . . 2824
460:30-5-5. . . . . [NEW] . . . . . 2824
460:30-5-6. . . . . [NEW] . . . . . 2824
460:30-5-7. . . . . [NEW] . . . . . 2824
460:30-5-8. . . . . [NEW] . . . . . 2824
460:30-5-9. . . . . [NEW] . . . . . 2825
460:30-5-10. . . . . [NEW] . . . . . 2825
460:30-5-11. . . . . [NEW] . . . . . 2825
460:30-5-12. . . . . [NEW] . . . . . 2825
460:30-5-13. . . . . [NEW] . . . . . 2825
460:30-5-14. . . . . [NEW] . . . . . 2825
460:30-5-15. . . . . [NEW] . . . . . 2825
460:30-5-16. . . . . [NEW] . . . . . 2825
460:30-5-17. . . . . [NEW] . . . . . 2825
460:30-5-18. . . . . [NEW] . . . . . 2826
460:30-5-19. . . . . [NEW] . . . . . 2826
460:30-5-20. . . . . [NEW] . . . . . 2826
460:30-5-21. . . . . [NEW] . . . . . 2826
460:30-5-22. . . . . [NEW] . . . . . 2826
460:30-5-23. . . . . [NEW] . . . . . 2826
460:30-5-24. . . . . [NEW] . . . . . 2826
465:10-1-2. . . . . [AMENDED] . . . . . 1003
465:10-1-3. . . . . [AMENDED] . . . . . 1003
465:10-1-4. . . . . [AMENDED] . . . . . 1003
465:10-1-5. . . . . [AMENDED] . . . . . 1003
465:10-1-6. . . . . [AMENDED] . . . . . 1003
465:10-1-7. . . . . [AMENDED] . . . . . 1003
465:10-3-3. . . . . [AMENDED] . . . . . 1003
465:10-7-3. . . . . [AMENDED] . . . . . 1004
465:15-1-2. . . . . [AMENDED] . . . . . 1004
465:15-3-14. . . . . [AMENDED] . . . . . 1005
465:15-7-1. . . . . [AMENDED] . . . . . 1006
465:15-7-2. . . . . [AMENDED] . . . . . 1006
485:10-5-6. . . . . [AMENDED] . . . . . 1007
485:10-7-1. . . . . [AMENDED] . . . . . 1007
485:10-7-4. . . . . [AMENDED] . . . . . 1008
485:10-9-1. . . . . [AMENDED] . . . . . 1008
485:10-9-4. . . . . [AMENDED] . . . . . 1009
485:10-10-3. . . . . [AMENDED] . . . . . 1009
485:10-10-8. . . . . [AMENDED] (E) . . . . . 115
485:10-10-8. . . . . [AMENDED] . . . . . 1009
485:10-11-3. . . . . [AMENDED] . . . . . 1010
485:10-15-6. . . . . [AMENDED] . . . . . 1011
485:10-15-9. . . . . [AMENDED] . . . . . 1009
485:10-19-4. . . . . [AMENDED] . . . . . 1011
490:1-1-2. . . . . [AMENDED] . . . . . 1739
490:1-3-6. . . . . [AMENDED] . . . . . 1740
490:10-1-2. . . . . [AMENDED] . . . . . 1742
490:10-1-4. . . . . [AMENDED] . . . . . 1742
490:10-5-2. . . . . [AMENDED] . . . . . 1743
490:10-8-5. . . . . [AMENDED] . . . . . 1743
490:10-8-14. . . . . [AMENDED] . . . . . 1743
515:1-1-1. . . . . [NEW] (E) . . . . . 613
515:1-1-1. . . . . [NEW] . . . . . 1744
515:1-1-2. . . . . [RESERVED] (E) . . . . . 613
515:1-1-2. . . . . [NEW] . . . . . 1745
515:1-3-1. . . . . [NEW] (E) . . . . . 613
515:1-3-1. . . . . [NEW] . . . . . 1745
515:1-3-2. . . . . [NEW] (E) . . . . . 613
515:1-3-2. . . . . [NEW] . . . . . 1745
515:1-5-1. . . . . [NEW] (E) . . . . . 613
515:1-5-1. . . . . [NEW] . . . . . 1745
515:1-5-2. . . . . [NEW] (E) . . . . . 614
515:1-5-2. . . . . [NEW] . . . . . 1746
515:1-5-3. . . . . [NEW] (E) . . . . . 614
515:1-5-3. . . . . [NEW] . . . . . 1746
515:1-5-4. . . . . [NEW] (E) . . . . . 614
515:1-5-4. . . . . [NEW] . . . . . 1746
515:1-7-1. . . . . [NEW] (E) . . . . . 614
515:1-7-1. . . . . [NEW] . . . . . 1746
515:1-7-2. . . . . [NEW] (E) . . . . . 614
515:1-7-2. . . . . [NEW] . . . . . 1746
515:1-9-1. . . . . [NEW] (E) . . . . . 615
515:1-9-1. . . . . [NEW] . . . . . 1747
515:1-9-2. . . . . [NEW] (E) . . . . . 615
515:1-9-2. . . . . [NEW] . . . . . 1747
515:1-9-3. . . . . [NEW] (E) . . . . . 615
515:1-9-3. . . . . [NEW] . . . . . 1747
530:10-1-2. . . . . [AMENDED] . . . . . 2464
530:10-1-6. . . . . [AMENDED] . . . . . 2467
530:10-3-22. . . . . [AMENDED] . . . . . 2468
530:10-3-52. . . . . [AMENDED] . . . . . 2468
530:10-7-14. . . . . [AMENDED] . . . . . 2468
530:10-7-16. . . . . [NEW] . . . . . 2469
530:10-7-22. . . . . [AMENDED] . . . . . 2469
530:10-13-2. . . . . [AMENDED] . . . . . 2469
530:10-13-70. . . . . [AMENDED] . . . . . 2470
530:10-17-31. . . . . [AMENDED] . . . . . 2470
530:10-17-173. . . . . [AMENDED] . . . . . 2471
530:10-23-1. . . . . [NEW] . . . . . 2471
530:10-23-2. . . . . [NEW] . . . . . 2471
530:10-23-3. . . . . [NEW] . . . . . 2471
530:10, App. B. . . . . [NEW] . . . . . 2472
535:10-3-1.2. . . . . [AMENDED] . . . . . 2473
535:10-3-4. . . . . [AMENDED] . . . . . 2474

535:10-5-2. [AMENDED] 2475
535:10-5-2.1. [NEW] 2475
535:10-9-5. [NEW] 2476
535:10-11-1. [NEW] (E) 19
535:10-11-1. [NEW] 2475
535:10-11-2. [NEW] (E) 19
535:10-11-2. [NEW] 2475
535:10-11-3. [NEW] (E) 20
535:10-11-3. [NEW] 2475
535:10-11-4. [NEW] (E) 20
535:10-11-4. [NEW] 2475
535:10-11-5. [NEW] (E) 20
535:10-11-5. [NEW] 2475
535:10-11-6. [NEW] (E) 20
535:10-11-6. [NEW] 2476
535:15-3-2. [AMENDED] 2477
535:15-3-6. [AMENDED] 2477
535:15-3-12. [AMENDED] 2478
535:15-3-12.1. [AMENDED] 2478
535:15-3-21. [AMENDED] 2479
535:15-5-1. [AMENDED] 2480
535:15-5-2. [AMENDED] 2480
535:15-5-10. [AMENDED] 2481
535:15-5-18. [AMENDED] 2482
535:15-6-1. [NEW] 2482
535:15-6-2. [NEW] 2482
535:15-6-3. [NEW] 2482
535:15-6-4. [NEW] 2482
535:15-6-5. [NEW] 2483
535:15-6-6. [NEW] 2484
535:15-6-7. [NEW] 2484
535:15-6-8. [NEW] 2485
535:15-6-9. [NEW] 2485
535:15-6-10. [NEW] 2486
535:15-6-11. [NEW] 2486
535:15-6-12. [NEW] 2487
535:15-6-13. [NEW] 2487
535:15-6-14. [NEW] 2487
535:15-6-15. [NEW] 2487
535:15-6-16. [NEW] 2487
535:15-6-17. [NEW] 2488
535:15-6-18. [NEW] 2488
535:15-6-19. [NEW] 2488
535:20-3-1. [AMENDED] 2488
535:25-7-6. [AMENDED] 2489
545:15-1-1. [AMENDED] 1336
545:15-1-2. [AMENDED] 1336
545:15-1-3.1. [REVOKED] 1337
545:15-1-6. [REVOKED] 1337
545:15-1-7. [REVOKED] 1338
545:15-1-8. [REVOKED] 1338
545:15-1-9. [REVOKED] 1338
550:1-1-6. [AMENDED] 1339
550:1-3-3. [AMENDED] 1339
550:1-3-4. [AMENDED] 1340
550:1-3-5. [AMENDED] 1340
550:1-7-2.1. [NEW] 1342
550:1-7-4. [AMENDED] 1341
550:1-7-5. [NEW] 1342
550:10-1-2. [AMENDED] 1343
550:10-1-4. [AMENDED] 1348
550:15-1-2. [AMENDED] 1349
550:20-1-2. [AMENDED] 1351
565:10-5-1. [AMENDED] 2490
565:10-5-4. [AMENDED] 2490
565:10-5-4.1. [NEW] 2490
565:10-5-4.2. [NEW] 2490
565:10-5-5. [AMENDED] 2490
565:10-7-1. [AMENDED] 2490
565:10-9-1. [AMENDED] 2490
565:10-9-5. [AMENDED] 2491
565:10-11-1. [AMENDED] 2491
565:10-11-4. [AMENDED] 2492
565:10-11-6. [AMENDED] 2492
565:10-19-2. [NEW] 2493
565:10-23-10. [NEW] 2493
565:10-27-2. [AMENDED] 2493
570:10-1-36. [NEW] 2494
570:10-1-37. [NEW] 2494
575:1-1-2. [AMENDED] 1013
575:1-1-3. [AMENDED] 1014
575:1-1-4. [AMENDED] 1015
575:10-1-2. [AMENDED] 1017
575:10-1-3. [AMENDED] 1019
575:10-1-5. [AMENDED] 1020
575:10-1-6. [AMENDED] 1021
575:10-1-7. [AMENDED] 1022
575:10-1-8. [AMENDED] 1023
575:10-1-10. [AMENDED] 1024
580:10-1-1. [REVOKED] (E) 313
580:10-1-1. [REVOKED] 2495
580:10-1-2. [REVOKED] (E) 313
580:10-1-2. [REVOKED] 2495
580:10-1-3. [REVOKED] (E) 313
580:10-1-3. [REVOKED] 2495
580:10-1-4. [REVOKED] (E) 315
580:10-1-4. [REVOKED] 2497
580:10-2-1. [NEW] (E) 315
580:10-2-1. [NEW] 2497
580:10-2-2. [NEW] (E) 315
580:10-2-2. [NEW] 2497
580:10-2-3. [NEW] (E) 315
580:10-2-3. [NEW] 2498
580:10-2-4. [NEW] (E) 315
580:10-2-4. [NEW] 2498
580:10-2-5. [NEW] (E) 315
580:10-2-5. [NEW] 2498
580:10-5-1. [NEW] (E) 316
580:10-5-1. [NEW] 2498
580:10-5-2. [NEW] 2498
580:10-5-3. [NEW] (E) 316
580:10-5-3. [NEW] 2498
580:10-5-4. [NEW] (E) 316
580:10-5-4. [NEW] 2499
580:10-5-5. [NEW] (E) 316
580:10-5-5. [NEW] 2499
580:10-5-6. [NEW] (E) 316
580:10-5-6. [NEW] 2499
580:10-5-7. [NEW] (E) 317
580:10-5-7. [NEW] 2500
580:10-5-8. [NEW] (E) 317
580:10-5-8. [NEW] 2500
580:10-5-9. [NEW] 2500
580:10-7-1. [NEW] (E) 317
580:10-7-1. [NEW] 2500
580:10-7-2. [NEW] (E) 317
580:10-7-2. [NEW] 2500
580:10-7-3. [NEW] (E) 318
580:10-7-3. [NEW] 2500
580:10-9-1. [NEW] 2501
580:10-9-2. [NEW] 2501
580:10-9-3. [NEW] 2501
580:10-9-4. [NEW] 2502
580:10-9-8. [NEW] (E) 318

580:10-9-8. [NEW] 2502
580:10-9-9. [NEW] (E) 318
580:10-9-9. [NEW] 2502
580:10-9-10. [NEW] (E) 318
580:10-9-10. [NEW] 2502
580:15-2-2. [AMENDED] 2503
580:15-2-6. [AMENDED] 2505
580:15-2-7. [AMENDED] 2505
580:15-2-11. [AMENDED] 2506
580:15-4-2. [AMENDED] 2506
580:15-4-5. [AMENDED] 2506
580:15-4-7. [AMENDED] 2507
580:15-4-8. [AMENDED] 2508
580:15-4-10. [AMENDED] 2508
580:15-4-11. [AMENDED] 2508
580:15-4-12. [AMENDED] 2509
580:15-4-13. [AMENDED] 2509
580:15-4-14. [AMENDED] 2510
580:15-4-18. [AMENDED] 2510
580:15-4-19. [AMENDED] 2511
580:15-4-20. [AMENDED] 2512
580:15-6-1. [AMENDED] 2512
580:15-6-2. [AMENDED] 2512
580:15-6-3. [AMENDED] 2513
580:15-6-4. [AMENDED] 2513
580:15-6-5. [AMENDED] 2513
580:15-6-8. [AMENDED] 2514
580:15-6-9. [AMENDED] 2514
580:15-6-10. [AMENDED] 2515
580:15-6-11. [AMENDED] 2515
580:15-6-13. [AMENDED] 2516
580:15-6-15. [AMENDED] 2516
580:15-6-17. [AMENDED] 2516
580:15-6-18. [NEW] 2516
580:20-1-1. [AMENDED] 2518
580:20-1-2. [AMENDED] 2518
580:20-1-3. [AMENDED] 2518
580:20-1-4. [AMENDED] 2518
580:20-1-5. [AMENDED] 2519
580:20-1-6. [AMENDED] 2519
580:20-1-7. [AMENDED] 2519
580:20-1-8. [REVOKED] 2520
580:20-1-8.1. [NEW] 2520
580:20-1-9. [AMENDED] 2520
580:20-1-12. [AMENDED] 2521
580:20-1-13. [AMENDED] 2521
580:20-1-16. [AMENDED] 2522
580:20-1-18. [AMENDED] 2522
580:20-3-2. [AMENDED] 2522
580:20-3-4. [AMENDED] 2522
580:20-3-5. [AMENDED] 2524
580:20-3-6. [AMENDED] 2524
580:20-3-7. [AMENDED] 2524
580:20-5-2. [AMENDED] 2525
580:20-7-2. [AMENDED] 2525
580:20-7-4. [AMENDED] 2526
580:20-7-5. [AMENDED] 2526
580:20-9-2. [AMENDED] 2526
580:20-15-2. [AMENDED] 2526
580:20-17-1. [NEW] 2527
580:20-17-2. [NEW] 2527
580:20-17-3. [NEW] 2527
580:20-17-4. [NEW] 2528
580:20-17-5. [NEW] 2528
580:20-17-6. [NEW] 2528
580:20-17-7. [NEW] 2529
580:20-17-8. [NEW] 2529
580:20-17-9. [NEW] 2529
580:20-19-1. [NEW] 2530
580:20-19-2. [NEW] 2530
580:20-19-3. [NEW] 2531
580:20-19-4. [NEW] 2531
580:20-19-5. [NEW] 2531
580:20-19-6. [NEW] 2532
580:20-19-7. [NEW] 2532
580:20-19-8. [NEW] 2532
580:20-19-9. [NEW] 2532
580:20-19-10. [NEW] 2533
580:20-19-11. [NEW] 2533
580:20-19-12. [NEW] 2533
580:20-19-13. [NEW] 2534
580:20-21-1. [NEW] 2534
580:20-21-2. [NEW] 2534
580:20-21-3. [NEW] 2535
580:20-21-4. [NEW] 2535
580:20-21-5. [NEW] 2535
580:20-21-6. [NEW] 2535
580:20-21-7. [NEW] 2536
580:20-21-8. [NEW] 2536
580:30-1-1. [REVOKED] 2537
580:30-1-2. [REVOKED] 2537
580:30-1-3. [REVOKED] 2537
580:30-1-4. [REVOKED] 2537
580:30-1-5. [REVOKED] 2537
580:30-1-6. [REVOKED] 2537
580:30-1-7. [REVOKED] 2538
580:30-1-8. [REVOKED] 2538
580:30-1-9. [REVOKED] 2538
580:30-1-10. [REVOKED] 2539
580:35-1-1. [AMENDED] 2539
580:35-1-2. [AMENDED] 2540
580:35-1-3. [AMENDED] 2542
580:35-1-4. [NEW] 2542
580:35-1-5. [NEW] 2542
580:35-1-6. [NEW] 2543
580:35-1-7. [NEW] 2543
580:35-1-8. [NEW] 2543
580:35-1-9. [NEW] 2544
580:35-1-10. [NEW] 2544
580:35, App. A. [REVOKED] 2546
580:35, App. B. [REVOKED] 2547
580:65-1-1. [AMENDED] (E) 546
580:65-1-1. [AMENDED] 2548
580:65-1-2. [AMENDED] (E) 546
580:65-1-2. [AMENDED] 2548
580:65-1-3. [REVOKED] (E) 547
580:65-1-3. [REVOKED] 2549
580:65-1-4. [REVOKED] (E) 547
580:65-1-4. [REVOKED] 2549
580:65-1-5. [REVOKED] (E) 547
580:65-1-5. [REVOKED] 2549
580:65-1-6. [REVOKED] (E) 548
580:65-1-6. [REVOKED] 2550
580:65-1-7. [NEW] (E) 548
580:65-1-7. [NEW] 2550
580:65-1-8. [NEW] (E) 548
580:65-1-8. [NEW] 2550
580:65-1-9. [NEW] (E) 548
580:65-1-9. [NEW] 2550
580:65-1-10. [NEW] (E) 548
580:65-1-10. [NEW] 2550
580:65-3-1. [NEW] (E) 548
580:65-3-1. [NEW] 2550
580:65-3-2. [NEW] (E) 549

580:65-3-2. [NEW] 2551
580:65-3-3. [NEW] (E) 550
580:65-3-3. [NEW] 2551
580:65-3-4. [NEW] (E) 550
580:65-3-4. [NEW] 2552
580:65-5-1. [NEW] (E) 550
580:65-5-1. [NEW] 2552
580:65-5-2. [NEW] (E) 551
580:65-5-2. [NEW] 2552
580:65-5-3. [NEW] (E) 551
580:65-5-3. [NEW] 2553
580:65-5-4. [NEW] (E) 552
580:65-5-4. [NEW] 2553
580:65-5-5. [NEW] (E) 552
580:65-5-5. [NEW] 2554
580:65-7-1. [NEW] (E) 552
580:65-7-1. [NEW] 2554
580:65-7-2. [NEW] (E) 552
580:65-7-2. [NEW] 2554
580:65-7-3. [NEW] (E) 552
580:65-7-3. [NEW] 2554
580:65-7-4. [NEW] (E) 553
580:65-7-4. [NEW] 2554
580:65-7-5. [NEW] (E) 553
580:65-7-5. [NEW] 2554
580:65-7-6. [NEW] (E) 553
580:65-7-6. [NEW] 2555
580:65-7-7. [NEW] (E) 553
580:65-7-7. [NEW] 2555
580:65-9-1. [NEW] (E) 554
580:65-9-1. [NEW] 2555
580:65-9-2. [NEW] (E) 554
580:65-9-2. [NEW] 2555
580:70-1-1. [NEW] (E) 555
580:70-1-1. [NEW] 2556
580:70-1-2. [NEW] (E) 555
580:70-1-2. [NEW] 2556
580:70-1-3. [NEW] (E) 555
580:70-1-3. [NEW] 2557
580:70-1-4. [NEW] (E) 555
580:70-1-4. [NEW] 2557
580:70-3-1. [NEW] (E) 556
580:70-3-1. [NEW] 2557
580:70-3-2. [NEW] (E) 556
580:70-3-2. [NEW] 2558
580:70-3-3. [NEW] (E) 556
580:70-3-3. [NEW] 2558
580:70-3-4. [NEW] (E) 556
580:70-3-4. [NEW] 2558
580:70-3-5. [NEW] (E) 556
580:70-3-5. [NEW] 2558
580:70-3-6. [NEW] (E) 557
580:70-3-6. [NEW] 2558
580:70-5-1. [NEW] (E) 557
580:70-5-1. [NEW] 2558
580:70-5-2. [NEW] (E) 557
580:70-5-2. [NEW] 2559
590:1-1-5. [AMENDED] 1748
590:1-1-6. [AMENDED] 1748
590:10-1-4. [AMENDED] 1751
590:10-1-9. [AMENDED] 1751
590:10-1-11. [AMENDED] 1751
590:10-1-14. [NEW] (E) 319
590:10-1-14. [NEW] (E) 2809
590:10-1-15. [NEW] 1751
590:10-3-6. [AMENDED] 1751
590:10-3-10. [AMENDED] 1752
590:10-7-3. [AMENDED] (E) 320
590:10-7-3. [AMENDED] 1752
590:10-7-9. [AMENDED] 1752
590:10-7-15. [AMENDED] 1753
590:10-9-3. [AMENDED] 1753
590:10-11-1. [AMENDED] 1753
590:15-1-16. [NEW] 2559
590:15-1-16. [REVOKED] (E) 2810
590:25-1-3. [AMENDED] 1754
590:25-3-1. [AMENDED] 1756
590:25-3-3. [AMENDED] 1756
590:25-5-1. [AMENDED] 1756
590:25-5-8. [AMENDED] 1756
590:25-5-10. [AMENDED] 1756
590:25-9-8. [AMENDED] 1757
590:25-9-9. [AMENDED] 1757
590:25-9-13. [AMENDED] 1757
590:25-9-16. [AMENDED] 1757
590:25-9-19. [NEW] 1757
590:25-13-1. [AMENDED] 1757
590:25-13-2. [AMENDED] 1757
590:25-13-3. [AMENDED] 1757
590:30-1-4. [AMENDED] 1758
590:30-1-5. [AMENDED] 1759
590:30-1-6. [AMENDED] 1759
590:35-5-1. [AMENDED] 1760
590:35-5-3. [AMENDED] 1760
590:35-7-3. [AMENDED] 1760
590:35-13-1. [AMENDED] 1761
590:35-21-1. [AMENDED] 1761
590:35-21-3. [AMENDED] 1761
590:35-21-4. [AMENDED] 1761
595:10-1-3. [AMENDED] 2703
595:10-1-4. [AMENDED] 2704
595:10-1-18. [AMENDED] 2704
595:10-1-27. [AMENDED] 2705
595:10-1-35. [AMENDED] 2706
595:10-3-7. [AMENDED] 2706
595:10-3-8. [AMENDED] 2707
595:10-3-9. [AMENDED] 2707
595:10-9-5. [AMENDED] 2710
595:10-9-15. [AMENDED] 2711
595:10-11-7. [AMENDED] 2711
595:10-11-8. [AMENDED] 2712
595:10-11-9. [AMENDED] 2712
595:10-11-14. [AMENDED] 2712
595:10-13-1. [NEW] 2713
595:10-13-2. [NEW] 2713
595:10-13-3. [NEW] 2713
595:10-13-4. [NEW] 2713
595:10-13-5. [NEW] 2714
595:10-13-6. [NEW] 2715
595:10-13-7. [RESERVED] 2716
595:10-13-8. [NEW] 2716
595:10-13-9. [NEW] 2716
595:10-13-10. [RESERVED] 2717
595:10-13-11. [NEW] 2717
595:25-5-1. [AMENDED] 2717
595:25-5-3. [AMENDED] 2718
595:25-7-2. [AMENDED] 2719
595:35-1-6. [AMENDED] 2721
595:40-1-4. [AMENDED] 2723
595:40-1-7. [AMENDED] 2724
595:40-1-9. [AMENDED] 2724
595:40-5-5. [AMENDED] 2726
595:40-5-7. [AMENDED] 2727
600:15-1-2. [AMENDED] (E) 557

600:15-1-2. [AMENDED] 2560
600:15-1-3. [REVOKED] (E) 558
600:15-1-3. [REVOKED] 2560
600:15-1-4. [AMENDED] (E) 558
600:15-1-4. [AMENDED] 2561
600:15-1-5. [AMENDED] (E) 559
600:15-1-5. [AMENDED] 2561
600:15-1-6. [AMENDED] (E) 559
600:15-1-6. [AMENDED] 2562
605:1-1-4. [AMENDED] 2562
605:10-1-2. [AMENDED] 2564
605:10-1-4. [AMENDED] 2565
605:10-7-1. [AMENDED] 2565
605:10-7-8.2. [AMENDED] 2565
605:10-9-1. [AMENDED] 2566
605:10-9-4. [AMENDED] 2566
605:10-11-2. [AMENDED] 2567
605:10-15-4. [AMENDED] 2567
605:10-17-1. [AMENDED] 2568
605:10-17-4. [AMENDED] 2568
605:10, App. B. [REVOKED] 2569
605:10, App. B. [NEW] 2569
610:1-5-1. [REVOKED] 1352
610:1-5-2. [REVOKED] 1352
610:1-5-3. [REVOKED] 1353
610:1-5-4. [REVOKED] 1353
610:1-5-5. [REVOKED] 1353
610:1-5-6. [REVOKED] 1353
610:1-11-1. [NEW] 2150
610:1-11-2. [NEW] 2150
610:1-11-3. [NEW] 2150
610:1-11-4. [NEW] 2151
610:1-11-5. [NEW] 2151
610:1-11-6. [NEW] 2151
610:1-11-7. [NEW] 2152
610:1-11-8. [NEW] 2153
610:1-11-9. [NEW] 2153
610:1-11-10. [NEW] 2153
610:1-11-11. [NEW] 2153
610:1-11-12. [NEW] 2154
610:1-11-13. [NEW] 2154
610:1-11-14. [NEW] 2154
610:1-11-15. [NEW] 2154
610:1-11-16. [NEW] 2154
610:1-11-17. [NEW] 2154
610:25-1-3. [AMENDED] 2570
610:25-1-4. [AMENDED] 2570
610:25-1-7. [AMENDED] 2572
610:25-13-1. [REVOKED] 1354
610:25-13-2. [REVOKED] 1354
610:25-13-3. [REVOKED] 1354
610:25-13-4. [REVOKED] 1354
610:25-13-5. [REVOKED] 1354
610:25-13-6. [REVOKED] 1355
610:25-13-7. [REVOKED] 1355
610:25-13-8. [REVOKED] 1355
610:25-23-2. [AMENDED] 2573
610:25-23-3. [AMENDED] 2573
610:25-23-4. [AMENDED] 2573
610:25-23-5. [AMENDED] 2574
610:25-23-8. [AMENDED] 2575
612:1-3-3. [AMENDED] 1762
612:1-3-10. [AMENDED] 1762
612:1-5-2. [AMENDED] 1763
612:1-5-3. [AMENDED] 1763
612:1-5-4.1. [AMENDED] 1764
612:1-7-3. [AMENDED] 1764
612:1-11-16. [AMENDED] 1765
612:1-13-3. [AMENDED] 1768
612:1-13-5. [AMENDED] 1768
612:1-13-6. [AMENDED] 1768
612:3-1-2. [AMENDED] 1769
612:3-1-3. [AMENDED] 1770
612:3-3-2. [REVOKED] 1770
612:3-5-16. [AMENDED] 1771
612:10-1-2. [AMENDED] 1772
612:10-1-3. [AMENDED] 1776
612:10-1-6. [AMENDED] 1776
612:10-1-7. [AMENDED] 1780
612:10-3-4. [AMENDED] 1782
612:10-3-5. [AMENDED] 1782
612:10-5-22. [AMENDED] 1782
612:10-7-1. [AMENDED] 1783
612:10-7-5. [AMENDED] 1784
612:10-7-6. [AMENDED] 1785
612:10-7-33. [AMENDED] 1786
612:10-7-50. [AMENDED] 1786
612:10-7-51. [AMENDED] 1787
612:10-7-54. [AMENDED] 1788
612:10-7-55. [AMENDED] 1789
612:10-7-56. [AMENDED] 1789
612:10-7-58. [AMENDED] 1790
612:10-7-59. [AMENDED] 1791
612:10-7-87. [AMENDED] 1791
612:10-7-102. [AMENDED] 1792
612:10-7-152. [AMENDED] 1792
612:10-7-157. [AMENDED] 1792
612:10-7-159. [AMENDED] 1792
612:10-7-160. [AMENDED] 1793
612:10-7-162. [AMENDED] 1793
612:10-7-179. [AMENDED] 1793
612:10-7-180. [AMENDED] 1793
612:10-7-182. [AMENDED] 1794
612:10-7-183. [AMENDED] 1794
612:10-7-184. [AMENDED] 1794
612:10-7-185. [AMENDED] 1795
612:10-7-186. [NEW] 1795
612:10-7-187. [NEW] 1795
612:10-7-188. [NEW] 1796
612:10-7-205. [AMENDED] 1796
612:10-7-206. [AMENDED] 1796
612:10-7-220. [AMENDED] 1797
612:10-7-232. [AMENDED] 1798
612:10-7-234. [AMENDED] 1798
612:10-7-244. [AMENDED] 1799
612:10-11-19. [AMENDED] 1799
612:10-11-38. [AMENDED] 1799
612:10-11-50. [AMENDED] 1800
612:10-13-2. [AMENDED] 1800
612:10-13-4. [AMENDED] 1800
612:10-15-1. [REVOKED] 1801
612:10-15-2. [REVOKED] 1801
612:10-15-3. [REVOKED] 1802
612:10-15-4. [REVOKED] 1802
612:10-15-5. [REVOKED] 1802
612:10-15-6. [REVOKED] 1803
612:15-1-4. [REVOKED] 1803
612:15-3-6. [AMENDED] 1804
612:20-2-13. [AMENDED] 1805
612:20-2-17. [AMENDED] 1805
612:20-3-8. [AMENDED] 1806
612:20-5-7. [AMENDED] 1806
612:20-7-8. [AMENDED] 1807
612:25-2-5. [AMENDED] 1808

612:25-4-2. [AMENDED] 1811
612:25-4-53. [AMENDED] 1811
612:25-4-55. [AMENDED] 1811
612:25-4-59. [AMENDED] 1812
612:25-6-21. [AMENDED] 1812
612:25-6-33. [AMENDED] 1813
650:1-1-1. [AMENDED] 2728
650:1-1-1.1. [NEW] 2728
650:1-1-2. [AMENDED] 2729
650:1-1-3. [AMENDED] 2729
650:1-1-4. [AMENDED] 2729
650:1-1-5. [REVOKED] 2730
650:1-1-6. [AMENDED] 2730
650:1-3-1. [AMENDED] 2730
650:1-3-2. [AMENDED] 2731
650:1-3-3. [AMENDED] 2731
650:1-3-4. [AMENDED] 2731
650:10-1-5. [AMENDED] 2732
650:10-1-6. [AMENDED] 2732
650:10-1-7. [AMENDED] 2732
650:10-1-8. [AMENDED] 2732
650:10-1-9. [AMENDED] 2733
650:10-1-11. [AMENDED] 2733
650:10-1-12. [AMENDED] 2733
650:10-1-14. [AMENDED] 2734
650:15-1-4. [AMENDED] 2734
650:15-1-5. [AMENDED] 2735
650:15-1-8. [AMENDED] 2735
650:15-1-9. [AMENDED] 2735
650:15-1-10. [AMENDED] 2735
650:15-1-11. [AMENDED] 2735
650:15-1-14. [AMENDED] 2736
650:20-1-5. [AMENDED] 2736
650:20-1-6. [AMENDED] 2737
650:20-1-9. [AMENDED] 2737
650:20-1-10. [AMENDED] 2737
650:20-1-14. [AMENDED] 2737
650:25-1-5. [AMENDED] 2738
650:25-1-7. [AMENDED] 2738
650:25-1-8. [AMENDED] 2738
650:25-1-9. [AMENDED] 2738
650:25-1-11. [AMENDED] 2738
650:25-1-14. [AMENDED] 2739
650:30-1-5. [AMENDED] 2739
650:30-1-8. [AMENDED] 2740
650:30-1-10. [AMENDED] 2740
650:30-1-11. [AMENDED] 2740
650:30-1-13. [AMENDED] 2740
650:35-1-5. [AMENDED] 2741
650:35-1-8. [AMENDED] 2741
650:35-1-10. [AMENDED] 2741
650:37-1-5. [AMENDED] 2742
650:37-1-8. [AMENDED] 2742
650:37-1-10. [AMENDED] 2742
655:10-7-26. [AMENDED] 2576
655:10-13-3. [AMENDED] 2577
655:25-1-2. [AMENDED] 2578
655:25-1-5. [AMENDED] 2579
655:25-3-1. [AMENDED] 2579
655:25-3-2. [AMENDED] 2579
655:25-3-3. [AMENDED] 2579
655:25-5-1. [REVOKED] 2579
655:25-5-2. [AMENDED] 2579
655:25-7-1. [REVOKED] 2580
655:25-7-2. [REVOKED] 2580
655:25-9-1. [REVOKED] 2580
710:1-5-10. [AMENDED] 2581
710:1-5-13. [AMENDED] 2582
710:1-5-22. [AMENDED] 2582
710:1-5-70. [AMENDED] 2582
710:1-5-71. [AMENDED] 2582
710:1-5-72. [AMENDED] 2582
710:1-5-80. [NEW] (E) 749
710:1-5-80. [NEW] 2583
710:1-5-81. [NEW] (E) 749
710:1-5-81. [NEW] 2583
710:1-5-82. [NEW] (E) 749
710:1-5-82. [NEW] 2583
710:1-5-83. [NEW] (E) 749
710:1-5-83. [NEW] 2583
710:1-5-84. [NEW] (E) 750
710:1-5-84. [NEW] 2584
710:1-5-85. [NEW] (E) 750
710:1-5-85. [NEW] 2584
710:1-5-86. [NEW] (E) 750
710:1-5-86. [NEW] 2584
710:1-5-87. [NEW] (E) 751
710:1-5-87. [NEW] 2585
710:1-5-88. [NEW] (E) 751
710:1-5-88. [NEW] 2585
710:1-5-89. [NEW] (E) 751
710:1-5-89. [NEW] 2585
710:1-5-90. [NEW] (E) 751
710:1-5-90. [NEW] 2585
710:1-5-91. [NEW] (E) 751
710:1-5-91. [NEW] 2585
710:1-5-92. [NEW] (E) 752
710:1-5-92. [NEW] 2585
710:1-5-93. [NEW] (E) 752
710:1-5-93. [NEW] 2586
710:10-6-1. [NEW] 2155
710:10-6-2. [NEW] 2155
710:10-6-3. [NEW] 2155
710:10-6-4. [NEW] 2155
710:10-6-5. [NEW] 2155
710:10-6-6. [NEW] 2155
710:10-6-7. [NEW] 2155
710:10-6-8. [NEW] 2155
710:10-6-9. [NEW] 2155
710:10-6-10. [NEW] 2156
710:10-9-1. [AMENDED] 2156
710:10-9-3. [AMENDED] 2157
710:10-9-7. [AMENDED] 2157
710:10-9-19. [AMENDED] 2158
710:20-3-2. [AMENDED] 2586
710:20-3-3. [AMENDED] 2586
710:20-5-1. [AMENDED] 2587
710:20-5-9. [NEW] 2587
710:40-1-2. [AMENDED] 2159
710:40-1-2.1. [NEW] 2159
710:40-1-6. [AMENDED] 2159
710:40-1-10. [AMENDED] 2160
710:45-3-2. [REVOKED] 2161
710:45-3-11. [AMENDED] 2161
710:45-9-1. [AMENDED] 2162
710:45-9-20. [AMENDED] 2162
710:45-9-24. [AMENDED] 2162
710:45-9-30. [AMENDED] 2163
710:45-9-32.1. [AMENDED] 2163
710:45-9-40. [AMENDED] 2163
710:45-9-50. [AMENDED] 2163
710:45-9-60. [AMENDED] 2163
710:45-9-62.1. [AMENDED] 2164
710:45-9-70. [AMENDED] 2164

710:45-9-80. . . . . [AMENDED] . . . . . 2164
710:45-9-90. . . . . [AMENDED] . . . . . 2165
710:45-9-94. . . . . [AMENDED] . . . . . 2165
710:50-15-2. . . . . [NEW] (E) . . . . . 2811
710:50-15-32. . . . . [AMENDED] . . . . . 2166
710:50-15-49. . . . . [NEW] (E) . . . . . 21
710:50-15-49. . . . . [NEW] . . . . . 2166
710:50-15-63. . . . . [AMENDED] . . . . . 2167
710:50-15-66. . . . . [NEW] . . . . . 2167
710:50-15-76. . . . . [AMENDED] . . . . . 2167
710:50-15-89. . . . . [REVOKED] . . . . . 2169
710:50-15-91. . . . . [NEW] . . . . . 2169
710:50-15-92. . . . . [NEW] . . . . . 2169
710:50-17-51. . . . . [AMENDED] (E) . . . . . 321
710:50-17-51. . . . . [AMENDED] . . . . . 2170
710:50-19-1. . . . . [AMENDED] . . . . . 2172
710:60-1-3. . . . . [AMENDED] . . . . . 2173
710:60-3-23. . . . . [NEW] . . . . . 2174
710:60-3-133. . . . . [NEW] . . . . . 2174
710:60-4-3. . . . . [AMENDED] (E) . . . . . 752
710:60-4-3. . . . . [AMENDED] . . . . . 2588
710:60-4-5. . . . . [AMENDED] . . . . . 2590
710:60-4-6. . . . . [AMENDED] (E) . . . . . 753
710:60-4-6. . . . . [AMENDED] . . . . . 2588
710:60-4-10. . . . . [AMENDED] . . . . . 2589
710:60-4-11. . . . . [AMENDED] . . . . . 2589
710:60-4-13. . . . . [AMENDED] . . . . . 2589
710:60-4-15. . . . . [AMENDED] . . . . . 2591
710:60-5-53. . . . . [AMENDED] . . . . . 2174
710:60-7-8. . . . . [NEW] . . . . . 2175
710:60, App. A. . . . . [REVOKED] (E) . . . . . 379
710:60, App. A. . . . . [NEW] (E) . . . . . 379
710:60, App. A. . . . . [REVOKED] . . . . . 2593
710:65-3-30. . . . . [AMENDED] . . . . . 2176
710:65-3-33. . . . . [AMENDED] . . . . . 2177
710:65-5-3. . . . . [REVOKED] . . . . . 2177
710:65-5-4. . . . . [AMENDED] . . . . . 2177
710:65-13-47. . . . . [NEW] . . . . . 2178
710:65-13-52. . . . . [AMENDED] . . . . . 2178
710:65-13-78. . . . . [NEW] . . . . . 2180
710:65-13-100. . . . . [AMENDED] . . . . . 2180
710:65-13-122. . . . . [NEW] . . . . . 2181
710:65-13-210. . . . . [AMENDED] . . . . . 2181
710:65-19-49. . . . . [AMENDED] . . . . . 2182
710:65-19-71. . . . . [AMENDED] . . . . . 2182
710:65-19-214. . . . . [AMENDED] . . . . . 2183
710:85-1-2. . . . . [AMENDED] . . . . . 2594
710:85-1-3. . . . . [AMENDED] . . . . . 2594
710:85-1-8. . . . . [AMENDED] . . . . . 2594
710:85-7-1. . . . . [NEW] . . . . . 2595
710:85-7-2. . . . . [NEW] . . . . . 2595
710:85-7-3. . . . . [NEW] . . . . . 2595
710:95-5-8. . . . . [AMENDED] . . . . . 2184
710:95-5-20. . . . . [AMENDED] . . . . . 2184
710:95-5-21. . . . . [AMENDED] . . . . . 2185
710:95-6-4. . . . . [AMENDED] . . . . . 2185
710:95-6-5. . . . . [AMENDED] . . . . . 2185
712:10-5-1. . . . . [AMENDED] (E) . . . . . 227
712:10-5-1. . . . . [AMENDED] . . . . . 2186
712:10-5-2. . . . . [AMENDED] (E) . . . . . 235
712:10-5-2. . . . . [AMENDED] . . . . . 2195
712:10-5-3. . . . . [AMENDED] . . . . . 2196
712:10-7-1. . . . . [AMENDED] (E) . . . . . 236
712:10-7-1. . . . . [AMENDED] . . . . . 2198
712:10, App. A. . . . . [AMENDED] (E) . . . . . 243
712:10, App. A. . . . . [NEW] . . . . . 2206
715:1-1-4. . . . . [AMENDED] . . . . . 2596
715:10-1-4. . . . . [AMENDED] (E) . . . . . 2247
715:10-1-4. . . . . [AMENDED] . . . . . 2597
715:10-1-7. . . . . [AMENDED] (E) . . . . . 380
715:10-1-7. . . . . [AMENDED] . . . . . 2598
715:10-5-15. . . . . [AMENDED] . . . . . 2598
715:10-5-32. . . . . [AMENDED] (E) . . . . . 382
715:10-5-32. . . . . [AMENDED] . . . . . 2598
715:10-11-2. . . . . [AMENDED] (E) . . . . . 2248
715:10-11-2. . . . . [AMENDED] . . . . . 2599
715:10-13-3.1. . . . . [AMENDED] (E) . . . . . 381
715:10-13-3.1. . . . . [AMENDED] . . . . . 2599
715:10-13-9. . . . . [AMENDED] (E) . . . . . 381
715:10-13-9. . . . . [AMENDED] . . . . . 2600
715:10-15-18. . . . . [AMENDED] . . . . . 2600
715:10-15-22. . . . . [AMENDED] . . . . . 2600
715:10-17-1. . . . . [AMENDED] (E) . . . . . 382
715:10-17-1. . . . . [AMENDED] . . . . . 2601
715:10-17-5. . . . . [AMENDED] (E) . . . . . 384
715:10-17-5. . . . . [AMENDED] . . . . . 2601
715:10-17-6. . . . . [AMENDED] (E) . . . . . 384
715:10-17-6. . . . . [AMENDED] . . . . . 2601
715:10-17-7. . . . . [AMENDED] . . . . . 2602
715:10-19-8. . . . . [AMENDED] (E) . . . . . 383
715:10-19-8. . . . . [AMENDED] . . . . . 2602
725:15-35-1. . . . . [NEW] . . . . . 1355
725:15-35-2. . . . . [NEW] . . . . . 1356
725:15-35-3. . . . . [NEW] . . . . . 1356
725:15-35-4. . . . . [NEW] . . . . . 1356
725:15-35-5. . . . . [NEW] . . . . . 1356
725:15-37-1. . . . . [NEW] (E) . . . . . 560
725:15-37-1. . . . . [NEW] . . . . . 1357
725:15-37-2. . . . . [NEW] (E) . . . . . 560
725:15-37-2. . . . . [NEW] . . . . . 1357
725:25-21-1. . . . . [REVOKED] (E) . . . . . 561
725:25-21-1. . . . . [REVOKED] . . . . . 1358
725:25-21-2. . . . . [REVOKED] (E) . . . . . 561
725:25-21-2. . . . . [REVOKED] . . . . . 1358
725:25-21-3. . . . . [REVOKED] (E) . . . . . 561
725:25-21-3. . . . . [REVOKED] . . . . . 1358
725:25-21-4. . . . . [REVOKED] (E) . . . . . 561
725:25-21-4. . . . . [REVOKED] . . . . . 1358
725:25-21-5. . . . . [REVOKED] (E) . . . . . 561
725:25-21-5. . . . . [REVOKED] . . . . . 1358
725:30-18-1. . . . . [REVOKED] . . . . . 1359
725:30-18-4. . . . . [REVOKED] . . . . . 1360
725:30-22-1. . . . . [AMENDED] . . . . . 1361
725:30-22-1.1. . . . . [NEW] . . . . . 1361
725:30-22-2. . . . . [AMENDED] . . . . . 1361
725:30-22-3. . . . . [AMENDED] . . . . . 1362
725:30-22-4. . . . . [NEW] . . . . . 1362
725:30-22-5. . . . . [NEW] . . . . . 1362
725:30-22-6. . . . . [NEW] . . . . . 1362
725:30-22-7. . . . . [NEW] . . . . . 1363
725:35-1-3. . . . . [AMENDED] . . . . . 1363
730:40-3-1. . . . . [NEW] (E) . . . . . 248
730:40-3-1. . . . . [NEW] . . . . . 1814
730:40-3-2. . . . . [NEW] (E) . . . . . 248
730:40-3-2. . . . . [NEW] . . . . . 1814
730:40-3-3. . . . . [NEW] (E) . . . . . 248
730:40-3-3. . . . . [NEW] . . . . . 1815
730:40-3-4. . . . . [NEW] (E) . . . . . 248
730:40-3-4. . . . . [NEW] . . . . . 1815
730:40-3-5. . . . . [NEW] (E) . . . . . 249
730:40-3-5. . . . . [NEW] . . . . . 1815
730:40-3-6. . . . . [NEW] (E) . . . . . 249
730:40-3-6. . . . . [NEW] . . . . . 1815
735:80-7-2. . . . . [AMENDED] . . . . . 2212

765:1-1-1. . . . . [AMENDED] . . . . . 1816
765:1-1-2. . . . . [AMENDED] . . . . . 1816
765:1-1-2.1. . . . . [NEW] . . . . . 1816
765:1-1-9. . . . . [AMENDED] . . . . . 1817
765:2-3-1. . . . . [AMENDED] . . . . . 1817
765:2-3-6. . . . . [AMENDED] . . . . . 1817
765:2-3-10. . . . . [AMENDED] . . . . . 1818
765:10-1-1. . . . . [AMENDED] . . . . . 1818
765:10-3-1. . . . . [AMENDED] . . . . . 1819
765:10-3-3. . . . . [AMENDED] . . . . . 1819
765:15-1-3. . . . . [AMENDED] . . . . . 1820
765:30-7-1. . . . . [AMENDED] . . . . . 1821
765:30-7-2. . . . . [AMENDED] . . . . . 1821
765:37-7-4. . . . . [AMENDED] . . . . . 1821
775:10-1-1. . . . . [AMENDED] . . . . . 1822
775:10-3-5. . . . . [AMENDED] . . . . . 1822
775:10-3-12. . . . . [AMENDED] . . . . . 1823
775:10-5-30. . . . . [AMENDED] . . . . . 1824
775:10-7-1. . . . . [AMENDED] . . . . . 1825
775:10-7-2. . . . . [AMENDED] . . . . . 1826
775:10-7-4. . . . . [AMENDED] . . . . . 1826
775:10-7-6. . . . . [AMENDED] . . . . . 1827
775:10-7-8. . . . . [AMENDED] . . . . . 1827
775:10-7-9. . . . . [AMENDED] . . . . . 1827
775:10-7-10. . . . . [AMENDED] . . . . . 1827
775:10-8-2. . . . . [AMENDED] . . . . . 1827
775:10-8-7. . . . . [AMENDED] . . . . . 1828
775:10-8-22. . . . . [AMENDED] . . . . . 1829
775:25-1-4. . . . . [AMENDED] . . . . . 1830
785:5-1-16. . . . . [AMENDED] . . . . . 2603
785:20-3-2. . . . . [AMENDED] . . . . . 2605
785:20-3-8. . . . . [AMENDED] . . . . . 2605
785:20-5-5. . . . . [AMENDED] . . . . . 2605
785:20-7-3.1. . . . . [NEW] . . . . . 2606
785:30-1-4. . . . . [AMENDED] . . . . . 2607
785:30-3-1. . . . . [AMENDED] . . . . . 2607
785:35-1-2. . . . . [AMENDED] . . . . . 2609
785:35-1-4. . . . . [AMENDED] . . . . . 2610
785:35-1-6. . . . . [AMENDED] . . . . . 2611
785:35-3-2. . . . . [AMENDED] . . . . . 2612
785:35-5-1. . . . . [AMENDED] . . . . . 2612
785:35-5-2. . . . . [AMENDED] . . . . . 2613
785:35-7-1. . . . . [AMENDED] . . . . . 2613
785:35-7-1.1. . . . . [NEW] . . . . . 2615
785:35-11-2. . . . . [AMENDED] . . . . . 2616
785:45-1-2. . . . . [AMENDED] . . . . . 1365
785:45-1-4. . . . . [AMENDED] . . . . . 1368
785:45-5-3. . . . . [AMENDED] . . . . . 1368
785:45-5-4. . . . . [AMENDED] . . . . . 1368
785:45-5-12. . . . . [AMENDED] . . . . . 1369
785:45-5-19. . . . . [AMENDED] . . . . . 1372
785:45-5-25. . . . . [AMENDED] . . . . . 1372
785:45, App. A. . . . . [REVOKED] . . . . . 1375
785:45, App. A. . . . . [NEW] . . . . . 1375
785:45, App. E. . . . . [REVOKED] . . . . . 1422
785:45, App. E. . . . . [NEW] . . . . . 1422
785:46-1-1. . . . . [AMENDED] . . . . . 1430
785:46-1-2. . . . . [AMENDED] . . . . . 1430
785:46-1-6. . . . . [AMENDED] . . . . . 1432
785:46-3-1. . . . . [AMENDED] . . . . . 1433
785:46-3-2. . . . . [AMENDED] . . . . . 1433
785:46-3-3. . . . . [AMENDED] . . . . . 1434
785:46-3-4. . . . . [REVOKED] . . . . . 1435
785:46-3-6. . . . . [NEW] . . . . . 1435
785:46-5-1. . . . . [AMENDED] . . . . . 1435
785:46-5-2. . . . . [AMENDED] . . . . . 1435
785:46-5-3. . . . . [AMENDED] . . . . . 1435
785:46-5-4. . . . . [REVOKED] . . . . . 1436
785:46-5-5. . . . . [REVOKED] . . . . . 1437
785:46-5-6. . . . . [REVOKED] . . . . . 1437
785:46-5-7. . . . . [REVOKED] . . . . . 1437
785:46-5-9. . . . . [REVOKED] . . . . . 1437
785:46-7-1. . . . . [AMENDED] . . . . . 1438
785:46-7-2. . . . . [AMENDED] . . . . . 1438
785:46-7-3. . . . . [AMENDED] . . . . . 1438
785:46-7-4. . . . . [REVOKED] . . . . . 1438
785:46-9-1. . . . . [AMENDED] . . . . . 1439
785:46-9-4. . . . . [REVOKED] . . . . . 1439
785:46-9-5. . . . . [AMENDED] . . . . . 1439
785:46-9-6. . . . . [REVOKED] . . . . . 1440
785:46-9-7. . . . . [REVOKED] . . . . . 1440
785:46-9-8. . . . . [REVOKED] . . . . . 1440
785:46-11-1. . . . . [AMENDED] . . . . . 1440
785:46-11-4. . . . . [REVOKED] . . . . . 1440
785:46-11-7. . . . . [REVOKED] . . . . . 1440
785:46-15-3. . . . . [AMENDED] . . . . . 1441
785:46-15-5. . . . . [AMENDED] . . . . . 1442
785:46, App. A. . . . . [REVOKED] . . . . . 1445
785:50-8-5. . . . . [AMENDED] . . . . . 2618
785:50-9-5. . . . . [AMENDED] . . . . . 2622
785:50-9-7. . . . . [AMENDED] . . . . . 2622
785:50-9-8. . . . . [AMENDED] . . . . . 2622
785:50-9-9. . . . . [AMENDED] . . . . . 2622
785:50-9-21. . . . . [AMENDED] . . . . . 2625
785:50-9-23. . . . . [AMENDED] . . . . . 2626
785:50-9-35. . . . . [AMENDED] . . . . . 2630
785:50-9-60. . . . . [AMENDED] . . . . . 2632
800:10-1-5. . . . . [AMENDED] (E) . . . . . 21
800:10-1-5. . . . . [AMENDED] . . . . . 1450
800:10-1-7. . . . . [AMENDED] (E) . . . . . 23
800:10-1-7. . . . . [AMENDED] . . . . . 1451
800:10-3-3. . . . . [AMENDED] (E) . . . . . 23
800:10-3-3. . . . . [AMENDED] . . . . . 1451
800:10-3-4. . . . . [AMENDED] (E) . . . . . 23
800:10-3-4. . . . . [AMENDED] . . . . . 1451
800:10-3-5. . . . . [AMENDED] (E) . . . . . 23
800:10-3-5. . . . . [AMENDED] . . . . . 1451
800:10-5-2. . . . . [AMENDED] . . . . . 2214
800:15-11-1. . . . . [NEW] (E) . . . . . 27
800:15-11-1. . . . . [NEW] . . . . . 1455
800:15-11-2. . . . . [NEW] (E) . . . . . 27
800:15-11-2. . . . . [NEW] . . . . . 1455
800:15-11-3. . . . . [NEW] (E) . . . . . 27
800:15-11-3. . . . . [NEW] . . . . . 1455
800:15-11-4. . . . . [NEW] (E) . . . . . 27
800:15-11-4. . . . . [NEW] . . . . . 1455
800:25-3-1. . . . . [AMENDED] . . . . . 2216
800:25-3-2. . . . . [AMENDED] . . . . . 2216
800:25-3-3. . . . . [AMENDED] . . . . . 2218
800:25-3-5. . . . . [AMENDED] . . . . . 2218
800:25-3-6. . . . . [REVOKED] . . . . . 2219
800:25-7-3. . . . . [AMENDED] . . . . . 2219
800:25-7-51. . . . . [AMENDED] . . . . . 2224
800:25-7-52. . . . . [AMENDED] . . . . . 2219
800:25-7-53. . . . . [AMENDED] . . . . . 2224
800:25-7-55. . . . . [NEW] . . . . . 2220
800:25-7-57. . . . . [AMENDED] . . . . . 2220
800:25-7-75. . . . . [AMENDED] . . . . . 2220
800:25-7-81. . . . . [AMENDED] (E) . . . . . 1867
800:25-7-82. . . . . [AMENDED] (E) . . . . . 1868
800:25-7-82.1. . . . . [AMENDED] (E) . . . . . 1868
800:25-7-83. . . . . [AMENDED] (E) . . . . . 1868
800:25-7-84. . . . . [AMENDED] (E) . . . . . 1869
800:25-7-85. . . . . [AMENDED] (E) . . . . . 1869

800:25-7-86. . . . . [AMENDED] (E) . . . . . 1869
800:25-7-86.1. . . . . [NEW] . . . . . 2225
800:25-7-88. . . . . [AMENDED] (E) . . . . . 1870
800:25-7-90. . . . . [AMENDED] (E) . . . . . 1870
800:25-7-92. . . . . [AMENDED] (E) . . . . . 1871
800:25-7-94. . . . . [AMENDED] (E) . . . . . 1871
800:25-7-94.1. . . . . [AMENDED] (E) . . . . . 1871
800:25-7-94.4. . . . . [AMENDED] (E) . . . . . 1872
800:25-7-94.6. . . . . [AMENDED] (E) . . . . . 1872
800:25-7-95. . . . . [AMENDED] (E) . . . . . 1872
800:25-7-96. . . . . [AMENDED] (E) . . . . . 1873
800:25-7-97. . . . . [AMENDED] (E) . . . . . 1873
800:25-7-98. . . . . [AMENDED] (E) . . . . . 1873
800:25-7-99. . . . . [AMENDED] (E) . . . . . 1874
800:25-7-100. . . . . [AMENDED] (E) . . . . . 1874
800:25-7-101. . . . . [AMENDED] (E) . . . . . 1875
800:25-7-102. . . . . [AMENDED] (E) . . . . . 1875
800:25-7-102.1. . . . . [AMENDED] (E) . . . . . 1875
800:25-7-102.2. . . . . [AMENDED] (E) . . . . . 1876
800:25-7-103. . . . . [REVOKED] . . . . . 2226
800:25-7-104. . . . . [REVOKED] . . . . . 2226
800:25-7-105. . . . . [REVOKED] . . . . . 2227
800:25-7-105.1. . . . . [REVOKED] . . . . . 2227
800:25-7-105.2. . . . . [REVOKED] . . . . . 2228
800:25-7-105.5. . . . . [AMENDED] (E) . . . . . 1876
800:25-7-106. . . . . [AMENDED] (E) . . . . . 1876
800:25-7-108. . . . . [AMENDED] (E) . . . . . 1877
800:25-7-108.1. . . . . [AMENDED] (E) . . . . . 1877
800:25-7-109. . . . . [AMENDED] (E) . . . . . 1877
800:25-7-110. . . . . [AMENDED] (E) . . . . . 1878
800:25-7-111. . . . . [AMENDED] (E) . . . . . 1878
800:25-7-112. . . . . [AMENDED] (E) . . . . . 1878
800:25-7-113. . . . . [AMENDED] (E) . . . . . 1879
800:25-7-114. . . . . [AMENDED] (E) . . . . . 1879
800:25-7-115. . . . . [AMENDED] (E) . . . . . 1880
800:25-7-116. . . . . [AMENDED] (E) . . . . . 1880
800:25-7-117. . . . . [AMENDED] (E) . . . . . 1880
800:25-7-118. . . . . [AMENDED] (E) . . . . . 1881
800:25-7-119. . . . . [AMENDED] (E) . . . . . 1881
800:25-7-120. . . . . [AMENDED] (E) . . . . . 1881
800:25-7-121. . . . . [AMENDED] (E) . . . . . 1882
800:25-7-123. . . . . [AMENDED] (E) . . . . . 1882
800:25-7-125. . . . . [AMENDED] (E) . . . . . 1882
800:25-7-126. . . . . [AMENDED] (E) . . . . . 1883
800:25-7-127. . . . . [AMENDED] (E) . . . . . 1883
800:25-7-128. . . . . [AMENDED] (E) . . . . . 1884
800:25-7-129. . . . . [AMENDED] (E) . . . . . 1884
800:25-7-130. . . . . [AMENDED] (E) . . . . . 1884
800:25-7-131. . . . . [AMENDED] (E) . . . . . 1885
800:25-7-131.1. . . . . [AMENDED] (E) . . . . . 1885
800:25-7-131.2. . . . . [AMENDED] (E) . . . . . 1885
800:25-7-132. . . . . [AMENDED] (E) . . . . . 1886
800:25-7-133.1. . . . . [AMENDED] (E) . . . . . 1886
800:25-7-134. . . . . [AMENDED] (E) . . . . . 1887
800:25-7-135. . . . . [AMENDED] (E) . . . . . 1887
800:25-7-136. . . . . [AMENDED] (E) . . . . . 1887
800:25-7-136.1. . . . . [AMENDED] (E) . . . . . 1888
800:25-7-136.2. . . . . [AMENDED] (E) . . . . . 1888
800:25-7-137. . . . . [AMENDED] (E) . . . . . 1889
800:25-7-138. . . . . [AMENDED] (E) . . . . . 1889
800:25-7-140. . . . . [AMENDED] (E) . . . . . 1890
800:25-7-141. . . . . [AMENDED] (E) . . . . . 1890
800:25-7-142. . . . . [AMENDED] . . . . . 2220
800:25-7-143. . . . . [AMENDED] (E) . . . . . 1890
800:25-7-144. . . . . [AMENDED] (E) . . . . . 1891
800:25-7-146. . . . . [AMENDED] (E) . . . . . 1891
800:25-7-147. . . . . [AMENDED] (E) . . . . . 1891
800:25-7-148. . . . . [AMENDED] (E) . . . . . 1892
800:25-7-149. . . . . [AMENDED] (E) . . . . . 1892
800:25-7-149.1. . . . . [AMENDED] (E) . . . . . 1892
800:25-7-152. . . . . [AMENDED] (E) . . . . . 1893
800:25-7-153. . . . . [AMENDED] (E) . . . . . 1893
800:25-7-154. . . . . [AMENDED] (E) . . . . . 1893
800:25-7-154.2. . . . . [AMENDED] (E) . . . . . 1893
800:25-7-155. . . . . [AMENDED] (E) . . . . . 1894
800:25-7-156. . . . . [AMENDED] (E) . . . . . 1894
800:25-7-157. . . . . [AMENDED] (E) . . . . . 1894
800:25-9-3. . . . . [AMENDED] . . . . . 2221
800:25-9-5. . . . . [AMENDED] . . . . . 2221
800:25-24-1. . . . . [NEW] . . . . . 2228
800:25-24-2. . . . . [NEW] . . . . . 2228
800:25-24-3. . . . . [NEW] . . . . . 2228
800:25-26-1. . . . . [NEW] . . . . . 2221
800:25-26-2. . . . . [NEW] . . . . . 2221
800:25-26-3. . . . . [NEW] . . . . . 2222
800:25-26-4. . . . . [NEW] . . . . . 2222
800:25-29-2. . . . . [AMENDED] . . . . . 2222
800:25-29-3. . . . . [AMENDED] . . . . . 2222
800:25-30-5. . . . . [AMENDED] . . . . . 2223
800:25-35-1. . . . . [AMENDED] . . . . . 2228
800:25-35-2. . . . . [AMENDED] . . . . . 2228
800:25-35-3. . . . . [AMENDED] . . . . . 2229
800:25-35-4. . . . . [AMENDED] . . . . . 2229
800:25-35-5. . . . . [AMENDED] . . . . . 2229
800:25-35-6. . . . . [AMENDED] . . . . . 2230
800:25-35-7. . . . . [REVOKED] . . . . . 2230
800:25-35-8. . . . . [REVOKED] . . . . . 2230
800:30-1-2. . . . . [AMENDED] . . . . . 2231
800:30-1-4. . . . . [AMENDED] . . . . . 2232
800:30-1-5. . . . . [AMENDED] . . . . . 2233
800:30-1-7. . . . . [AMENDED] (E) . . . . . 1895
800:30-1-20. . . . . [AMENDED] . . . . . 2233
580-15-4-17. . . . . [AMENDED] . . . . . 2510

# Agency/Title Index

*[Assigned as of 8-15-03]*


| Agency | Title |
|---|---|
| Oklahoma **ACCOUNTANCY** Board | 10 |
| State **ACCREDITING** Agency | 15 |
| **AD** Valorem Task Force *(abolished 7-1-93)* | 20 |
| Oklahoma **AERONAUTICS** Commission | 25 |
| Board of Regents for the Oklahoma **AGRICULTURAL** and Mechanical Colleges | 30 |
| Oklahoma Department of **AGRICULTURE**, Food, and Forestry | 35 |
| Board of Tests for **ALCOHOL** and Drug Influence | 40 |
| **ALCOHOLIC** Beverage Laws Enforcement Commission | 45 |
| **ANATOMICAL** Board of the State of Oklahoma | 50 |
| Board of Governors of the Licensed **ARCHITECTS** and Landscape Architects of Oklahoma | 55 |
| **ARCHIVES** and Records Commission | 60 |
| Board of Trustees for the **ARDMORE** Higher Education Program | 65 |
| Oklahoma **ARTS** Council | 70 |
| **ATTORNEY** General | 75 |
| State **AUDITOR** and Inspector | 80 |
| State **BANKING** Department | 85 |
| Oklahoma State Employees **BENEFITS** Council | 87 |
| Executive and Legislative **BOND** Oversight Commissions | 90 |
| Oklahoma Professional **BOXING** Commission | 92 |
| State **BURIAL** Board *(abolished 7-1-92)* | 95 |
| [RESERVED] | 100 |
| Oklahoma **CAPITOL** Investment Board | 105 |
| Oklahoma **CAPITOL** Improvement Authority | 110 |
| State **CAPITOL** Preservation Commission | 115 |
| **CAPITOL-MEDICAL** Center Improvement and Zoning Commission | 120 |
| Oklahoma Department of **CAREER** and Technology Education (*Formerly:* Oklahoma Department of **VOCATIONAL** and Technical Education) - See Title 780 | |
| Board of Regents of **CARL** Albert State College | 125 |
| Department of **CENTRAL** Services (*Formerly:* Office of **PUBLIC** Affairs) - *See* Title 580 | |
| **CEREBRAL** Palsy Commission | 130 |
| Commission on **CHILDREN** and Youth | 135 |
| Board of **CHIROPRACTIC** Examiners | 140 |
| Department of **CIVIL** Emergency Management | 145 |
| Oklahoma Department of **COMMERCE** | 150 |
| **COMMUNITY** Hospitals Authority | 152 |
| Oklahoma **CONSERVATION** Commission | 155 |
| **CONSTRUCTION** Industries Board | 158 |
| Department of **CONSUMER** Credit | 160 |
| **CORPORATION** Commission | 165 |
| Department of **CORRECTIONS** | 170 |
| State Board of **COSMETOLOGY** | 175 |
| Oklahoma State **CREDIT** Union Board | 180 |
| **CRIME** Victims Compensation Board | 185 |
| Joint **CRIMINAL** Justice System Task Force Committee | 190 |
| Board of **DENTISTRY** | 195 |
| Oklahoma **DEVELOPMENT** Finance Authority | 200 |
| Board of Regents of **EASTERN** Oklahoma State College | 205 |
| State Department of **EDUCATION** | 210 |
| **EDUCATION** Oversight Board | 215 |
| Oklahoma **EDUCATIONAL** Television Authority | 220 |
| [RESERVED] | 225 |
| State **ELECTION** Board | 230 |
| Oklahoma State Board of **EMBALMERS** and Funeral Directors | 235 |
| Oklahoma **EMPLOYMENT** Security Commission | 240 |
| Oklahoma **ENERGY** Resources Board | 243 |
| State Board of Registration for Professional **ENGINEERS** and Land Surveyors | 245 |
| Board of Trustees for the **ENID** Higher Education Program | 250 |
| Department of **ENVIRONMENTAL** Quality | 252 |
| State Board of **EQUALIZATION** | 255 |
| **ETHICS** Commission *(Title revoked)* | 257 |
| **ETHICS** Commission | 258 |
| Office of State **FINANCE** | 260 |
| State **FIRE** Marshal Commission | 265 |
| Oklahoma **FIREFIGHTERS** Pension and Retirement System | 270 |
| [RESERVED] | 275 |
| State Board of Registration for **FORESTERS** | 280 |
| **FOSTER** Care Review Advisory Board | 285 |
| Oklahoma **FUTURES** | 290 |
| **GOVERNOR** | 295 |
| **GRAND** River Dam Authority | 300 |
| Group Self-Insurance Association **GUARANTY** Fund Board | 302 |
| Individual Self-Insured **GUARANTY** Fund Board | 303 |
| **STATE** Use Committee (*Formerly:* Committee on Purchases of Products and Services of the Severely **HANDICAPPED**) | 304 |
| Office of **HANDICAPPED** Concerns | 305 |
| Oklahoma State Department of **HEALTH** | 310 |
| Oklahoma Basic **HEALTH** Benefits Board *(abolished 11-1-97)* | 315 |
| Oklahoma **HEALTH** Care Authority | 317 |
| **HIGHWAY** Construction Materials Technician Certification Board | 318 |
| Oklahoma **HISTORICAL** Society | 320 |
| Oklahoma **HORSE** Racing Commission | 325 |
| Oklahoma **HOUSING** Finance Agency | 330 |
| Oklahoma **HUMAN** Rights Commission | 335 |
| Department of **HUMAN** Services | 340 |
| Committee for **INCENTIVE** Awards for State Employees | 345 |
| Oklahoma **INDIAN** Affairs Commission | 350 |
| Oklahoma **INDIGENT** Defense System | 352 |
| Oklahoma **INDUSTRIAL** Finance Authority | 355 |
| Oklahoma State and Education Employees Group **INSURANCE** Board | 360 |
| **INSURANCE** Department | 365 |
| State **INSURANCE** Fund | 370 |
| Oklahoma State Bureau of **INVESTIGATION** | 375 |
| Council on **JUDICIAL** Complaints | 376 |
| Office of **JUVENILE** Affairs | 377 |
| Department of **LABOR** | 380 |
| Department of the Commissioners of the **LAND** Office | 385 |
| Council on **LAW** Enforcement Education and Training | 390 |
| Oklahoma **LAW** Enforcement Retirement System | 395 |
| Board on **LEGISLATIVE** Compensation | 400 |
| Oklahoma Department of **LIBRARIES** | 405 |
| **LIEUTENANT** Governor | 410 |
| Oklahoma **LINKED** Deposit Review Board | 415 |

| Agency | Title |
|---|---|
| Oklahoma **LIQUEFIED** Petroleum Gas Board | 420 |
| Oklahoma **LIQUEFIED** Petroleum Gas Research, Marketing and Safety Commission | 422 |
| **LITERACY** Initiatives Commission | 425 |
| **LONG-RANGE** Capital Planning Commission | 428 |
| Board of Trustees for the **MCCURTAIN** County Higher Education Program | 430 |
| Commission on **MARGINALLY** Producing Oil and Gas Wells | 432 |
| State Board of **MEDICAL** Licensure and Supervision | 435 |
| **MEDICAL** Technology and Research Authority of Oklahoma | 440 |
| Board of **MEDICOLEGAL** Investigations | 445 |
| Department of **MENTAL** Health and Substance Abuse Services | 450 |
| **MERIT** Protection Commission | 455 |
| Department of **MINES** | 460 |
| Oklahoma **MOTOR** Vehicle Commission | 465 |
| Board of Regents of **MURRAY** State College | 470 |
| Oklahoma State Bureau of **NARCOTICS** and Dangerous Drugs Control | 475 |
| Board of Regents of **NORTHERN** Oklahoma College | 480 |
| Oklahoma Board of **NURSING** | 485 |
| Oklahoma State Board of Examiners for **NURSING** Home Administrators | 490 |
| Board of Regents of **OKLAHOMA** City Community College | 495 |
| Board of Regents of **OKLAHOMA** Colleges | 500 |
| Board of Examiners in **OPTOMETRY** | 505 |
| State Board of **OSTEOPATHIC** Examiners | 510 |
| **PARDON** and Parole Board | 515 |
| Oklahoma **PEANUT** Commission | 520 |
| Oklahoma State **PENSION** Commission | 525 |
| State Board of Examiners of **PERFUSIONISTS** | 527 |
| Office of **PERSONNEL** Management | 530 |
| Oklahoma State Board of **PHARMACY** | 535 |
| **PHYSICIAN** Manpower Training Commission | 540 |
| Board of **PODIATRIC** Medical Examiners | 545 |
| Oklahoma **POLICE** Pension and Retirement System | 550 |
| State Department of **POLLUTION** Control *(abolished 1-1-93)* | 555 |
| **POLYGRAPH** Examiners Board | 560 |
| Oklahoma Board of **PRIVATE** Vocational Schools | 565 |
| State Board for **PROPERTY** and Casualty Rates | 570 |
| State Board of Examiners of **PSYCHOLOGISTS** | 575 |
| Department of **CENTRAL** Services (*Formerly*: Office of **PUBLIC** Affairs) | 580 |
| **PUBLIC** Employees Relations Board | 585 |
| Oklahoma **PUBLIC** Employees Retirement System | 590 |
| Department of **PUBLIC** Safety | 595 |
| **REAL** Estate Appraiser Board | 600 |
| Oklahoma **REAL** Estate Commission | 605 |
| Board of Regents of **REDLANDS** Community College | 607 |
| State **REGENTS** for Higher Education | 610 |
| State Department of **REHABILITATION** Services | 612 |
| Board of Regents of **ROGERS** State College | 615 |
| Board of Regents of **ROSE** State College | 620 |
| Oklahoma **SAVINGS** and Loan Board *(abolished 7-1-93)* | 625 |
| **SCENIC** Rivers Commission | 630 |
| Oklahoma Commission on **SCHOOL** and County Funds Management | 635 |
| Advisory Task Force on the Sale of **SCHOOL** Lands *(functions concluded 2-92)* | 640 |
| The Oklahoma School of **SCIENCE** and Mathematics | 645 |
| Oklahoma Center for the Advancement of **SCIENCE** and Technology | 650 |
| **SECRETARY** of State | 655 |
| Department of **SECURITIES** | 660 |
| Board of Regents of **SEMINOLE** State College | 665 |
| **SHEEP** and Wool Commission | 670 |
| State Board of Licensed **SOCIAL** Workers | 675 |
| **SOUTHERN** Growth Policies Board | 680 |
| Oklahoma **SOYBEAN** Commission *(abolished 7-1-97)* | 685 |
| Board of Examiners for **SPEECH–LANGUAGE** Pathology and Audiology | 690 |
| **STATE** Agency Review Committee | 695 |
| **STATE** Use Committee (*Formerly:* Committee on Purchases of Products and Services of the Severely **HANDICAPPED**) – *See* Title 304 | |
| Oklahoma **STUDENT** Loan Authority | 700 |
| **TASK** Force 2000 | 705 |
| Oklahoma **TAX** Commission | 710 |
| Oklahoma Commission for **TEACHER** Preparation | 712 |
| **TEACHERS'** Retirement System | 715 |
| State **TEXTBOOK** Committee | 720 |
| Oklahoma **TOURISM** and Recreation Department | 725 |
| Department of **TRANSPORTATION** | 730 |
| Oklahoma **TRANSPORTATION** Authority | 731 |
| State **TREASURER** | 735 |
| Board of Regents of **TULSA** Community College | 740 |
| Oklahoma **TURNPIKE** Authority *(name changed - see Title 731)* | 745 |
| Board of Trustees for the **UNIVERSITY** Center at Tulsa | 750 |
| **UNIVERSITY** Hospitals Authority | 752 |
| Board of Regents of the **UNIVERSITY** of Oklahoma | 755 |
| Board of Regents of the **UNIVERSITY** of Science and Arts of Oklahoma | 760 |
| Oklahoma **USED** Motor Vehicle and Parts Commission | 765 |
| Oklahoma Department of **VETERANS** Affairs | 770 |
| Board of **VETERINARY** Medical Examiners | 775 |
| Oklahoma Department of **CAREER** and Technology Education (*Formerly:* Oklahoma Department of **VOCATIONAL** and Technical Education) | 780 |
| Oklahoma **WATER** Resources Board | 785 |
| Board of Regents of **WESTERN** Oklahoma State College | 790 |
| Oklahoma **WHEAT** Commission | 795 |
| Department of **WILDLIFE** Conservation | 800 |
| **WILL** Rogers and J.M. Davis Memorials Commission | 805 |

# Notices of Rulemaking Intent

Prior to adoption and gubernatorial/legislative review of a proposed PERMANENT rulemaking action, an agency must publish a Notice of Rulemaking Intent in the *Register.* In addition, an agency may publish a Notice of Rulemaking Intent in the *Register* prior to adoption of a proposed EMERGENCY or PREEMPTIVE rulemaking action.

A Notice of Rulemaking Intent announces a comment period, or a comment period and public hearing, and provides other information about the intended rulemaking action as required by law, including where copies of proposed rules may be obtained.

*For additional information on Notices of Rulemaking Intent, see 75 O.S., Section 303.*

## TITLE 310. OKLAHOMA STATE DEPARTMENT OF HEALTH CHAPTER 234. MEDICAL MICROPIGMENTATION

*[OAR Docket #03-3016]*

**RULEMAKING ACTION:**

Notice of proposed EMERGENCY and PERMANENT rulemaking

**PROPOSED RULES:**

Subchapter 3. Medical Micropigmentation Certification

310:234-3-1 [AMENDED]

310:234-3-3.1 [NEW]

310:234-3-4 [AMENDED]

**SUMMARY:**

Rule revisions are sought to comply with Senate Bill No. 340 signed by Governor Henry on June 4, 2003. The proposal amends the Medical Micropigmentation Rules by reducing the minimum number of hours of instruction from 450 hours to 300 hours. Language has been amended to reflect that the physician in whose office medical micropigmentation is being performed is to determine the level of supervision. This chapter will also provide an opportunity for other entities to offer medical micropigmentation training. The proposal contains new language, which allows the State Department of Health, upon recommendation of the Medical Micropigmentation Advisory Committee, to approve applicants for certification by reciprocity if they have qualifications and training comparable to those under this act. Applicant would also have to verify two (2) years experience and a minimum of two hundred (200) procedures and would have successfully completed the Oklahoma Medical Micropigmentation Certification Exam.

**AUTHORITY:**

Oklahoma State Board of Health; 63 O.S. Sections 1-104, 1-1453 and 1-1455.

**COMMENT PERIOD:**

August 15, 2003 through September 18, 2003. Interested persons may informally discuss the proposed rules with Protective Health Services staff; or before September 18, 2003, may submit written comments to Rocky McElvany, Chief, Consumer Health Services, Oklahoma State Department of Health, 1000 NE 10th Street, Oklahoma City, OK 73117-1299; or before September 18, 2003, may send electronic mail to rockym@health.state.ok.us or may ask to present written or oral views at the hearing.

**PUBLIC HEARING:**

Part of the regular meeting of the State Board of Health, September 18, 2003, which begins at 1:00 p.m. in Room 307 of the Oklahoma State Department of Health Building, 1000 NE 10th Street, Oklahoma City, OK 73117-1299.

**REQUESTS FOR COMMENTS FROM BUSINESS ENTITIES:**

Business entities affected by these proposed rules are requested to provide the agency with information, in dollar amounts if possible, about the increase in level of direct costs, indirect costs, or other costs expected to be incurred by the business entity due to compliance with the proposed rules. Business entities may submit this information in writing before September 18, 2003, to Rocky McElvany, Chief, Consumer Health Services, Oklahoma State Department of Health, 1000 NE 10th Street, Oklahoma City, OK 73117-1299; or before September 18, 2003, may send electronic mail to rockym@health.state.ok.us

**COPIES OF PROPOSED RULES:**

Copies of the proposed rules may be obtained from Consumer Health Services at the Oklahoma State Department of Health, 1000 Northeast 10th Street, Oklahoma City, OK 73117-1299 or by electronic mail request to rockym@health.state.ok.us

**RULE IMPACT STATEMENT:**

Pursuant to 75 O.S., §303(D), a rule impact statement will be prepared and will be available beginning August 15, 2003 at the same location listed above for reviewing and obtaining copies of the proposed rules.

**CONTACT PERSON:**

Rocky McElvany, Chief, Consumer Health Services, (405) 271-5288

*[OAR Docket #03-3016; filed 7-23-03]*

## TITLE 310. OKLAHOMA STATE DEPARTMENT OF HEALTH CHAPTER 281. ~~IONIZING RADIATION REGULATIONS~~DIAGNOSTIC X-RAY PRODUCING MACHINES

*[OAR Docket #03-3017]*

**RULEMAKING ACTION:**

Notice of proposed PERMANENT rulemaking

**PROPOSED RULES:**

Chapter 281. ~~Ionizing Radiation Regulations~~Diagnostic X-Ray Producing Machines [AMENDED]

**SUMMARY:**

The proposal, which involves the addition and deletions of definitions and language to clarify existing regulations, amends or adds more than 30 sections of the rule. This proposal modifies the present Ionizing Radiation Regulations in order to correlate the regulations with the 1991 Nuclear Regulatory Commission 10 CFR Part 20 and the Conference of Radiation Control Program Directors', suggested State Regulations for Control of Radiation (revised 2003). The intent is to provide public and worker protection from over exposure to ionizing radiation produced by diagnostic x-ray producing machines. The title is changed from Ionizing Radiation Regulations to Diagnostic X-Ray Producing Machines, because currently the Health Department only regulates diagnostic x-ray machines and not industrial x-ray machines or radioactive materials. In Subchapter 1, the proposed changes involve the addition of definitions and language to clarify existing definitions. Subchapter 3, section 4 incorporates changes in equipment, which a facility requires to be completed at the time of permit renewal. Subchapter 5 has no revisions. Subchapter 7 in the previous regulations had been reserved and currently is deleted. The subsequent Subchapter 9 becomes Subchapter 7, Standards for Protection Against Radiation, which incorporates changes regarding the radiation dose standards for individuals in restricted areas, determination of accumulated occupational doses, exposure to pregnant employees, personnel monitoring, records of surveys, reports of theft or loss of sources of radiation, notification of incidents regarding radiation, and incorporates sections inadvertently left out of existing regulations. The previous Subchapter 11 becomes Subchapter 9, and incorporates sections dealing with surveys, dose measurements, spot checks, operating procedures, and preventive maintenance services. The chapter also contains deletions of exposure limits for mammography and the addition of suggested exposure limits for Computed Tomography. There are additions and deletions for additional controls for mammography, adoption of the Federal Mammography Quality Standards Act of 1994, reenacted in 1997, by reference, which include mammography new exposure limits. Under general requirements for all human diagnostic x-ray systems, the addition of accuracy limits for kVp was implemented. Additions pertaining to Computed Tomography (CT) include setting mandatory annual inspections by a medical physicist, quarterly preventative services schedules, description of CT dose measurement phantoms and other general requirements. Also, the deletions of Subchapters 13 and 15 are proposed. The new Subchapter 11 involves the addition of teleradiology to the regulations by reference. The new Appendix B was inserted to give the general training requirements for individuals who operate Computed Tomography X-Ray Machines.

**AUTHORITY:**

Oklahoma State Board of Health; 63 O.S. 2001, Sections 1-104 and 1-1505.

**COMMENT PERIOD:**

August 15, 2003, through, September 18, 2003. Interested persons may discuss informally the proposed rules with staff of Consumer Protection Services; or may before September 18, 2003, submit written comment to Ted Evans, Director, Consumer Protection Division, Protective Health Services, Oklahoma State Department of Health, 1000 N.E. 10th Street, Oklahoma City, OK 73117-1299; or may at the hearing ask to present written or oral views.

**PUBLIC HEARING:**

Part of the regular meeting of the State Board of Health, September 18, 2003, which begins at 1:00 p.m. in Room 307 of the State Health Department Building, 1000 N.E. 10th Street, Oklahoma City, Oklahoma.

**REQUESTS FOR COMMENTS FROM BUSINESS ENTITIES:**

Business entities affected by these proposed rules are requested to provide the agency with information, in dollar amounts if possible, about the increase in level of direct costs, indirect costs, or other costs expected to be incurred by the business entity due to compliance with the proposed rules. Business entities may submit this information in writing before September 18, 2003, to Ted Evans, Director, Consumer Protection Division, Consumer Health Services, Oklahoma State Department of Health, 1000 N.E. 10th Street, Oklahoma City, OK 73117-1299.

**COPIES OF PROPOSED RULES:**

Copies of the proposed rules may be obtained from the Consumer Protection Services at the above address or by electronic mail request to tede@health.state.ok.us

**RULE IMPACT STATEMENT:**

Pursuant to 75 O.S., § 303(D), a rule impact statement will be available for review beginning August 15, 2003, at the Consumer Protection Division of Protective Health Services at the Oklahoma State Department of Health, 1000 Northeast 10th Street, Oklahoma City, Ok. 73117-1299.

**CONTACT PERSON:**

Ted Evans, Director, Consumer Protection Division, Consumer Health Services, (405) 271-5243

*[OAR Docket #03-3017; filed 7-23-03]*

---

## TITLE 310. OKLAHOMA STATE DEPARTMENT OF HEALTH CHAPTER 555. NOTIFICATION OF COMMUNICABLE DISEASE RISK EXPOSURE ~~REGULATIONS~~

*[OAR Docket #03-3015]*

**RULEMAKING ACTION:**

Notice of proposed PERMANENT rulemaking

**PROPOSED RULES:**

310:555-1-2 [AMENDED]
310:555-1-4 [AMENDED]

**SUMMARY:**

The proposed changes will ensure direct communication of source patient test results from the testing facility to the exposed person or the physician or designee who is providing post exposure follow up to the exposed person. Antiviral medications are available which can prevent transmission of HIV to the exposed person, but these medications must be initiated within hours, rather than days of the exposure in order to be effective. Today, with the availability of Rapid HIV testing, which can provide HIV test results on the source patient within 20 minutes, providers can use these test results to quickly evaluate the need to treat the exposed person with antiviral medications. A process which promotes direct notification of source results to either the person exposed, or to the provider who is providing post exposure evaluation and/or counseling is necessary to facilitate timely administration of appropriate prophylaxis.

**AUTHORITY:**

Oklahoma State Board of Health; 63 O.S. 1988, Section 1-502.1 (B)

**COMMENT PERIOD:**

August 15, 2003 through September 18, 2003. Interested persons may discuss informally the proposed rules with Jan Fox, HIV/STD Division; or may before September 18, 2003, submit written comment to Jan Fox, HIV/STD Division, Oklahoma State Department of Health, 1000 N.E. 10th Street, Oklahoma City, OK 73117-1299; or may at the hearing ask to present written or oral views.

**PUBLIC HEARING:**

Part of the regular meeting of the State Board of Health, September 18, 2003, which begins at 1:00 p.m. in Room 307 of the State Health Department Building, 1000 N.E. 10th Street, Oklahoma City, Oklahoma.

**REQUESTS FOR COMMENTS FROM BUSINESS ENTITIES:**

Business entities affected by these proposed rules are requested to provide the agency with information, in dollar amounts if possible, about the increase in level of direct costs, indirect costs, or other costs expected to be incurred by the business entity due to compliance with the proposed rules. Business entities may submit this information in writing before September 18, 2003 to Jan Fox, HIV/STD Division, Oklahoma State Department of Health, 1000 N.E. 10th Street, Oklahoma City, OK 73117-1299, or by e-mail to Janf@health.state.ok.us.

**COPIES OF PROPOSED RULES:**

The proposed rules may be obtained for review from staff of the HIV/STD Division, Oklahoma State Department of Health, 1000 N.E. 10th Street, Oklahoma City, OK 73117-1299.

**RULE IMPACT STATEMENT:**

Pursuant to 75 O.S., §303(D), a rule impact statement will be prepared and will be available beginning August 15, 2003 at the same location listed above for reviewing and obtaining copies of the proposed rules.

**CONTACT PERSON:**

Jan Fox, HIV/STD Division, (405) 271-4636

*[OAR Docket #03-3015; filed 7-23-03]*

## TITLE 318. HIGHWAY CONSTRUCTION MATERIALS TECHNICIAN CERTIFICATION BOARD
## CHAPTER 20. COMPLAINTS AND INDIVIDUAL PROCEEDINGS

*[OAR Docket #03-3014]*

**RULEMAKING ACTION:**

Notice of proposed PERMANENT rulemaking

**PROPOSED RULES:**

318:20-1-1 Purpose [NEW]
318:20-1-2 Complaint procedures; forms [NEW]
318:20-1-3 Investigation of alleged violations [NEW]
318:20-1-4 Parties to proceedings [NEW]
318:20-1-5 Notice of hearing [NEW]
318:20-1-6 Persons to be notified [NEW]
318:20-1-7 Method of service [NEW]
318:20-1-8 Time for hearing [NEW]
318:20-1-9 Hearing [NEW]
318:20-1-10 Hearing Officer [NEW]
318:20-1-11 Failure to appear [NEW]
318:20-1-12 Subpoenas [NEW]
318:20-1-13 Depositions [NEW]
318:20-1-14 Record of Hearing [NEW]
318:20-1-15 Rehearing [NEW]
318:20-1-16 Appeal [NEW]

**SUMMARY:**

Neither the Rules nor the authorizing statute require highway construction materials technicians to be certified. Rather, the requirement is imposed by the Oklahoma Department of Transportation and other owners who demand quality materials and construction. The function of the Board, operating through its Rules, is to ensure that certified technicians and those claiming certification meet high standards. Section 318:10-1-9, Administrative Proceedings in Chapter 10 of the present Rules, states that "The Board shall comply with the Oklahoma Administrative Proceedings Act when conducting an individual proceeding against a construction materials technician." Section 318:10-1-10, Grounds for Discipline, lists "Gross negligence and Misconduct" as grounds for discipline. **The proposed new Chapter 20 supplements the Chapter 10 sections by giving specific guidance in disciplinary procedural matters.**

**AUTHORITY:**

69 O.S. Supp. 2000, § 195; Highway Construction Materials Technician Certification Board.

**COMMENT PERIOD:**

Persons wishing to present their views orally or in writing may do so by visiting, calling, mailing, facsimiling, or e-mailing their comments to the contact person shown below.

Comments will be received until the scheduled public hearing set forth below.

**PUBLIC HEARING:**

September 15, 2003 at 10:00 a.m.
Materials Division Conference Room
Oklahoma Department of Transportation
200 N. E. 21st Street
Oklahoma City, OK 73105

**REQUESTS FOR COMMENTS FROM BUSINESS ENTITIES:**

The Board requests that business entities affected by these proposed rules provide it, within the comment period, in dollar amounts if possible, the increase in the level of direct costs such as fees, and the indirect costs such as reporting, recordkeeping, equipment, construction, labor, professional services, revenue loss, or other costs expected to be incurred by the particular business entity due to compliance with the proposed rules. Business entities may submit this information in writing to Scott Seiter, at the address below, before the close of the comment period on September 14, 2003.

**COPIES OF PROPOSED RULES:**

Materials Division
Oklahoma Department of Transportation
200 N. E. 21st Street
Oklahoma City, OK 73105
and
Training Center
Oklahoma Department of Transportation
1025 S. E. 59th Street
Oklahoma City, OK 73129

**RULE IMPACT STATEMENT:**

Pursuant to 75 O.S. § 303(D), a rule impact statement will be prepared prior to August 30, 2003, and may be obtained from the Board at the address below.

**CONTACT PERSON:**

Scott Seiter, Materials Division
Oklahoma Department of Transportation
200 N. E. 21st Street
Oklahoma City, OK 73105
(405) 521-2677
Facsimile: (405) 522-0552
E-Mail: **sseiter@odot.org**

*[OAR Docket #03-3014; filed 7-23-03]*

# Withdrawn Rules

An agency may withdraw proposed PERMANENT rules prior to final adoption (approval by Governor/Legislature) by notifying the Governor and the Legislature and by publishing a notice in the *Register* of such a withdrawal.

An agency may withdraw proposed EMERGENCY rules prior to approval/disapproval by the Governor by notifying the Governor, the Legislature, and the Office of Administrative Rules. The withdrawal notice is not published in the *Register*, however, unless the agency published a Notice of Rulemaking Intent in the *Register* before adopting the EMERGENCY rules.

*For additional information on withdrawal of proposed rules, see 75 O.S., Section 308(F) and 253(K) and OAC 655:10-7-33.*

## TITLE 535. OKLAHOMA STATE BOARD OF PHARMACY
## CHAPTER 1. ADMINISTRATIVE OPERATIONS

*[OAR Docket #03-2097]*

**RULEMAKING ACTION:**

Withdrawal of EMERGENCY rulemaking

**WITHDRAWN RULES:**

Subchapter 14. Scheduled or Controlled Dangerous Substances Classifications or Exclusions

535:1-14-5. Controlled dangerous drugs moved from a Schedule I to Schedule III [NEW]

**DATES:**

**Adoption:**

May 22, 2003

**Submitted to Governor:**

May 28, 2003

**Submitted to House:**

May 28, 2003

**Submitted to Senate:**

May 28, 2003

**Withdrawn:**

July 9, 2003

*[OAR Docket #03-2097; filed 7-14-03]*

# Emergency Adoptions

An agency may adopt new rules, or amendments to or revocations of existing rules, on an emergency basis if the agency determines that "an imminent peril exists to the preservation of the public health, safety, or welfare, or that a compelling public interest requires an emergency rule[s] . . . . [A]n agency may promulgate, at any time, any such [emergency] rule[s], provided the Governor first approves such rule[s]" [75 O.S., Section 253(A)].

An emergency action is effective immediately upon approval by the Governor or on a later date specified by the agency in the preamble of the emergency rule document. An emergency rule expires on July 15 after the next regular legislative session following promulgation, or on an earlier date specified by the agency, if not already superseded by a permanent rule or terminated through legislative action as described in 75 O.S., Section 253(H)(2).

Emergency rules are not published in the *Oklahoma Administrative Code*; however, a source note entry, which references the *Register* publication of the emergency action, is added to the *Code* upon promulgation of a superseding permanent rule or expiration/termination of the emergency action.

*For additional information on the emergency rulemaking process, see 75 O.S., Section 253.*

## TITLE 160. DEPARTMENT OF CONSUMER CREDIT
## CHAPTER 5. FEES

*[OAR Docket #03-2094]*

**RULEMAKING ACTION:**
EMERGENCY adoption
**RULES:**
160:5-1-2 [AMENDED]
**AUTHORITY:**
Administrator of Consumer Credit; 14A O.S., §6-104(1)(e)
**DATES:**
**Adoption:**
June 13, 2003
**Approved by Governor:**
July 1, 2003
**Effective:**
Immediately upon Governor's approval
**Expiration:**
Effective through July 14, 2004, unless superseded by another rule or disapproved by the Legislature
**SUPERSEDED EMERGENCY ACTIONS:**
n/a
**INCORPORATION BY REFERENCE:**
n/a
**FINDING OF EMERGENCY:**
The Administrator of Consumer Credit finds that there is a compelling public interest requiring an emergency amendment to the existing rule. The compelling public interest is the creation of new licenses and licensing requirements that are effective July 1, 2003, pursuant to House Bill 2009 from the 2002 Second Regular Session of the 48th Legislature and House Bill 1574 from the 2003 First Regular Session of the 49th Legislature.
**ANALYSIS:**
The amended rule adds new fees for mortgage brokers and mortgage loan originators pursuant to House Bill 2009 from the 2002 Second Regular Session of the 48th Legislature.
**CONTACT PERSON:**
Cindy Barrett, Deputy Administrator, Department of Consumer Credit, 4545 N. Lincoln Boulevard, Suite 104, Oklahoma City, OK 73105, 405-522-4660.

**PURSUANT TO THE ACTIONS DESCRIBED HEREIN, THE FOLLOWING EMERGENCY RULES ARE CONSIDERED PROMULGATED AND EFFECTIVE UPON APPROVAL BY THE GOVERNOR AS SET FORTH IN 75 O.S., SECTION 253(D):**

**160:5-1-2. Fees**

Fees charged by the Department are as follows:

(1) Supervised Lenders

(A) $150.00 application fee for license, except that for any license granted after June 30, the fee shall be $75.00 [14A:3-503(1)]

(B) $225.00 investigation fee for license [14A:3-503(1)]

(C) $150.00 annual renewal fee [14A:3-504(5)] and a $50.00 late fee for a late application for renewal of a license received after December 1 [14A:3-504(5)]

(D) For any examination under one-half hour, no fee. For any examination over one-half hour up to eight (8) hours, $300.00. For any examination in excess of eight (8) hours, $300.00 plus $50.00 per examiner per hour for each full hour, or pro rata for each partial hour, over eight (8) hours. A $50.00 late fee shall be imposed when the examination fee is not received within thirty (30) days of the invoice date. No licensee shall be assessed a total fee in excess of Six Hundred Fifty Dollars ($650.00) for each licensed office in any calendar year. [14A:3-506(1)]

(E) No fees shall be refunded when a license is suspended or revoked.

(F) $25.00 fee for a duplicate or amended license [14A:3-504(5)]

(G) $25.00 fee for a returned check [14A:3-506(10)]

(2) Notifications

(A) $20.00 annual filing fee [14A:6-203(1)]

(B) sellers, lessors, lenders and assignees shall pay the $20.00 annual filing fee plus $10.00 per $100,000.00 of business conducted in Oklahoma [14A:6-203(2) and (3)]

(3) Pawnbrokers

(A) $100.00 application fee for license, except that for any application filed after June 30, the fee shall be $50.00 [59:1505(A)]

(B) $125.00 investigation fee for license [59:1505(A)]

(C) $100.00 annual renewal fee [59:1506(C)]

(D) $200.00 annual examination fee [59:1508(A)]

(E) No fees shall be refunded when a license is suspended or revoked.

(4) Rent-to-Own Businesses

(A) $100.00 application fee for license, except that for any application filed after June 30, the fee shall be $50.00 [59:1953]

(B) $100.00 annual renewal fee [59:1953]
(C) $200.00 annual examination fee [59:1955(B)]
(D) No fees shall be refunded when a license is suspended or revoked.

(5) Health Spas
(A) $200.00 initial registration fee [59:2002(A)(4)]
(B) $200.00 annual renewal fee [59:2002(A)(4)]
(C) The initial registration fee shall be applied without regard to the date of filing, and no fees shall be refunded when a license is suspended or revoked.

(6) Credit Services Organizations
(A) $100.00 application fee for license [24:143(A)]
(B) $100.00 investigation fee for license [24:143(A)]
(C) $100.00 annual renewal fee [24:143(A)]
(D) $200.00 annual examination fee [24:146(A)]
(E) The application fee for license shall be applied without regard to the date of filing, and no fees shall be refunded when a license is suspended or revoked.

(7) Precious Metals and Gem Dealers
(A) $50.00 application fee for license for dealers, $25.00 application fee for license for each employee [59:1525(A) and (B)]
(B) $50.00 investigation fee for license [59:1525(A)]
(C) $50.00 annual renewal fee for dealers, $25.00 annual renewal fee for each employee [59:1526(A) and (B)]
(D) The application fee for license shall be applied without regard to the date of filing, and no fees shall be refunded when a license is suspended or revoked.

(8) Mortgage Brokers
(A) ~~$500.00~~$750.00 application fee for a mortgage broker license; this fee ~~is non-refundable and is required of each applicant~~shall be applied without regard to the ~~number of licenses sought or the~~ date of filing [59:2085(A)(2)]
(B) $300.00 initial license fee for a mortgage broker license [~~59:2085(C)~~59:2085(I)(1)]; this fee shall be applied without regard to the date of filing.
(C) $300.00 triennial renewal fee for a mortgage broker license [~~59:2085(C)~~59:2085(I)(1)]
(D) ~~The initial license fee shall be applied without regard to the date of filing, and no fees shall be refunded when a licensee is on probation or had its license suspended or revoked.~~ $25.00 late fee per day for a late application for renewal of a mortgage broker license received after December 31 and on or before January 31 [59:2085(D)]
(E) $150.00 triennial license fee for a branch office license [59:2085(I)(2)]; this fee shall be applied without regard to the number of licenses sought or the date of filing.
(F) $50.00 inactive status fee for a mortgage broker license [59:2085(I)(3)]
(G) Reactivation fees for a mortgage broker license [59:2085(F)]
(i) If a mortgage broker license has been inactive for one licensing year, then the reactivation fee is $200.
(ii) If a mortgage broker license has been inactive for two consecutive licensing years, then the reactivation fee is $100.
(iii) If a mortgage broker license is reactivated during an inactive license year, then the reactivation fee is the prorated portion of the $300 license fee to cover the remainder of the three-year license period.
(H) $10.00 change of address fee [59:2085(H) and (I)(4)]
(I) $100.00 initial license fee for a mortgage loan originator license [59:2085(I)(5)]; this fee shall be applied without regard to the date of filing.
(J) $100.00 triennial renewal fee for a mortgage loan originator license [59:2085(I)(5)]
(K) $150.00 license test fee; this fee is required for each test taken without regard to test results or the number of times that a person takes the test [59:2092(C)]
(L) Test handbook fee equal to the actual cost of producing and distributing the handbook [59:2092(E)]
(M) All fees are non-refundable unless the Act or these rules require otherwise.

(9) Other
(A) $0.25 fee per page for copies [51:24A.5(3)]
(B) $1.00 fee per copied page for a certified copy [51:24A.5(3)]
(C) Reasonable search fee of the hourly rate of lowest paid employee capable of performing search when records are requested solely for commercial purpose or the request would clearly cause excessive disruption of the Department's essential functions [51:24A.5(3)]

*[OAR Docket #03-2094; filed 7-11-03]*

---

## TITLE 160. DEPARTMENT OF CONSUMER CREDIT
## CHAPTER 55. MORTGAGE BROKERS

*[OAR Docket #03-2095]*

**RULEMAKING ACTION:**
EMERGENCY adoption
**RULES:**
Subchapter 1. General Provisions
160:55-1-1 [AMENDED]
160:55-1-2 [AMENDED]
Subchapter 3. Licensing
160:55-3-1.1 [AMENDED]
160:55-3-1.2 [AMENDED]
160:55-3-1.3 [NEW]
160:55-3-3 [AMENDED]
160:55-3-3.1 [AMENDED]
160:55-3-4 [AMENDED]
160:55-3-8 [AMENDED]
160:55-3-9 [AMENDED]

160:55-3-9.1 [AMENDED]
160:55-3-10.1 [NEW]
Subchapter 5. Advisory Committee
160:55-5-2 [AMENDED]
Subchapter 7. Records
160:55-7-1 [AMENDED]
Subchapter 9. Enforcement
160:55-9-2 [AMENDED]
160:55-9-3 [AMENDED]
160:55-9-4 [AMENDED]
160:55-9-6 [AMENDED]

**AUTHORITY:**
Administrator of Consumer Credit; 59 O.S., §§2084 and 2085(A)(1) and 75 O.S., §302(A)(2)

**DATES:**
**Adoption:**
June 13, 2003
**Approved by Governor:**
July 1, 2003
**Effective:**
Immediately upon Governor's approval
**Expiration:**
Effective through July 14, 2004, unless superseded by another rule or disapproval by the Legislature

**SUPERSEDED EMERGENCY ACTIONS:**
n/a

**INCORPORATION BY REFERENCE:**
n/a

**FINDING OF EMERGENCY:**
The Administrator of Consumer Credit finds that there is a compelling public interest requiring emergency rules and emergency amendments to existing rules. The compelling public interest is the creation of new licenses and licensing requirements that are effective July 1, 2003, pursuant to House Bill 2009 from the 2002 Second Regular Session of the 48th Legislature and House Bill 1574 from the 2003 First Regular Session of the 49th Legislature.

**ANALYSIS:**
The new rules and amended rules provide regulations for the new mortgage loan originator license and branch office license and new licensing requirements for mortgage broker licenses pursuant to House Bill 2009 from the 2002 Second Regular Session of the 48th Legislature and House Bill 1574 from the 2003 First Regular Session of the 49th Legislature.

**CONTACT PERSON:**
Cindy Barrett, Deputy Administrator, Department of Consumer Credit, 4545 N. Lincoln Boulevard, Suite 104, Oklahoma City, OK 73105, 405-522-4660.

**PURSUANT TO THE ACTIONS DESCRIBED HEREIN, THE FOLLOWING EMERGENCY RULES ARE CONSIDERED PROMULGATED AND EFFECTIVE UPON APPROVAL BY THE GOVERNOR AS SET FORTH IN 75 O.S., SECTION 253(D):**

## SUBCHAPTER 1. GENERAL PROVISIONS

### 160:55-1-1. Purpose

The rules in this chapter provide regulations relating to the licensure of mortgage brokers and mortgage loan originators.

### 160:55-1-2. Definitions

Except as otherwise specifically defined in this section, the definitions set forth in the Act are incorporated herein and made a part hereof. The following words or terms, when used in this chapter, shall have the following meaning unless the context clearly indicates otherwise:

**"Act"** means the Oklahoma Mortgage Broker Licensure Act beginning at §2081 of Title 59 of the Oklahoma Statutes.

**"APA"** means the Administrative Procedures Act beginning at §250 of Title 75 of the Oklahoma Statutes.

**"Committee"** means the Mortgage Broker Advisory Committee.

**"Days"** mean calendar days. In computing any period of time for communications between a ~~licensee~~person and the Department or a court, the day of the event from which the designated period of time begins to run shall not be included. The last day of the period so computed shall be included, unless it is a day that the ~~mortgage brokerage~~licensed location, the Department or the office of the court clerk is closed.

**"Department"** means the Oklahoma State Department of Consumer Credit.

**"Deputy Administrator"** means the Deputy Administrator of the Department.

~~**"Licensee"** means a mortgage broker that has been given authority by the Administrator to engage in the business of a mortgage broker within Oklahoma.~~

**"Mortgage ~~brokerage~~business"** means the ~~business or establishment of a~~trade that involves the making, negotiating or offering to make or negotiate any loan secured by a mortgage~~ broker~~, deed of trust or any lien interest on residential real estate created with the consent of the owner of the real estate.

## SUBCHAPTER 3. LICENSING

### 160:55-3-1.1. Licensure forms

(a) **~~Application~~License application.**

(1) The license application shall be completed by the ~~entity~~person seeking a mortgage broker license or a mortgage loan originator license and shall include all fees, forms and exhibits requested.

(2) The Administrator may require any applicant to provide additional information. An application is not considered final until all requested information has been submitted and the applicant has passed a license test, if required. [59:2085(A)(1)(c), (A)(9) and (L)(4), and 2092(B)]

(3) The Administrator shall grant or deny a license application within ~~sixty (60)~~thirty (30) days from ~~the filing of a~~ final application unless the period is extended by written agreement between the applicant and the Administrator. [59:2085(C)]

(4) ~~If the applicant fails to comply with the application process, the initial license fee shall be returned to the applicant, but the Administrator shall retain the application fee.~~ An application that is not reviewed for any failure on the part of the applicant shall be deemed to be a withdrawal of the application and not a denial. If any applicant pays for a license test, but does not take the license test, the license test fee shall be returned to the applicant. If an applicant for a mortgage broker license fails to comply with

the application process, the initial license fee shall be returned to the applicant, but the Administrator shall retain the application fee.

(b) **License test.** The examination approved by the Administrator that is required to be taken and passed by applicants for mortgage broker licenses, unless waived by the Administrator. [59:2085(A)(1)(c) and (A)(9), and 2092(A) and (B)] The examination approved by the Administrator that is required to be taken and passed by applicants for mortgage loan originator licenses that do not have the required experience, unless waived by the Administrator. [59:2085(A)(9) and (L)(4), and 2092(A) and (B)]

(c) ~~License~~**Licenses.** No license is transferable or assignable. [59:2085(A)(7)] Expired licenses shall not be renewed; however, a new license may be issued if the applicant satisfies all of the licensing requirements of an initial license. [59:2085(D)]

(1) **Mortgage broker license.** The license, executed under the hand of the Administrator and delivered, is evidence of a ~~mortgage broker's~~person's authority to engage in the mortgage business within Oklahoma. The license shall be prominently displayed in an area of the ~~mortgage brokerage~~principal place of business that is used or visited by a majority of the borrowers [59:2085(G)]. ~~The license is not transferable or assignable.~~

(2) **Mortgage loan originator license.** The license, executed under the hand of the Administrator and delivered, is evidence of an individual's authority to make, negotiate or offer to make or negotiate a mortgage loan for or on behalf of a mortgage broker.

(3) **Branch office license.** The license, executed under the hand of the Administrator and delivered, is evidence of a location in addition to the principal place of business noted on the mortgage broker license where mortgage business may be transacted. Any branch office license shall be prominently displayed in an area of the branch office that is used or visited by a majority of the borrowers [59:2085(H)].

(~~c~~d) **Renewal application.**

(1) The license renewal application shall be completed by ~~entities~~persons previously issued a license and shall be submitted with all fees and postmarked on or before the first day of December of the final year of validity of each license. As a courtesy, the Department may ~~mail~~send a notice of renewal to each ~~licensee~~person, but the failure to do so shall not relieve any ~~licensee~~person of the duty to renew timely or impair the authority of the Administrator against any ~~licensee~~person.

(2) If the license is not renewed by December 15 of the final year of validity of each license, a delinquency notice shall be sent to the person. If the license is not renewed by December 31, the license shall be suspended. A suspended license may be renewed with a completed license renewal application submitted with all fees and postmarked on or before January 31. If the license is not renewed by January 31, the license shall expire. [59:2085(D)]

~~(d) **Delinquency notice.** If the license is not renewed, a delinquency notice shall be mailed to the licensee. The license shall expire on December 31 of the year in which the fee has been paid or fifteen (15) days after the notice, whichever is later.~~

(e) **Inactive and reactivation applications.** In lieu of renewal, a mortgage broker may place its license on inactive status for the following license year by completing an inactive application and submitting the application with its license and fee postmarked on or before the first day of December of the final year of validity of the license. [59:2085(E)] If a mortgage broker applies for inactive status when the license is not eligible for inactive status, the Administrator shall notify the mortgage broker that the license is subject to the renewal requirements.

(1) At the end of the first inactive license year, the mortgage broker shall complete an inactive application or a reactivation application and submit it with the proper fee postmarked on or before the first day of December. [59:2085(E) and (F)] If a mortgage broker applies for inactive status when the license is not eligible for inactive status, the Administrator shall notify the mortgage broker that the license is subject to the reactivation requirements.

(2) If the mortgage broker license is on inactive status for two (2) consecutive years, then at the end of the second inactive license year, the mortgage broker shall complete a reactivation application and submit it with the fee postmarked on or before the first day of December. [59:2085(E) and (F)]

(3) If a mortgage broker license is not inactivated or reactivated by December 31, then the license shall expire. [59:2085(E)]

(4) During an inactive license year, the mortgage broker license may be reactivated for the remainder of the three-year license period by completing a reactivation application and submitting the application with the fee. [59:2085(F)]

**160:55-3-1.2. Experience or educational requirement**

(a) To apply for a mortgage broker license, an applicant shall provide satisfactory evidence of ~~at least two years' continuous employment or business activity in the residential mortgage loan industry or real estate sales or lending industry, or both~~the required experience or graduation from an institution of higher education or a vocational school with a degree in a discipline that directly relates to the occupation of a mortgage broker. [59:2085(A)(1)(a) and (b)]

(b) To apply for a mortgage loan originator license, an applicant may provide satisfactory evidence of the required experience [59:2085(L)(4)].

(c) ~~A letter from the previous employer may satisfy this requirement.~~Satisfactory evidence for experience includes, but is not limited to, W-2 forms and 1099 forms.

(d) For purposes of this section, "applicant" means an individual; an owner of a sole proprietorship; the stockholders or three largest stockholders and the officers, directors and trustees of a corporation; the partners, principals, officers

and directors of a partnership or limited liability company. ~~[59:2085(A)(1)]~~

**160:55-3-1.3. Active management requirement**

An individual is in active management of the activities of a licensed person when the individual supervises the mortgage business operations on a full-time basis.

**160:55-3-3. Investigations for licensure**

A thorough investigation shall be conducted of each applicant for a mortgage broker license, and applicants shall provide such additional information as may be requested from the applicant for that purpose. In addition, the Administrator may consult outside sources, including law enforcement agencies, and may require the applicant's consent to release such other relevant information as the Administrator may deem necessary to determine the moral character, experience, background, honesty, truthfulness, integrity and competency of the applicant, any responsible individual designated by the applicant and any officer, director, shareholder or other interested party of the applicant [59:2085(A)(1) and ~~(D) and 2088(B)~~(2)]. It shall be within the discretion of the Administrator to determine the fitness of an applicant, provided that such discretion is not arbitrary or capricious and is, or will be, applied uniformly to all similarly situated applicants.

**160:55-3-3.1. License denials**

(a) **Denial notice.** The Administrator shall notify the applicant of the denial of a license application in writing stating the reasons for the denial~~, and the initial license fee shall be returned to the applicant, but the Administrator shall retain the application fee~~. The notice shall be sent by certified mail with return receipt requested or be delivered in person. If an applicant for a mortgage broker license is denied a license, the initial license fee shall be returned to the applicant, but the Administrator shall retain the application fee.

(b) **Hearing request.** The applicant may make a written request for a hearing on the application within thirty (30) days of receipt of the denial notice.

(c) **Hearing notice.**

(1) If the applicant makes a timely request for a hearing, a hearing shall be held within sixty (60) days of receipt of the request. However, the applicant shall be given twenty (20) days notice of the hearing in writing.

(2) The notice shall:

(A) state the time, place and nature of the hearing;

(B) state the legal authority and jurisdiction for the hearing;

(C) refer to the statutory sections and rules involved; and

(D) state the matters asserted briefly and plainly [75:309(B)(1) - (4)].

(d) **Hearing.** All parties shall be afforded the opportunity to respond and present evidence and argument on all points at issue [75:309(C)], and shall have the right to counsel [75:310(5)].

(e) **Order.**

(1) The Administrator shall issue an order granting or denying the license application within sixty (60) days from the last day of the hearing unless the period is extended by written agreement between the applicant and the Administrator.

(2) The order shall:

(A) be in writing;

(B) state findings of fact that shall be limited to the evidence from the hearing unless the parties agree otherwise on the record;

(C) state conclusions of law; and

(D) be delivered in person or by certified mail with return receipt requested [75:309(H) and 312].

**160:55-3-4. Licensure periods**

~~(a) Licenses issued before December 31, 1997, shall expire December 31, 2000.~~

~~(b) The first three-year licensure period after December 31, 1997, shall run from January 1, 1998, through December 31, 2000.~~ Any license issued during a year shall run only to ~~the end~~December 31 of the third calendar year.

**160:55-3-8. Change of ~~ownership~~control**

(a) ~~Thirty~~At least thirty (30) days before any proposed change of ~~ownership~~control of any licensed mortgage ~~brokerage~~broker, the ~~licensed owner~~mortgage broker shall notify the Administrator of the intent to change ~~ownership~~control, and the ~~proposed new owner~~acquiring person shall apply for a mortgage broker license and branch office licenses, if any. The Administrator shall notify the ~~licensed owner~~mortgage broker and the ~~proposed new owner~~acquiring person when the ~~new owner's~~acquiring person's mortgage broker license application has been granted. After the ~~licensed owner~~mortgage broker surrenders its mortgage broker license and branch office licenses, if any, and transfers ~~the ownership~~controlling interest, a mortgage broker license and branch office licenses, if any, shall be issued to the ~~new owner~~acquiring person. [59:2085(A)(7)]

(b) If the change of ~~ownership~~control results in the closing of ~~the existing location~~any locations, then the ~~licensed owner~~mortgage broker shall post an announcement on the front door listing the name, business telephone number and mailing and business addresses of the ~~new owner~~acquiring person. The announcement shall be posted before ~~the ownership~~controlling interest is transferred and shall remain posted until the existing location closes. The ~~licensed owner~~mortgage broker shall certify to the Administrator the date the announcement was posted and shall attach a copy of the announcement.

(c) For purposes of this section, "change of ~~ownership~~control" means a change of an individual owner~~;~~, or a change of more than twenty percent (20%) in the power to vote outstanding shares of a licensed corporation, partnership, association or trust~~of partners; a change of the service agent or a change of the principal parties in interest in a corporation~~. [59:2085(A)(7)]

**160:55-3-9. Ownership of more than one ~~office~~location**

(a) ~~Each person who owns two (2) or more offices at which it has direct contact with the public, must separately license each such office.~~Any location, in addition to the principal place of business noted on the mortgage broker license, where the mortgage broker will transact mortgage business shall be licensed as a branch office [59:2085(H)].

(b) For purposes of this section, "~~offices which have direct contact with the public~~locations where mortgage business will be transacted" shall include any ~~place of business~~location at which:

(1) a mortgage loan application is provided, taken or completed in person, or

(2) a potential customer obtains information about the terms and conditions of ~~the licensee's~~mortgage loan services.

(c) For purposes of this section, the term "~~offices which have direct contact with public~~locations where mortgage business will be transacted" shall not include either:

(1) administrative offices at which only bookkeeping, billing or accounting duties are performed for separate ~~public~~ mortgage ~~brokerage offices~~business locations, or

(2) offices at which only independent contractors or their employees, or both, are located.

**160:55-3-9.1. Moving or closing a location**

(a) ~~An owner shall give~~At least thirty (30) days before the address of the principal place of business or a branch office is changed, the mortgage broker shall notify ~~written notice to~~ the Administrator ~~before a mortgage brokerage is moved, and the owner~~. The mortgage broker shall post an announcement on the front door listing the address of the new location. The announcement shall remain on the front door until the location changes. The ~~owner~~mortgage broker shall certify to the Administrator the date the announcement was posted and shall attach a copy of the announcement and any license that needs to be amended along with a change of address fee. [59:2085(H)]

(b) At least thirty (30) days before a location is to be closed, the mortgage broker shall notify the Administrator. The mortgage broker shall post an announcement on the front door listing the business telephone number and mailing and business address of another location, if any. The announcement shall remain posted until the existing location closes. The mortgage broker shall certify to the Administrator the date the announcement was posted and shall attach a copy of the announcement along with the license for the closing location.

**160:55-3-10.1. Loss or change of licensed mortgage broker sponsor**

(a) When a mortgage broker cancels the sponsorship of a mortgage loan originator, the mortgage broker shall submit the mortgage loan originator's license to the Department within three (3) business days.

(b) The Department shall return the license to the mortgage loan originator with the name of the new sponsoring mortgage broker after all requested forms, exhibits and information have been submitted.

(c) The Department's holding of the mortgage loan originator license does not change the licensure period.

(d) The person remains subject to all licensing and renewal requirements for the mortgage loan originator license whether the person or the Department holds the license.

## SUBCHAPTER 5. ADVISORY COMMITTEE

**160:55-5-2. Responsibilities**

(a) The Committee shall monitor the mortgage ~~brokerage~~ business in Oklahoma and shall recommend such policies or policy changes to the Commission deemed appropriate regarding the following subjects:

(1) the soundness and vitality of the industry;

(2) abuses or improper conduct in the industry;

(3) the sufficient availability of consumer credit to the people of Oklahoma for ~~residential mortgages~~mortgage loans; and

(4) a proper balance of interests between consumers and mortgage brokers and mortgage loan originators [59:2090(A)].

(b) The Commission may assign to the Committee such topics for advice and recommendation regarding the mortgage ~~brokerage industry~~business as the Commission may deem necessary from time to time, and shall set deadlines for the Committee to report back to the Commission with reports on its progress and advice [59:2090(A)].

(c) A recommendation under subsection (a) of this section or a report under subsection (b) of this section from the Committee shall be in writing and shall be placed on the next regular meeting agenda of the Commission.

(d) The Committee shall prepare licensing test forms for the Administrator's approval and the passing standard for the tests. It shall be within the discretion of the Administrator to approve the licensing test forms, provided that such approval shall not be unreasonably withheld when the content of the test forms covers the statutory topics. [59:2092(A)]

(e) The Administrator may also consult with, and seek the advice of, the Committee as the need may arise.

## SUBCHAPTER 7. RECORDS

**160:55-7-1. Records and changes**

(a) ~~Each licensee~~Mortgage brokers and mortgage loan originators shall preserve and make available such books and records related to ~~the mortgage brokerage~~their mortgage business for four (4) years from the date of the initial transaction between the ~~mortgage broker~~person and each borrower, or for two (2) years from the date of the final entry into such records is made thereon, whichever is later. Trust account records shall be preserved and made available for at least three (3) years after the date of final entries therein [59:2087(D)]. Employee background investigation records shall be preserved and made

available for at least two (2) years after employment is terminated [59:2085(A)(6)(b)]. The records shall be maintained for such time periods whether the ~~mortgage broker~~person is currently licensed or previously licensed. Upon licensing, ~~the licensee~~mortgage brokers and mortgage loan originators shall either designate a location or locations in Oklahoma where records shall be maintained or agree in writing to provide copies of records kept at an out-of-state location to the Department upon demand, and the records shall not be moved from the designated location unless the Administrator has given written approval for another location.

(b) Each ~~mortgage broker's~~person's records shall be maintained in compliance with the Act and these rules. Each ~~mortgage broker~~person shall ~~provide the Administrator with~~keep current the information ~~in regard to the licensee~~required for licensing by reporting any changes or additions to the Department~~. Any change of information in regard to the licensee shall be reported~~ within thirty (30) days of such change or addition unless the Act or these rules require otherwise.

## SUBCHAPTER 9. ENFORCEMENT

### 160:55-9-2. Individual proceedings

(a) **Allegations notice.** The Administrator shall notify the ~~licensee~~person of facts or conduct that warrant the intended action, and give the ~~licensee~~person an opportunity to show compliance with all lawful requirements for the retention of the license [75:314(C)(1)].

(b) **Violations.** Where the facts indicate that the ~~licensee~~person has not complied with all lawful requirements for the retention of the license, the Administrator may initiate any authorized action.

(c) **Informal disposition.** In order to avoid the expense and time involved in formal legal proceedings, it is the policy of the Administrator to afford ~~licensees~~persons who have engaged in unlawful acts and practices an opportunity to enter into stipulations, agreed settlements, consent orders or defaults when it appears to the Administrator that such procedure fully safeguards the public interest. The Administrator reserves the right in all matters to withhold the privilege of an informal disposition. All stipulations, agreed settlements, consent orders or defaults shall be public records.

(d) **Hearing notice.**

(1) If the matter is to be set for hearing, the ~~licensee~~person shall be given twenty (20) days notice in writing.

(2) The notice shall:

(A) state the time, place and nature of the hearing;

(B) state the legal authority and jurisdiction for the hearing;

(C) refer to the statutory sections and rules involved; and

(D) state the matters asserted briefly and plainly [75:309(B)(1) - (4)].

(e) **Hearing.** All parties shall be afforded the opportunity to respond and present evidence and argument on all points at issue [75:309(C)], and shall have the right to counsel [75:310(5)].

(f) **Standard of proof.** The standard of proof is clear-and-convincing evidence. Clear and convincing evidence is that measure or degree of proof which will produce in the mind of the trier of fact a firm belief or conviction as to the truth of the allegation sought to be established.

(g) **Order.**

(1) The Administrator shall issue an order within sixty (60) days from the last day of the hearing unless the period is extended by written agreement between the ~~licensee~~person and the Administrator.

(2) The order shall:

(A) be in writing;

(B) state findings of fact that shall be limited to the evidence from the hearing unless the parties agree otherwise on the record;

(C) state conclusions of law;

(D) state the effective date; and

(E) be delivered in person or by certified mail with return receipt requested [75:309(H) and 312].

(h) **Impair.** A probation, suspension or revocation shall not impair or affect the obligation of any preexisting lawful contract between the ~~licensee~~person and any borrower.

### 160:55-9-3. License surrender

Any ~~licensee~~person may surrender any license by delivering it to the Administrator with written notice of its surrender. Such surrender shall not affect the liability of the ~~licensee~~person for acts committed before the surrender of the license. A surrender shall not impair or affect the obligation of any preexisting lawful contract between the ~~licensee~~person and any borrower.

### 160:55-9-4. License reinstatement

The Administrator may reinstate suspended licenses or issue new licenses to a person whose license or licenses have been revoked if the Administrator finds that the ~~mortgage broker~~person meets the licensing requirements then in effect and if the Administrator finds the circumstances for which the license was suspended or revoked no longer exists.

### 160:55-9-6. Circumvention prohibited

Whenever a ~~licensee~~person has an administrative action taken against a license, the Administrator may deny the ~~licensee's~~person's request to inactivate such license, to sell or transfer the accounts under such license or to take any other action to circumvent or negate the administrative action during the time of the action or during the pendency of the action if on appeal.

*[OAR Docket #03-2095; filed 7-11-03]*

## TITLE 317. OKLAHOMA HEALTH CARE AUTHORITY
## CHAPTER 2. GRIEVANCE PROCEDURES AND PROCESS

*[OAR Docket #03-2099]*

**RULEMAKING ACTION:**
EMERGENCY adoption
**RULES:**
317:2-1-2.2. [AMENDED]
317:2-1-2.3. [AMENDED]
317:2-1-4. [AMENDED]
**(Reference APA WF # 03-03A)**
**AUTHORITY:**
The Oklahoma Health Care Authority Board; The Oklahoma Health Care Authority Act, Section 5003 through 5016 of Title 63 of Oklahoma Statutes; 42 CFR 455.15; 42 CFR 455.16(c)(4); 42 USC § 320a-7; 42 USC § 1396r-6
**DATES:**
**Adoption:**
April 10, 2003
**Approve by Governor:**
May 26, 2003
**Effective:**
Immediately upon Governor's approval
**Expiration:**
Effective through July 14, 2004, unless superseded by another rule or disapproved by the Legislature.
**SUPERSEDED EMERGENCY ACTIONS:**
N/A
**INCORPORATIONS BY REFERENCE:**
N/A
**FINDING OF EMERGENCY:**
The Agency finds that a compelling public interest exists which necessitates promulgation of emergency rules and requests emergency approval of revisions to assist the Agency in the prevention of abuse and misuse of the Medicaid program by recipients.
**ANALYSIS:**
Agency rules are revised to establish abuse and misuse regulations for recipients of Medicaid. Under federal Medicaid regulations, Oklahoma residents are entitled to Medicaid benefits if they meet the criteria established by the Oklahoma Health Care Authority. However, certain recipients have abused the program by certain affirmative actions. These actions damage the Medicaid program by causing an expenditure of monies that would not otherwise by spent, by causing more state taxpayer dollars to be spent than necessary, or by abusing their right to medical care. In many cases these actions are crimes but law enforcement activity does not ensue because of the dollar value of the activity involved. To counteract these recipient actions, the agency is promulgating these rules to take administrative action against individuals who abuse the entitlement given to them under federal law. Agency rules do not prohibit the state agency from referring these same acts to law enforcement entities who are charged with the responsibility of determining criminal liability. However, OHCA deems it important to act to reduce the expenditure of federal and state dollars prior to the actions of criminal investigation and prosecution. Federal law requires that persons who commit program related crimes such as misrepresentation of income or resources, misrepresentation of facts that cause Medicaid claims to be submitted, or abuse of the program be excluded from the program. Therefore, agency rules are in need of revision to establish abuse and misuse regulations for recipients of Medicaid.
**CONTACT PERSON:**
Joanne Terlizzi at (405)522-7272

**PURSUANT TO THE ACTIONS DESCRIBED HEREIN, THE FOLLOWING EMERGENCY RULES ARE CONSIDERED PROMULGATED AND EFFECTIVE UPON APPROVAL BY THE GOVERNOR AS SET FORTH IN 75 O.S., SECTION 253(D):**

### 317:2-1-2.2. Recipient appeals

(a) Hearings will be by a Program Panel, except in the case of tax warrant intercept appeals and proposed administrative sanction appeals (refer to OAC 317:35-13-7).

(1) The Program Panel will be composed of three or more members selected by the ALJ.

(2) The Program Panel may conduct a paper review of the complaint, or, at their option, hold a personal interview with the appellant to discuss the complaint. The Panel has the power to gather information it finds necessary from any available source, and thereafter, render a decision.

(3) The Panel must complete their paper review or conduct their formal personal interview and issue a majority decision within 25 days of the date stamped on the request for hearing.

(4) The Panel's decision shall be in writing and shall be signed by each of the Panel members. The decision shall contain a summary of the complaint and an explanation of the reasoning of the Panel in making their decision. If the decision of the Panel is adverse to the Managed Care Provider, a letter detailing the remedial actions to be taken by the Provider to correct the deficiency will be sent to the Provider. A copy of the decision will be sent to the member outlining the right to appeal the decision. The letter shall also be mailed to the Managed Care Provider. Any appeal of the Panel decision must be instituted within 15 days of the mailing of the adverse ruling, excepting recipient denials which are automatically appealed to the ALJ.

(5) A copy of the decision shall be forwarded to the docket clerk.

(b) Appeal from a decision of the Program Panel will be heard by the Administrative Law Judge. A decision will be rendered by the Administrative Law Judge within twenty (20) days of the appeal to the ALJ.

(c) Tax warrant intercept appeals will be heard directly by the ALJ. A decision will be rendered by the Administrative Law Judge within twenty (20) days of the hearing before the ALJ.

(d) Proposed administrative sanction appeals will be heard directly by the ALJ. A decision will be rendered by the ALJ within 20 days of the hearing before the ALJ. This is the final and only appeals process for proposed administrative sanctions.

### 317:2-1-2.3. Other grievance procedures and processes

Other grievance procedures and processes include:

(1) Surveillance, Utilization and Review System (SURS) appeals to the Medical Advisory Committee (MAC).

(A) If a provider disagrees with a decision of the Surveillance, Utilization and Review System Unit (SURS) which has determined that the provider has received an overpayment, the provider may appeal, within twenty (20) days of the date of that decision, the decision to a six member subcommittee of the

Medical Advisory Committee (MAC). The subcommittee shall be selected by the chairman of the MAC.

(B) The appeal from the SURS decision shall be commenced by the receipt of a letter from the appellant provider. The letter must set out with specificity, the overpayment decision to which the provider objects along with the grounds for appeal. The letter should explain in detail, the factual and/or legal basis for disagreement with the allegedly erroneous decision. The letter shall also include all relevant exhibits the provider believes necessary to decide the appeal.

(C) Upon the receipt of the appeal by the docket clerk, the matter shall be docketed for the next ~~quarterly~~ meeting of the MAC. Any appeal received less than four weeks before a scheduled MAC meeting will be set for the following ~~quarterly~~ MAC meeting.

(D) The appeal shall be forwarded to the SURS unit by the docket clerk for distribution to the members of the subcommittee and for preparation of the OHCA's case.

(E) At the discretion of the MAC, witnesses may be called and information may be solicited from any party by letter, telephonic communication, fax, or other means. The subcommittee may request that members of the Authority be present during their consideration of the appeal. Members of the Authority's Legal Division may be asked to answer legal questions regarding the appeal.

(F) The subcommittee shall issue a recommendation regarding the appeal, in writing, within 30 days of the hearing. An exception to the 30 day rule will apply in cases where the subcommittee sets the case over until its next scheduled meeting in order to gather additional evidence. The written recommendation shall list the members of the subcommittee who participated in the decision. In cases where an appeal must be continued, the subcommittee shall issue a letter within 30 days of the initial hearing to inform the appellant of the continuance.

(G) The recommendation, after being formalized, shall be sent to the docket clerk for review by the State Medicaid Director. The State Medicaid Director shall issue a decision regarding the appeal within 10 days of the docket clerk's receipt of the recommendation from the MAC. The decision shall be issued to the appellant or his/her authorized agent.

(H) If the provider is dissatisfied with the Medicaid Director's decision, it may be appealed to the CEO under OAC 317:2-1-4(1).

(2) This ~~subparagraph~~ paragraph explains the appeal process to be accorded all nursing home providers whose contracts are terminated, denied or nonrenewed. No procedure is afforded a nursing facility whose contract is limited in any other fashion.

(A) If a nursing home provider's contract is terminated, nonrenewed or denied prior to the action's effective date the provider will be afforded an informal reconsideration in accordance with 42 C.F.R. 431.154.

(B) The notice of termination, nonrenewal or, denial of contract shall include the findings it was based upon. The letter will be sent by certified mail to the provider.

(C) The provider will have 20 days to respond to the notice. The response should outline the reasons why the Authority's decision to terminate, nonrenew, or deny the contract is wrong. The response by the provider must include a detailed position addressing the findings set out in the Authority's letter. The provider may request an extension of the 20 day limit if "good cause" exists that prevents the provider from refuting the findings in 20 days. A finding of "good cause" is in OHCA's discretion.

(D) Based upon the provider's response, the Authority shall affirm or deny the notice of nonrenewal, termination or denial.

(E) If the Oklahoma Health Care Authority affirms the notice of termination, nonrenewal, or denial or the provider files no timely response, the effective date shall pass and upon affirmation of the notice the process described in OAC 317:2-1-2.1 and 317:2-1-2(b) & (c) shall apply.

(F) The hearing afforded the provider after the effective date shall satisfy the requirements of 42 C.F.R. 431.153.

(G) If the facility is a skilled nursing facility, the facility shall receive a notice as required by 42 C.F.R. 431.153(d)(1) and (d)(2).

(3) This subparagraph explains the administrative processes available to providers who have reviews completed by the Oklahoma Foundation for Medical Quality (OFMQ). The OFMQ conducts an administrative process for those providers it reviews. The process afforded providers by OFMQ is the only administrative remedy available to providers. The decision issued by the OFMQ is considered by the OHCA to be a final administrative determination. The final OFMQ determination is not appealable to the OHCA for any further administrative hearings. After OFMQ's decision, OHCA will recoup the monies paid the provider related to the review.

(4) The purpose of this subparagraph is to afford a process to both the manufacturer and the state to administratively resolve drug rebate discrepancies. These rules anticipate discrepancies between the manufacturer and OHCA which would require the manufacturer to pay a higher rebate or a lower rebate. These regulations provide a mechanism for both informal dispute resolution of drug rebate discrepancies between the manufacturer and OHCA and a mechanism for appeals of drug rebate discrepancies between the manufacturer and OHCA.

(A) The process begins at the end of each calendar quarter when the Authority shall mail a copy of the state's past quarter's utilization data to the manufacturer. Utilization data and a billing for rebates shall

be mailed to the manufacturer within 60 days after the end of each quarter. It is this data which dictates the application of the federal drug rebate formula.

(B) Within 30 days from the date utilization data is sent to the manufacturer, the manufacturer may edit state data and resolve data inconsistencies with the state. The manufacturer may utilize telephone conferences, letters and any other mechanism to resolve data inconsistencies in mutual agreement with the state.

(C) Within 30 days after the utilization data is mailed to the manufacturer, the manufacturer may;

(i) pay the same amount as billed by the state with the quarterly utilization data;

(ii) pay an amount which differs from the amount billed by the state with the utilization data and send disputed data information;

(iii) pay nothing and send no disputed data information;

(iv) pay nothing and send disputed data information.

(D) In the event the state receives the rebate amount billed by the thirtieth day, the dispute ends.

(E) If after 30 days one of the following events occurs, the state shall acknowledge the receipt of the correspondence and review the disputed data;

(i) the receipt of an amount lower than that billed to the manufacturer;

(ii) the receipt of disputed data.

(F) In the event no disputed data is received and no payment is received, interest shall be computed in accordance with the provisions of federal law found at 42 U.S.C. Section 1396b (d)(5)and shall be compounded upon the amount billed from 38 days after the date utilization data is sent.

(G) In the event a lower amount than billed is paid or in the event disputed data is sent, and no money is received, interest shall be computed in accordance with 42 U.S.C. Section 1396b (d)(5) and shall be computed from 38 days from the date utilization data is sent to the manufacturer.

(H) Within 70 days from the date utilization data is sent to the manufacturer, the state shall make its final informal review of the disputed data. OHCA shall mail a second notice to the manufacturer which shall include:

(i) receipt of the rebate, if any,

(ii) receipt of the dispute,

(iii) a statement regarding the interest amount, and

(iv) a statement regarding the appeal rights of the manufacturer with a copy of the appeal form.

(I) Within 90 days of the date utilization data is sent to the manufacturer or within 20 days of the date a second notice is mailed to the manufacturer, whichever is sooner, the state or the manufacturer may request a hearing to administratively resolve the matter.

(J) The administrative appeal of drug rebate discrepancies includes:

(i) The appeal process shall begin by the filing of a form LD-2 by the manufacturer or OHCA.

(ii) The process afforded the parties shall be the process found at OAC 317:2-1-2.1. The process provided by OAC 317:2-1-2(b)and (c) shall also apply to these hearings.

(iii) With respect to the computation of interest, interest shall continue to be computed from the 38 day based upon the policy contained in the informal dispute resolution rules above.

(iv) The ALJ's decision shall constitute the final administrative decision of the Oklahoma Health Care Authority.

(v) If the decision of the ALJ affirms the decision of the Authority in whole or in part, payment from the manufacturer must be made within 30 days of the decision. If the decision of the ALJ reverses the decision of the Authority, the Authority shall make such credit or action within 30 days of the decision of the ALJ.

(vi) The nonpayment of the rebate by the manufacturer within 30 days after the ALJ's decision shall be reported to the Health Care Financing Administration and may be the basis of an exclusion action by OHCA.

(5) This subparagraph explains the appeal process, pursuant to 63 O.S. (Supp. 1999) §5030.3(B), accorded any party aggrieved by a decision of the OHCA Board or Administrator (CEO) concerning a proposed recommendation of the Medicaid Drug Utilization Review Board (DUR).

(A) The aggrieved party may appeal pursuant to ~~OAC §317:2-1-2~~ OAC 317:2-1-2 et seq. (OHCA grievance rules).

(B) The Board finds that the prescription of Title 63 §5030.3(B) (Supp. 1999) is somewhat contradictory with the functions of the DUR Board. More specifically, in most instances, the DUR Board suggests policies that must be rulemade. Rules promulgated by the OHCA Board do not lend to an "individual proceeding notice" as contemplated by Article II of the Oklahoma Administrative Procedures Act, specifically, Title 75 §309. Thus, in instances where the OHCA Board promulgates rules as a result of policy recommendations by the DUR Board, this Board will consider a party aggrieved by these rules to have filed a Petition for Rulemaking under 75 §305. In making this interpretation of 63 §5030.1, the Board will not enforce the last sentence of 74 §305. In making this interpretation, the Board finds that it is taking two somewhat conflicting provisions, and combining them to effectuate the intent of the legislature - to provide a hearing to those aggrieved by recommendations by the DUR Board and accepted by the OHCA Board.

(C) In instances where the DUR Board makes a recommendation accepted by the Board against an individual provider ~~(~~ [for example, a recommendation under 42 U.S.C. §1396r-8(g)(3)(c)(iii)(IV)], OHCA will provide an individual proceeding under the Oklahoma Administrative Procedures Act.

(D) In any appeal under ~~subsections~~ subparagraphs (B) or (C) ~~above~~ of this paragraph, the OHCA Board delegates the OHCA ALJ to preside over the above hearing and present the Board with proposed findings of fact and conclusions of law in accordance with Article II of the Administrative Procedures Act. The OHCA Board shall either accept the ALJ's written decision, reject it, or amend the recommendations.

(E) Appeals filed pursuant to ~~subsections~~ subparagraphs (B) or (C) ~~above~~ of this paragraph, shall be made within twenty (20) days of the OHCA Board's acceptance of the recommendation by the DUR Board.

(F) After Proposed Findings of Fact and Conclusions of Law are presented to the OHCA Board, the Board shall have a period of 120 days to issue a final administrative order.

(G) The Agency's legal division shall construct a form called the LD-3, which shall be used for parties to file an action under ~~subsections~~ subparagraphs (B) and (C) ~~above~~ of this paragraph.

**317:2-1-4. Appeal to the Chief Executive Officer**

Appeal to the Chief Executive Officer (CEO) of the Oklahoma Health Care Authority shall include:

(1) Within 20 days of decisions made pursuant to provider or SURS appeals found at this Chapter, either party may appeal a decision to the CEO of the Authority. Such appeal shall be commenced by a letter or fax received by the CEO within 20 days of the receipt of the prior decision made by the ALJ or Medicaid Director. The appeal shall concisely and fully explain the reasons for the request. No new evidence may be presented to the CEO. Evidence presented must be confined to the records below.

(2) Appeals to the CEO under recipient proceedings shall be commenced by a letter received no later than ten 10 days of the receipt of the decision by the ALJ. Should the appellant request a transcription to prosecute its appeal to the CEO, the appellant shall be required to execute a waiver relieving the OHCA from completing a hearing within 90 days.

(3) For provider and SURS proceedings the CEO shall have 90 days from receipt of the appeal to render a written decision.

(4) For recipient proceedings, the CEO shall have 30 days from receipt of the appeal to render a written decision.

(5) The only appeal for proposed administrative sanctions is before the ALJ and the ALJ decision is not appealable to the CEO.

*[OAR Docket #03-2099; filed 7-17-03]*

## TITLE 317. OKLAHOMA HEALTH CARE AUTHORITY
## CHAPTER 25. SOONERCARE

*[OAR Docket #03-3002]*

**RULEMAKING ACTION:**
EMERGENCY adoption
**RULES:**
Subchapter 5. SoonerCare Plus
Part 3. Enrollment Criteria
317:25-5-13. [AMENDED]
Subchapter 7. SoonerCare Choice
Part 3. Enrollment Criteria
317:25-7-13. [AMENDED]
**(Reference APA WF 03-13C)**
**AUTHORITY:**
The Oklahoma Health Care Authority Board; The Oklahoma Health Care Authority Act, Section 5003 through 5016 of Title 63 of Oklahoma Statutes; Article 10, Section 23 of the Oklahoma Constitution; 42 CFR 435.301
**DATES:**
**Adoption:**
April 10, 2003
**Approved by Governor:**
May 26, 2003
**Effective:**
Immediately upon Governor's approval or July 1, 2003, whichever is later
**Expiration:**
Effective through July 14, 2004, unless superseded by another rule or disapproved by the Legislature.
**SUPERSEDED EMERGENCY ACTIONS:**
N/A
**INCORPORATIONS BY REFERENCE:**
N/A
**FINDING OF EMERGENCY:**
The Agency finds that a compelling public interest exists which necessitates promulgation of emergency rules and requests emergency approval of rule revisions to eliminate the Medically Needy Program. The state constitution requires all agencies to maintain a balanced budget. An emergency rule is necessary in order for the Agency to maintain a balanced budget as failure to do so would lead to a breach of the state constitution. Agency staff has estimated an annual budget savings of $960,000 state dollars.
**ANALYSIS:**
Agency rules are revised to eliminate the Oklahoma Medicaid Medically Needy Program. States have the option under the Medicaid program to extend coverage to individuals categorized as Medically Needy. Due to state government budget constraints, the OHCA Board voted on December 12, 2002, to eliminate coverage of medically needy individuals effective February 1, 2003. According to Article 10, Section 23 of the Oklahoma Constitution, all state agencies must maintain a balanced budget. In order for the Agency to accomplish the necessary financial reductions, rules are in need of revision to eliminate the Medically Needy Program.
**CONTACT PERSON:**
Joanne Terlizzi at (405)522-7272

**PURSUANT TO THE ACTIONS DESCRIBED HEREIN, THE FOLLOWING EMERGENCY RULES ARE CONSIDERED PROMULGATED UPON APPROVAL BY THE GOVERNOR AS SET FORTH IN 75 O.S., SECTION 253(D), AND EFFECTIVE UPON APPROVAL BY GOVERNOR OR JULY 1, 2003, WHICHEVER IS LATER:**

## SUBCHAPTER 5. SOONERCARE PLUS

## PART 3. ENROLLMENT CRITERIA

**317:25-5-13. Enrollment ineligibility**

Clients in certain categories are excluded from participation in the SoonerCare Plus program. All other clients are enrolled in Health Plans and subject to the provisions of this subchapter. Clients excluded from participation in SoonerCare Plus include:

(1) Individuals receiving services in a nursing facility or an intermediate care facility for the mentally retarded (ICF-MR) for a period in excess of 30 days.

(2) Individuals receiving services through a Home and Community Based Waiver.

(3) Individuals privately enrolled in a Health Plan if that enrollment is not through the SoonerCare Plus program.

(4) Individuals who would be required to travel more than 25 miles or an average of 45 minutes to obtain primary care services, as determined by the State.

(5) Individuals living in an area excluded from the program.

(6) ~~Medically needy individuals and individuals~~ Individuals with a retroactive eligibility period only.

(7) Children who are known to OHCA to be in custody. If such children are already enrolled in a Health Plan when they are taken into or found to be in custody, as reported by DHS, they are disenrolled by the OHCA effective on the day in which the action is documented by OHCA. Until such time as these children are disenrolled from a Health Plan, the Plan is fully responsible for all covered benefits under the terms of their contract.

(8) Individuals who are eligible for Medicaid solely due to presumptive eligibility.

(9) Illegal aliens.

(10) Children in subsidized adoptions.

(~~10~~11) Individuals eligible for Medicaid services because they are aged, blind or disabled and dually eligible for Medicare and Medicaid.

## SUBCHAPTER 7. SOONERCARE CHOICE

## PART 3. ENROLLMENT CRITERIA

**317:25-7-13. Enrollment ineligibility**

Clients in certain categories are excluded from participation in the SoonerCare Choice program. All other clients are enrolled in the SoonerCare Choice program and subject to the provisions of this Subchapter. Clients excluded from participation in SoonerCare Choice include:

(1) Individuals receiving services in a nursing facility, in an intermediate care facility for the mentally retarded (ICF-MR) or through a Home and Community Based Waiver.

(2) Individuals privately enrolled in a Health Plan or in a pilot project or demonstration model other than a PCCM system.

(3) Individuals who would be traveling more than 45 miles or an average of 45 minutes to obtain primary care services, or a greater or lesser distance/driving time as determined pursuant to OAC 317:25-7-10(a).

(4) Individuals living in an area excluded from the program.

(5) ~~Medically needy individuals and individuals~~ Individuals with a retroactive eligibility period only.

(6) Children who are known to the Authority to be in custody, as reported by the Department of Human Services.

(7) Individuals who are eligible for Medicaid solely due to presumptive eligibility.

(8) Illegal aliens.

(9) Children in subsidized adoptions.

(10) Individuals who are dually-eligible for Medicaid and Medicare.

*[OAR Docket #03-3002; filed 7-17-03]*

---

# TITLE 317. OKLAHOMA HEALTH CARE AUTHORITY
# CHAPTER 30. MEDICAL PROVIDERS-FEE FOR SERVICE

*[OAR Docket #03-3000]*

**RULEMAKING ACTION:**
EMERGENCY adoption
**RULES:**
Subchapter 3. General Provider Policies
Part 1. General Scope and Administration
317:30-3-14. [AMENDED]
**(Reference APA WF # 03-03B)**
**AUTHORITY:**
The Oklahoma Health Care Authority Board; The Oklahoma Health Care Authority Act, Section 5003 through 5016 of Title 63 of Oklahoma Statutes; 42 CFR 455.15; 42 CFR 455.16(c)(4); 42 USC § 320a-7; 42 USC § 1396r-6
**DATES:**
**Adoption:**
April 10, 2003
**Approved by Governor:**
May 26, 2003
**Effective:**
Immediately upon Governor's approval
**Expiration:**
Effective through July 14, 2004, unless superseded by another rule or disapproved by the Legislature.
**SUPERSEDED EMERGENCY ACTIONS:**
N/A
**INCORPORATIONS BY REFERENCE:**
N/A
**FINDING OF EMERGENCY:**
The Agency finds that a compelling public interest exists which necessitates promulgation of emergency rules and requests emergency approval of revisions to assist the Agency in the prevention of abuse and misuse of the Medicaid program by recipients.
**ANALYSIS:**
Agency rules are revised to establish abuse and misuse regulations for recipients of Medicaid. Under federal Medicaid regulations, Oklahoma residents are entitled to Medicaid benefits if they meet the criteria established by the Oklahoma Health Care Authority. However, certain recipients have

abused the program by certain affirmative actions. These actions damage the Medicaid program by causing an expenditure of monies that would not otherwise by spent, by causing more state taxpayer dollars to be spent than necessary, or by abusing their right to medical care. In many cases these actions are crimes but law enforcement activity does not ensue because of the dollar value of the activity involved. To counteract these recipient actions, the agency is promulgating these rules to take administrative action against individuals who abuse the entitlement given to them under federal law. Agency rules do not prohibit the state agency from referring these same acts to law enforcement entities who are charged with the responsibility of determining criminal liability. However, OHCA deems it important to act to reduce the expenditure of federal and state dollars prior to the actions of criminal investigation and prosecution. Federal law requires that persons who commit program related crimes such as misrepresentation of income or resources, misrepresentation of facts that cause Medicaid claims to be submitted, or abuse of the program be excluded from the program. Therefore, agency rules are in need of revision to establish abuse and misuse regulations for recipients of Medicaid.

**CONTACT PERSON:**

Joanne Terlizzi at (405)522-7272

**PURSUANT TO THE ACTIONS DESCRIBED HEREIN, THE FOLLOWING EMERGENCY RULES ARE CONSIDERED PROMULGATED AND EFFECTIVE UPON APPROVAL BY THE GOVERNOR AS SET FORTH IN 75 O.S., SECTION 253(D):**

## SUBCHAPTER 3. GENERAL PROVIDER POLICIES

## PART 1. GENERAL SCOPE AND ADMINISTRATION

**317:30-3-14. Freedom of choice**

(a) **Any Qualified provider.** The Medicaid Agency assures that any individual eligible ~~under Title XIX~~ for Medicaid, may obtain services from any institution, agency, pharmacy, person, or organization that is qualified to perform the services.

(b) **Recipient lock-in.** Medicaid recipients who have demonstrated Medicaid usage above the statistical norm, during a 12-month period, may be "locked-in" to one primary physician and/or one pharmacy in accordance with Federal Regulation 42 CFR 431.54.

(1) Over-utilization patterns by Medicaid recipients ~~are~~ may be identified either by referral or by OHCA automated computer systems. Medicaid records, for a 12-month period, of those identified recipients are then reviewed. Medical histories are ordered and reviewed by OHCA medical consultants to determine if high usage is medically justified.

(2) If it is determined that Medicaid has been over-utilized, the recipient ~~is~~ may be notified, by letter, of the need to select a primary physician and/or pharmacy and of their opportunity for a fair hearing. If they do not select a physician one is selected for them. The primary-care provider must be a general practice, family practice, OB-GYN, pediatrician or internal-medicine physician and currently be enrolled as a Medicaid provider. In some cases recipients may be sanctioned under OAC 317:35-13-7.

(3) The provider of choice, unless that provider has been identified as having problems with Medicaid over-utilization, is notified by letter and is given an opportunity to accept or decline to be the recipient's primary physician.

(4) When the provider accepts, a confirmation letter is sent to both recipient and provider showing the effective date of the arrangement. The recipient will be issued a monthly Medicaid identification card which will designate them as a participant in the lock-in program.

(5) After the lock-in arrangement is made, the provider may file claims for services provided in accordance with OHCA procedure.

(6) Locked-in recipients may obtain emergency services from an emergency room facility for an emergency medical condition or as part of an inpatient admission.

(7) Medicaid-compensable visits to a specialist are covered when referred by the primary-care physician. The primary-care physician must be shown as the referring physician on Item 17 of HCFA-1500 submitted by the specialist.

(8) If a claim is filed by another provider, it is reviewed to see if a referral was given or services were for an acute physical injury. Claims not meeting this criteria are denied and the recipient is responsible for charges.

(9) When a recipient is enrolled into the lock-in program, usage is monitored ~~quarterly~~ when necessary and reviewed every ~~12~~ 24 months. A provider may send a written request for recipient review. If review indicates utilization patterns meet lock-in removal criteria, the recipient may be removed from lock-in at the discretion of OHCA staff.

(10) During a review, OHCA may elect to continue lock-in, remove the recipient from lock-in because of medical necessity, ~~or~~ remove them because of decreased utilization, or impose sanctions under OAC 317:35-13-7.

(11) The recipient in the lock-in program may make a written request to change providers after the initial three months; when the recipient moves to a different city or if the recipient feels irreconcilable differences will prevent necessary medical care. Change of providers based on irreconcilable differences must be approved by OHCA staff.

(12) OHCA may make a provider change when the provider makes a written request for change or may initiate a change anytime it is determined necessary to meet program goals.

*[OAR Docket #03-3000; filed 7-17-03]*

## TITLE 317. OKLAHOMA HEALTH CARE AUTHORITY
## CHAPTER 30. MEDICAL PROVIDERS-FEE FOR SERVICE

*[OAR Docket #03-3001]*

**RULEMAKING ACTION:**
EMERGENCY adoption
**RULES:**
Subchapter 3. General Provider Policies
Part 3. General Medical Program Information
317:30-3-58. [REVOKED]
Part 5. Eligibility
317:30-3-70. [AMENDED]
317:30-3-71. [AMENDED]
317:30-3-72. [REVOKED]
317:30-3-84. [REVOKED]
Subchapter 5. Individual Providers and Specialties
Part 3. Hospitals
317:30-5-41. [AMENDED]
Part 5. Pharmacists
317:30-5-72. [AMENDED]
**(Reference APA WF 03-13A)**
**AUTHORITY:**
The Oklahoma Health Care Authority Board; The Oklahoma Health Care Authority Act, Section 5003 through 5016 of Title 63 of Oklahoma Statutes; Article 10, Section 23 of the Oklahoma Constitution; 42 CFR 435.301
**DATES:**
**Adoption:**
April 10, 2003
**Approved by Governor:**
May 26, 2003
**Effective:**
Immediately upon Governor's approval or July 1, 2003, whichever is later
**Expiration:**
Effective through July 14, 2004, unless superseded by another rule or disapproved by the Legislature.
**SUPERSEDED EMERGENCY ACTIONS:**
N/A
**INCORPORATIONS BY REFERENCE:**
N/A
**FINDING OF EMERGENCY:**
The Agency finds that a compelling public interest exists which necessitates promulgation of emergency rules and requests emergency approval of rule revisions to eliminate the Medically Needy Program. The state constitution requires all agencies to maintain a balanced budget. An emergency rule is necessary in order for the Agency to maintain a balanced budget as failure to do so would lead to a breach of the state constitution. Agency staff has estimated an annual budget savings of $960,000 state dollars.
**ANALYSIS:**
Agency rules are revised to eliminate the Oklahoma Medicaid Medically Needy Program. States have the option under the Medicaid program to extend coverage to individuals categorized as Medically Needy. Due to state government budget constraints, the OHCA Board voted on December 12, 2002, to eliminate coverage of medically needy individuals effective February 1, 2003. According to Article 10, Section 23 of the Oklahoma Constitution, all state agencies must maintain a balanced budget. In order for the Agency to accomplish the necessary financial reductions, rules are in need of revision to eliminate the Medically Needy Program.
**CONTACT PERSON:**
Joanne Terlizzi at (405)522-7272

**PURSUANT TO THE ACTIONS DESCRIBED HEREIN, THE FOLLOWING EMERGENCY RULES ARE CONSIDERED PROMULGATED UPON APPROVAL BY THE GOVERNOR AS SET FORTH IN 75 O.S., SECTION 253(D), AND EFFECTIVE UPON APPROVAL BY GOVERNOR OR JULY 1, 2003, WHICHEVER IS LATER:**

## SUBCHAPTER 3. GENERAL PROVIDER POLICIES

## PART 3. GENERAL MEDICAL PROGRAM INFORMATION

### 317:30-3-58. General Medicaid coverages - medically needy [REVOKED]

~~Medicaid coverage for the medically needy is the same as categorically needy except as follows:~~

~~(1) There is no coverage for nursing facility services.~~

~~(2) Prescribed drugs not to exceed three prescriptions per month, for medically needy adults suffering from a catastrophic illness.~~

~~(3) There is no coverage for durable medical equipment.~~

~~(4) There is no coverage for standard medical supplies.~~

~~(5) Blood and blood fractions for eligible persons suffering from a congenital or acquired disease of the blood provided the illness meets the criteria of a catastrophic illness.~~

~~(6) There is no coverage for Part A deductible.~~

~~(7) There is no coverage for home and community based waiver services for the mentally retarded.~~

~~(8) There is no coverage for home health services.~~

~~(9) There is no coverage for home and community based waiver services for aged or disabled individuals.~~

~~(10) There is no coverage for the medically needy under the Alternative Disposition Plan (ADP).~~

## PART 5. ELIGIBILITY

### 317:30-3-70. Categorical relationship

(a) To be eligible for Medicaid benefits, an individual must be related to one of the following programs:

(1) Aid to the Aged
(2) Aid to the Disabled
(3) Aid to the Blind
(4) Pregnancy-Related Services
(5) Aid to Families With Dependent Children

(b) Categorical relationship for (a)(1) through (a)(3) above is established using the same criteria and definitions of age, disability and blindness as are used by the Social Security Administration (SSA) in determining eligibility for Supplemental Security Income (SSI) or SSA benefits. If the individual is an aged, blind, or disabled SSA/SSI recipient in current payment status (including presumptive eligibility), or a TANF recipient, categorical relationship is already established.

(c) Categorical relationship to pregnancy-related services is established when the determination is made by medical evidence that the individual is or has been pregnant. Pregnancy-related services include all medical services provided within the scope of the program during the prenatal, delivery and post-partum periods.

(d) Categorical relationship to AFDC is established by determining deprivation due to absence, death or incapacity the same as for the TANF money payment.

(e) It is the responsibility of the OHCA Level of Care Evaluation Unit (LOCEU) to determine categorical relationship to incapacity or disability for an individual when appropriate. It is the responsibility of DHS to provide the necessary information to the LOCEU in order to make these determinations.

(f) Once categorical relationship has been determined, financial need must be established. ~~All cases are determined to be either categorically or medically needy.~~

**317:30-3-71. Financial need**

~~(a)~~ **Categorically needy.** An individual is categorically needy if income and resources are at or below the category of assistance to which he/she is related, i.e., Aid to the Aged, Aid to the Blind, Aid to the Disabled or Aid to Families with Dependent Children, during the month of medical service. These persons are issued a permanent plastic identification card.

~~(b)~~ ~~**Medically needy.** An individual is medically needy if income and resources exceed standards established for the category of assistance to which he/she is related but such income/resources are not sufficient to meet the cost of medical care.~~

**317:30-3-72. Spenddown [REVOKED]**

~~The excess income of medically needy individuals, referred to as "spenddown", will be applied to medical expenses on a first claim received basis which means that the amount payable by the Authority to the provider will be reduced by the amount of the spenddown that is applied to the claim. The provider will be notified of this action by "Detail of Remittance"; the recipient will receive an "Explanation of Spenddown Payments" from the local county Department of Human Services office informing him/her of the responsibility for payment to the provider.~~

**317:30-3-84. Catastrophic illness [REVOKED]**

~~The Authority's Vendor Drug Program is for the categorically needy only. A provision was made for coverage of drugs for the Medically Needy under the "Catastrophic Illness" program. An individual must be determined to be suffering from a catastrophic illness as defined below:~~

~~(1) A catastrophic illness includes a terminal illness which can be expected, with reasonable medical judgement, to result in death within six months. This includes malignancies which are inoperable or have widespread metastases and are unresponsive to palliative therapy. Catastrophic illness also includes an end stage illness, severe incapacitating burn or injury for which the duration of anticipated active treatment is six months or more, psychotic disorders, congenital or acquired disease of the blood which require the use of blood or blood products, and immunosuppressive drugs for transplant patients.~~

~~(2) Mental illness, other than psychotic disorders, Cerebral Vascular Accident (CVA), hormone dependent tumors, isotope sensitive tumors and malignancies with metastases which have been apparent for five years are excluded as catastrophic illnesses.~~

~~(3) Once the individual is determined to meet the catastrophic illness definition and is approved, a Medical Identification Card will be issued for coverage of drugs within the scope of the Vendor Drug Program.~~

## SUBCHAPTER 5. INDIVIDUAL PROVIDERS AND SPECIALTIES

## PART 3. HOSPITALS

**317:30-5-41. Coverage for adults**

For persons 21 years of age or older, payment is made to hospitals for services as described in this Section.

(1) **Inpatient hospital services.**

(A) Effective August 1, 2000, all general inpatient hospital services for all persons 21 years of age or older is limited to 24 days per person per state fiscal year (July 1 through June 30). The 24 day limitation applies to both hospital and physician services. No exceptions or extensions will be made to the 24 day inpatient services limitation.

(B) Effective October 1, 1993, inpatient chemical detoxification (alcohol or drugs) for persons age 21 and older is limited to a maximum of five days and subject to post-payment review. No continued stay in inpatient chemical detoxification is allowed.

(C) Effective October 1, 1993, inpatient chemical dependency treatment (alcohol or drugs) for persons age 21 and older is not covered.

(D) All inpatient services are subject to post-payment utilization review by the Oklahoma Health Care Authority, or its designated agent. These reviews will be based on OHCA's, or its designated agent's, admission criteria on severity of illness and intensity of treatment.

(i) It is the policy and intent to allow hospitals and physicians the opportunity to present any and all documentation available to support the medical necessity of an admission and/or extended stay of a Medicaid recipient. If the OHCA, or its designated agent, upon their initial review determines the admission should be denied, a notice is sent to the facility and the attending physician(s) advising them of the decision. This notice also advises that a reconsideration request may be submitted within 60 days. Additional information submitted with the reconsideration request will be reviewed by the OHCA, or its designated agent, who utilizes an independent physician advisor. If the denial decision is upheld through this review of additional information, OHCA is informed. At that point, OHCA sends a letter to the hospital and physician requesting refund of the Medicaid payment previously made on the denied admission.

(ii) If the hospital or attending physician did not request reconsideration by the OHCA, or its designated agent, the OHCA, or its designated agent, informs OHCA that there has been no request for reconsideration and as a result their initial denial decision is final. OHCA, in turn, sends a letter to the hospital and physician requesting refund of the amount of Medicaid payment previously made on the denied admission.

(iii) If an OHCA, or its designated agent, review results in denial and the denial is upheld throughout the appeal process and refund from the hospital and physician is required, the Medicaid recipient cannot be billed for the denied services.

(E) If a hospital or physician believes that an acute care hospital admission or continued stay is not medically necessary and thus not Medicaid compensable but the patient insists on treatment, the patient should be informed that he/she will be personally responsible for all charges. If a Medicaid claim is filed and paid and the service is later denied the patient is not responsible. If a Medicaid claim is not filed and paid the patient can be billed.

(F) Payment is made to a participating hospital for hospital based physician's services. The hospital must have a Hospital-Based Physician's Contract with OHCA for this method of billing.

(2) **Outpatient hospital services.**

(A) **Emergency hospital services.** Emergency department services are covered. Payment is made at a case rate which includes all non-physician services provided during the visit.

(B) **Level I - Complete Ultrasound.** Payment will be made separately from the total obstetrical care for one complete ultrasound per pregnancy when the patient has been referred to a radiologist trained in ultrasonography. The patient's record must be documented as to the reason the ultrasound was requested and the components of the ultrasound. The appropriate HCPC code must be used.

(C) **Level II - Targeted Ultrasound.** Payment will be made separately from the total obstetrical care for one medically necessary Level II (targeted) ultrasound per pregnancy for high risk pregnancies. Payment for the ultrasound includes payment for consultation. Documentation as to the medical justification must be attached to the claim and also made a part of the patient's record. The Level II (targeted) ultrasound must be performed:

(i) with equipment capable of producing Level II (targeted) quality evaluations; and

(ii) by an obstetrician certified by the American Board of Obstetrics and Gynecology as a diplomat with special qualifications in maternal fetal medicine or an active candidate for certification in maternal fetal medicine. Limited Targeted Ultrasound, should be used if, during the procedure, it is apparent that a complete targeted ultrasound is not medically necessary.

(D) **Dialysis.** Payment for dialysis is made at the Medicare allowable facility rate. This rate includes all services which Medicare has established as an integral part of the dialysis procedure, such as routing medical supplies, certain laboratory procedures, oxygen, etc. Payment is made separately for injections of Epoetin Alfa (EPO or Epogen).

(E) **Technical component.** Payment is made for the technical component of outpatient radiation therapy and compensable x-ray procedures.

(F) **Laboratory.** Payment is made for medically necessary outpatient services.

(G) **Blood.** Payment is made ~~in behalf of categorically needy and medically needy individuals~~ for outpatient blood and blood fractions when these products are required for the treatment of a congenital or acquired disease of the blood. ~~In order to be compensable for the medically needy, the blood or blood fraction must have been required over a period of 60 days and must be preauthorized.~~

(H) **Ambulance.**

(I) **Pharmacy.**

(J) **Home health care.** Hospital based home health providers must be Medicare certified and have a current Home Health Agency contract with the Oklahoma Health Care Authority.

(i) Payment is made for home health services provided in a patient's residence to all categorically needy individuals.

(ii) Payment is made for a maximum of 36 visits per year per eligible recipient.

(iii) Payment is made for standard medical supplies.

(iv) Payment is made on a rental or purchase basis for equipment and appliances suitable for use in the home.

(v) Non-covered items include sales tax, enteral therapy and nutritional supplies, and electro-spinal orthosis systems (ESO).

(vi) Payment may be made at a statewide procedure based rate. Payment for any combination of skilled and home health aide visits shall not exceed 36 visits per year.

(vii) Payment may be made to home health agencies for prosthetic devices.

(I) Coverage of oxygen includes rental of liquid oxygen systems, gaseous oxygen systems and oxygen concentrators when prior authorized. A completed HCFA-484 must accompany the initial claim for oxygen. Purchase of oxygen systems may be made where unusual circumstances exist and purchase is considered most appropriate. Refer to the Medical Suppliers Manual for further information.

(II) Payment is made for permanent indwelling catheters, drain bags, insert trays and irrigation trays. Male external catheters are also covered.

(III) Sterile tracheostomy trays are covered.

(IV) Payment is made for colostomy and urostomy bags and accessories.

(V) Payment is made for hyperalimentation, including supplements, supplies and equipment rental in behalf of persons having permanently inoperative internal body organ dysfunction. CC-17 should be submitted to the Medical Authorization Unit. Information regarding the patient's medical condition that necessitates the hyperalimentation and the expected length of treatment, should be attached.

(VI) Payment is made for ventilator equipment and supplies when prior authorized. CC-17 should be submitted to the Medical Authorization Unit.

(VII) Medical supplies, oxygen, and equipment should be billed using appropriate HCPCS codes which are included in the HCPCS Level II Coding Manual.

(K) **Outpatient hospital services, not specifically addressed.** Outpatient hospital services, not specifically addressed, are covered for adults only when prior authorized by the Medical Professional Services Unit of the Oklahoma Health Care Authority.

(L) **Outpatient chemotherapy and radiation therapy.** Payment is made for charges incurred for the administration of chemotherapy for the treatment of malignancies and opportunistic infections. Payment for radiation therapy is limited to the treatment of proven malignancies and benign conditions appropriate for sterotactic radiosurgery (e.g., gamma knife).

(M) **Ambulatory surgery.**

(i) **Definition of Ambulatory Surgical Center.** An ambulatory surgical center (ASC) is a distinct entity that operates exclusively for the purpose of furnishing outpatient surgical services to patients and which enters into an agreement with HCFA to do so. An ASC may be either independent (i.e., not part of a provider of services or any other facility) or may be operated by a hospital (i.e., under the common ownership, licensure or control of a hospital). If an ASC is the latter type it has the option of being covered and certified under Medicare as an ASC, or of being covered as an outpatient hospital facility. In order to be covered as an ASC operated by a hospital, a facility must:

(I) elect to do so, and continue to be so covered unless HCFA determines there is good cause to do otherwise;

(II) be a separately identifiable entity, physically, administratively, and financially independent and distinct from other operations of the hospital; and

(III) meet all the requirements with regard to health and safety, and agree to the assignment, coverage and reimbursement rules applied to independent ASC's.

(ii) **Certification.** In order to be eligible to enter into an agreement with HCFA to be covered as an ASC, a facility must be surveyed and certified as complying with the conditions for coverage for ASC's in 42 CFR 416.39-49.

(N) **Outpatient surgery services.** The covered facility services are defined as those services furnished by an ASC or OHF in connection with a covered surgical procedure.

(i) **Services included in the facility reimbursement rate.** Services included in the facility reimbursement rate are:

(I) Nursing, technical and other related services. These include all services in connection with covered procedures furnished by nurses and technical personnel who are employees of the facility. In addition to the nursing staff, this category would include orderlies and others involved in patient care.

(II) Use of the patient of the facility. This category includes operating and recovery rooms, patient preparation areas, waiting rooms, and other areas used by the patient or offered for use by the patient's relatives in connection with surgical services.

(III) Drugs, biologicals, surgical dressings, supplies, splints, casts, appliances and equipment. This category includes all supplies and equipment commonly furnished by the facility in connection with surgical procedures, including any drugs and biologicals administered while the patient is in the facility. Surgical dressings, other supplies, splints, and casts include those furnished by the facility at the time of surgery. Additional supplies and materials furnished later would generally be furnished as incident to a physician's service and not as a facility service. Supplies include those required for both the patient and facility personnel, i.e., gowns, masks, drapes, hoses, scalpels, etc., whether disposable or reusable.

(IV) Diagnostic or therapeutic items and services directly related to the surgical procedure. Payment to the facility includes items and services furnished by facility staff in connection with covered surgical procedures. These diagnostic tests include but are not limited to tests such as urinalysis, blood hemoglobin or hematocrit, CBC and fasting blood sugar, etc.

(V) Administrative, recordkeeping, and housekeeping items and services. These include the general administrative functions

necessary to run the facility, such as scheduling, cleaning, utilities, rent, etc.

(VI) Blood, blood plasma, platelets, etc. Under normal circumstances, blood and blood products furnished during the course of the procedure will be included in the payment for the facility charge. In cases of patients with congenital or acquired blood disorders, additional payment can be made within the scope of the Authority's Medical Programs.

(VII) Materials for anesthesia. These include the anesthetic and any materials necessary for its administration.

(ii) **Services not included in facility reimbursement rates.** The following services are not included in the facility reimbursement rate:

(I) Physicians' services. This category includes most services performed in the facility which are not considered facility services. The term physicians' services includes any pre/post-operative services, such as office visits, consultations, diagnostic tests, removal of stitches, changing of dressings, or other services which the individual physician usually includes in a set "global" fee for a given surgical procedure.

(II) The sale, lease, or rental of durable medical equipment to facility patients for use in their homes. If the facility furnishes items of DME to patients it should be treated as a DME supplier and these services billed on a separate claim form. Coverage of DME is limited to the scope of the Authority's Medical Programs.

(III) Prosthetic devices. Prosthetic devices, whether implanted, inserted, or otherwise applied by covered surgical procedures are not included in the facility payment. One of the more common prosthesis is intra-ocular lenses (IOL's). Prosthetic devices should be billed as a separate line item using appropriate HCPCS code.

(IV) Ambulance services. If the facility furnishes ambulance services, they are covered separately as ambulance services if otherwise compensable under the Authority's Medical Programs.

(V) Leg, arm, back and neck braces. These items are not included in the facility payment. Payment is limited to the scope of the Authority's Medical Programs.

(VI) Artificial legs, arms, and eyes. This equipment is not considered part of the facility service and is not included in the facility payment rate. Payment is limited to the scope of the Authority's Medical Programs.

(VII) Services of an independent laboratory. Payment for laboratory services is limited to the scope of the Authority's Medical Programs.

(iii) **Reimbursement - facility services.** The facility services are reimbursed according to the group in which the surgical procedure is listed. If more than one surgical procedure is performed at the same setting, reimbursement will be made for only the major procedure. Reimbursement will be made at a state-wide payment rate based on Medicare's established groups as adapted for Medicaid.

(iv) **Compensable procedures.** The HCPCS codes identify the compensable procedures and should be used in billing.

(O) **Outpatient hospital services for persons infected with tuberculosis (TB).** Outpatient hospital services are covered for persons infected with tuberculosis. Coverage includes, but may not be limited to, outpatient hospital visits, laboratory work and x-rays. Services to persons infected with TB are not limited to the scope of the Medicaid program; however, prior authorization is required for services that exceed the scope of coverage under Medicaid. Drugs prescribed for the treatment of TB not listed in OAC 317:30-3-46 require prior authorization by the University of Oklahoma College of Pharmacy using form "Petition for TB Related Therapy".

(P) **Mammograms.** Medicaid covers one screening mammogram and one follow-up mammogram every year for women beginning at age 30. Additional follow-up mammograms are covered when medically necessary. A prior authorization by the Medical Professional Services Division of the Oklahoma Health Care Authority is required for additional follow-up mammograms.

(3) **Exclusions.** The following are excluded from coverage:

(A) Inpatient diagnostic studies that could be performed on an outpatient basis.

(B) Procedures that result in sterilization which do not meet the guidelines set forth in this Chapter of rules.

(C) Reversal of sterilization procedures for the purposes of conception are not covered.

(D) Medical services considered to be experimental.

(E) Services or any expense incurred for cosmetic surgery including removal of benign skin lesions.

(F) Refractions and visual aids.

(G) Payment for the treatment of obesity.

## PART 5. PHARMACISTS

**317:30-5-72. Categories of service eligibility**

(a) **Coverage for adults.** ~~(1)~~ ~~**Categorically needy.**~~ Prescription drugs for categorically needy adults are covered as set forth in this subsection.

(~~A~~1) With the exception of ~~(B)~~ (2) and ~~(C)~~ (3) of this ~~paragraph~~ subsection, categorically needy adults are eligible for three covered prescriptions per month.

(~~B~~2) For categorically related adults who are residents of Nursing Facilities, private Intermediate Care Facilities for the Mentally Retarded (ICF/MR) or who are persons eligible under any Home and Community Based Waiver program (for example the Developmentally Disabled Waiver, the ADvantage Waiver, or the In-Home Support Waiver) are eligible for all medically necessary prescriptions subject to the limitations set forth in OAC 317:30-5-72.1, OAC 317:30-5-77.2 and OAC 317:30-5-77.3.

(~~C~~3) Drugs exempt from the three prescription limit include: Antineoplastics, anti-retroviral agents for persons diagnosed with Acquired Immune Deficiency Syndrome (AIDS) or who have tested positive for the Human Immunodeficiency Virus (HIV), certain prescriptions which require frequent laboratory monitoring, birth control prescriptions, over the counter contraceptives, hemophilia drugs, compensable smoking cessation products, certain solutions used in compounds (i.e. sodium chloride, sterile water, etc.), and drugs used for the treatment of tuberculosis are excluded from the prescription limitation. For purposes of this Section, exclusion from the three prescription limit means claims filed for any of these prescriptions will not count toward the three prescriptions allowed per month.

~~(2) **Medically needy.** With the exception of individuals who are eligible under OAC 317:35-7-45 (individuals eligible because of catastrophic illness), medically needy adults are not covered in the prescription drug program. For those individuals who are eligible because of catastrophic illness coverage the prescription drug benefit is limited to three drugs per month. Eligibility for catastrophic illness is a portion of Oklahoma's medically needy program.~~

~~(A) Each medically needy applicant classified as having a catastrophic illness, within that definition, who meets the Medicaid standards of eligibility receives a medical ID card.~~

~~(B) If a medically needy adult is approved under the catastrophic provision with a spenddown, all prescriptions will be applied toward the spenddown until the full amount is met.~~

(b) **Coverage for children ~~(categorically and medically needy)~~.** Prescription drugs for Medicaid eligible individuals under 21 years of age are not limited.

(c) **Individuals eligible for Part B of Medicare.** Individuals eligible for Part B of Medicare are eligible for a prescription drug benefit.

*[OAR Docket #03-3001; filed 7-17-03]*

---

# TITLE 317. OKLAHOMA HEALTH CARE AUTHORITY
# CHAPTER 30. MEDICAL PROVIDERS-FEE FOR SERVICE

*[OAR Docket #03-3005]*

**RULEMAKING ACTION:**
EMERGENCY adoption
**RULES:**
Subchapter 5. Individual Providers and Specialties
Part 21. Outpatient Behavioral Health Services
317:30-5-241. [AMENDED]
**(Reference APA WF # 03-11)**
**AUTHORITY:**
The Oklahoma Health Care Authority Board; The Oklahoma Health Care Authority Act, Section 5003 through 5016 of Title 63 of Oklahoma Statutes; Article 10, Section 23 of the Oklahoma Constitution
**DATES:**
**Adoption:**
April 10, 2003
**Approved by Governor:**
May 26, 2003
**Effective:**
Immediately upon Governor's approval or July, 1 2003, whichever is later
**Expiration:**
Effective through July 14, 2004, unless superseded by another rule or disapproved by the Legislature.
**SUPERSEDED EMERGENCY ACTIONS:**
N/A
**INCORPORATIONS BY REFERENCE:**
N/A
**FINDING OF EMERGENCY:**
The Agency finds that a compelling public interest exists which necessitates promulgation of emergency rules and requests emergency approval of rule revisions which eliminate payment for Behavioral Health services in Nursing Facilities. The state constitution requires all agencies to maintain a balanced budget. An emergency rule is necessary in order for the Agency to maintain a balanced budget as failure to do so would lead to a breach of the state constitution. Agency staff has estimated an annual state share savings of $1,605,539.
**ANALYSIS:**
Medical Providers-Fee for Service, Outpatient Behavioral Health Services specific, rules are revised to eliminate payment for Behavioral Health services in Nursing Facilities. Behavioral Health services are optional Medicaid services and due to state government budget constraints, the Agency Board voted on December 12, 2002, to eliminate payment for Outpatient Behavioral Health services for Medicaid Nursing Facility residents effective January 1, 2003. This Board approved reduction was approved using the Attorney General's opinion that under an emergency declaration by the Board, action could be taken to maintain a balanced budget. The Board action expires June 30, 2003. According to Article 10, Section 23 of the Oklahoma Constitution, all state agencies must maintain a balanced budget. Therefore, in order to continue this cost saving measure and maintain a balanced budget, revision are needed to eliminate payment for Behavioral Health services in Nursing Facilities.
**CONTACT PERSON:**
Joanne Terlizzi at (405)522-7272

**PURSUANT TO THE ACTIONS DESCRIBED HEREIN, THE FOLLOWING EMERGENCY RULES ARE CONSIDERED PROMULGATED UPON APPROVAL BY THE GOVERNOR AS SET FORTH IN 75 O.S., SECTION 253(D), AND EFFECTIVE UPON APPROVAL BY GOVERNOR OR JULY 1, 2003, WHICHEVER IS LATER:**

## SUBCHAPTER 5. INDIVIDUAL PROVIDERS AND SPECIALTIES

## PART 21. OUTPATIENT BEHAVIORAL HEALTH SERVICES

**317:30-5-241. Coverage for adults and children**

(a) **Service descriptions and conditions.** Outpatient behavioral health services are covered for adults and children as set forth in this Section, unless specified otherwise, and when provided in accordance with a documented individualized treatment plan; developed to treat the identified mental health and/or substance abuse disorder(s). All services are to be for the goal of improvement of functioning, independence, or well being of the patient. The patient must be able to actively participate in the treatment. Active participation means that the patient must have sufficient cognitive abilities, communication skills, and short-term memory to derive a reasonable benefit from the treatment. The assessment must include. DSM IV multi axial diagnosis completed for all five axis. All services will be subject to medical necessity criteria. For DMHSAS Contracted and Private facilities, an agent designated by the Oklahoma Health Care Authority will apply the medical necessity criteria. For Public facilities (Regionally based CMHCS) the medical necessity criteria will be self-administered. Non authorized services will not be Medicaid compensable with the exception of six units of individual counseling, two units of family counseling and one unit of treatment plan development per Medicaid recipient per calendar year, one unit of medical review per month, crisis intervention and community based structured emergency care. Payment is made for Rehabilitative Treatment services for children. Children receiving Residential Behavioral Management Services in a Foster or Group Home are eligible for Outpatient Behavioral Health services only if prior authorized by the OHCA or its designated agent, regardless of provider type providing Outpatient Behavioral Health services. Residents of nursing facilities are not eligible for Outpatient Behavioral Health services. ICF/MR residents are eligible for certain services as described in this section.

(1) **Treatment plan development.**

(A) Description - The treatment plan must be completed by the responsible MHP or other direct service staff. Treatment plan development includes the evaluation of assessment and diagnostic information in order to develop a written individualized treatment plan. The treatment plan must contain the following written elements: patient's strengths/assets, weakness/liabilities, problems, goals, and objectives that are specific and time limited, discharge plan, criteria and date. Each treatment service to be received must be listed. If individual counseling is to be received the theoretical approach to be used should also be included. The frequency of each service and responsible MHP, BHRS, physician or nurse must be delineated. A full five-axis DSM-IV diagnosis must be documented. Deferred diagnosis for Axis I are not acceptable. Axis II and III must be completed. A completed Client Assessment Record (CAR) is also required. In some circumstances, a completed Child and Adolescent Functioning Assessment Scale (CAFAS) may be substituted for the CAR assessment when authorized by OHCA or its designated agent. A valid compensable treatment plan must be signed and dated by the patient (if over age 14), the parent/guardian (if under age 18), and must include a statement by the patient regarding their involvement, understanding and comments on the plan. For children who are school-aged, collaboration with the school system regarding the treatment must be included. Medicaid recipients in an ICF/MR~~, Nursing Facility~~ or receiving Residential Behavioral Management Services in a foster or group home are not eligible for this service.

(B) Providers - Treatment plan development will be provided by the patient treatment team. This includes all staff responsible for the treatment services delineated in the plan. The treatment plan is not valid until it is signed and dated by the responsible MHP, the responsible physician, the patient, the guardian (if applicable), and any other direct service provider, and all requirements have been met. Each signature must have the date written by the signing party on the date of signing.

(2) **Treatment plan review.**

(A) Description - Treatment plan review is a comprehensive review and evaluation of the current efficacy of the treatment. This includes a review of the treatment plan with the patient and the modification of the plan as required. It includes the CAR evaluation and other documentation required for prior authorization extension requests. In some circumstances, a completed Child and Adolescent Functioning Assessment Scale (CAFAS) may be substituted for the CAR assessment when authorized by OHCA or its designated agent. This review must include the participation of the MHP, the physician providing pharmacological management, and other staff relevant to the treatment, as well as the patient. It is designed to assure that medications and all forms of treatment are provided in the least intrusive manner possible, to encourage normalization and prevent institutionalization. All compensable treatment plan reviews must include an update to the individual treatment plan. Patient involvement must be clearly documented, if the patient is 14 years of age or older. If the patient is under 18 years of age, the parent or guardian must also be involved and sign the treatment plan.

(B) Providers - Treatment plan review will be provided by the treatment team members. The review is not valid until signed and separately dated by the responsible MHP, the responsible physician (if patient is receiving medication or otherwise under the care of the physician), the patient, the guardian (if

applicable), and any other direct service provider, and all requirements have been met.

(3) **Individual counseling.**

(A) Description - Individual counseling is a method of treating mental health and alcohol and other drug (AOD) disorders using face to face, one on one interaction between a Mental Health Professional and a patient to promote emotional or psychological change to alleviate disorders. MHPs performing this service must use an approach to treatment such as cognitive behavioral treatment, narrative therapy, solution focused brief therapy or another widely accepted theoretical framework for treatment. Ongoing assessment of the patient's status and response to treatment as well as psycho-educational intervention are appropriate components of individual counseling. Individual counseling must be provided in an appropriate, private confidential setting including the patient residence or the provider's office. The counseling must be goal directed utilizing techniques appropriate to the treatment plan and the patient's developmental and cognitive abilities.

(B) Providers - Individual counseling must be provided by a MHP.

(4) **Group counseling.**

(A) Description - Group counseling is a method of treating mental health and AOD disorders using the interaction between a mental health professional and two or more patients to promote positive emotional or behavioral change. The focus of the group must be directly related to goals and objective of the individual patient's treatment plan. The individual patient's behavior, the size of the group, and the focus of the group must be included in each patient's medical record. This service does not include social skills development or daily living skill activities and must take place in an appropriate, confidential setting, limited to the therapist and group members. Group counseling for adults is limited to eight total patients except for residents of ~~nursing and~~ ICF/MR facilities where the limit is six total patients. Group size is limited to a total of six patients for all children. A group may not consist solely of related individuals.

(B) Providers - Group counseling will be provided by a MHP.

(5) **Family counseling.**

(A) Description - Family counseling is a face-to-face interaction between a MHP and family to facilitate emotional, psychological or behavioral changes and promote successful communication and understanding. Family counseling must be provided for the benefit of a Medicaid eligible individual as a specifically identified component of an individual treatment plan. Family Counseling must be provided in a confidential setting which may include a patient's residence or provider's office.

(B) Providers - Family counseling will be provided by a MHP.

(6) **Psychological testing.**

(A) Description - a psychologist utilizing tests selected from currently accepted psychological test batteries performs psychological testing. Test results must be reflected in the individual treatment plan. The medical record must clearly document the need for the testing and what the testing is expected to achieve.

(B) Providers - Psychological testing will be provided by a psychologist or certified psychometrist. A psychological technician of a psychologist may provide psychological testing.

(7) **Medical review.**

(A) Description - Medical review is a documented review and evaluation by a registered nurse, or physician's assistant focusing on a patient's response to medication and compliance with the medication regimen. The patient must be present at the time of the medical review. The review will include an assessment of medication compliance and medication side effects. Vital signs must be taken including pulse, blood pressure and respiration. A physician is not required to be present, but must be available for consult. Medical review is designed to maintain the patient on the appropriate level of the least intrusive medications, encourage normalization and prevent hospitalization. Medical reviews may not be billed for Medicaid recipients who reside in nursing homes or ICF/MR's.

(B) Providers - Medical reviews must be provided by a licensed registered nurse, or a physician's assistant as a direct service under the supervision of a physician.

(8) **Individual Rehabilitative Treatment Services.**

(A) Description - Individual Rehabilitative Treatment Service is a face to face, service which is performed to assist Medicaid recipients who are experiencing significant functional impairment due to mental illness and/or AOD disorders in order to increase the skills necessary to perform activities of daily living, and function in the community. Services will be for the reduction of psychiatric and behavioral impairment and the restoration of functioning consistent with the requirements of independent living and enhanced self-sufficiency. This service includes educational and supportive services regarding independent living, self care, social skills (re) development, lifestyle changes and recovery principles and practices. Each Individual Rehabilitative Treatment Service provided must have an objective and purpose relevant to the individualized treatment plan and the patient diagnosis. Compensable Individual Rehabilitative Services are provided to patients who have the ability to benefit from the services as evidenced by the patient's developmental and cognitive abilities and communication skills. This service may be provided one on one between the patient and BHRS, or may be

provided with parent/guardian present or occasionally with only the parent/guardian for the purpose of treating the identified patient's disorder. Other family may be present if pertinent to the treatment goals and objectives.

(B) Providers~~.~~ - A BHRS or MHP must provide this service. Residents of ~~Nursing and~~ ICF/MRs Facilities and children receiving Residential Behavioral Management Group in a Foster or Home setting are not eligible for this service.

(9) **Group Rehabilitative Treatment Services (adult).**

(A) Description - Rehabilitative Treatment Services for adults are behavioral health remedial services, which are necessary to improve the patient's ability to function in the community. They are performed to assist patients with mental health illnesses and AOD disorders. Examples of services, which may be covered under the definition of rehabilitation, are: independent living, self-care, social skills (re)development, lifestyle change and recovery principles and practices. Services will be provided in the least restrictive setting appropriate for the reduction of psychiatric and behavioral impairment and the restoration of functioning consistent with the requirements of independent living and enhanced self-sufficiency. Each service must have purpose that is related directly to the individual treatment plan and diagnosis of each participant. Compensable Rehabilitative Treatment Services are provided to patient's who have the ability to benefit from the service. Travel time to and from activities is not covered. The maximum staffing ratio is fourteen patients to one staff. Countable staff must be appropriately trained in an anger management/intervention technique such as MANDT or CAPE to be directly involved in patient care. Recipients residing in ~~a Nursing Facility or~~ an Intermediate Care Facility for the Mentally Retarded (ICF/MR) will not be eligible for this service.

(B) Providers - Group Rehabilitative treatment services for adults are provided utilizing a treatment curriculum approved by a MHP. A BHRS or MHP may perform group rehabilitative treatment services.

(10) **Group Rehabilitation Treatment Services (children).**

(A) Description - Group Rehabilitative Treatment Services for children are behavioral health remedial services, as specified in the individual treatment plan which are necessary for the treatment of mental health and AOD disorders. They may be provided alone or in conjunction with other behavioral health services. Examples of educational and supportive services which may be covered under the definition of rehabilitative treatment services are basic living skills, social skills (re)development, interdependent living, self-care, lifestyle change and recovery principles. Services will be provided in the least restrictive setting appropriate for the reduction of psychiatric impairment and the restoration of functioning consistent with the requirements of age appropriate behavioral functioning and self-sufficiency. Meeting with family members, legal guardian and/or significant other is covered when the services are directed exclusively to the effective treatment of the recipient. Each service provided under Rehabilitative Treatment Services must have a goal and purpose, which relates directly to the individual treatment plan of each participant. Compensable Rehabilitative Treatment Services are provided to recipients who have the ability to benefit from the service. The child must be able to actively participate and must possess the cognitive, developmental and communication skills necessary to benefit from the service. Travel time to and from activities is not covered. Staff to patient ratio shall not exceed eight children to one staff member. Countable staff must be appropriately trained, including trained and certified in a recognized anger management intervention technique, such as MANDT or CAPE to be directly involved in patient care. Patients residing in ~~a nursing facility or~~ an Intermediate Care Facility for the Mentally Retarded (ICF/MR) or children receiving Residential Behavioral Management services in a foster or group home will not be eligible for this service.

(B) Providers - Group Rehabilitative Treatment Services for children are provided utilizing a treatment curriculum approved by a MHP. A BHRS or MHP may perform group rehabilitative treatment services.

(11) **Crisis Intervention Services.**

(A) Description - Crisis Intervention Services are face to face services of an emergency nature to evaluate and resolve acute behavioral or emotional dysfunction as evidenced by psychotic, suicidal and/or homicidal behaviors. The crisis situation and significant functional impairment must be clearly documented. Crisis Intervention will not be reimbursed for recipients who, while receiving other behavioral health services, experience acute behavioral or emotional dysfunction.

(B) Providers - Crisis Intervention Services must be provided by a Mental Health Professional (MHP)

(12) **Community Based Structured Emergency Care.**

(A) Description - Community Based Structured Emergency Care is emergency psychiatric and substance abuse services to resolve crisis situations. The services provided are emergency stabilization, which includes a protected environment, chemotherapy, detoxification, individual and group treatment and medical assessment. Community Based Structured Emergency Care is compensable for individuals 18 years of age and older.

(B) Providers - Community Based Structured Emergency Care will be under the supervision of a

physician aided by a licensed nurse, and will also include mental health professionals for the provision of group and individual treatment. A physician must be available for the 3-hour period. This service is limited to providers who contract with or are operated by the Department of Mental Health and Substance Abuse Services to provide this service within the overall behavioral health service delivery system.

(b) **Prior authorization of services and requirements.** To be authorized to provide individual, group or family counseling, medical review, or individual or group rehabilitation treatment, the provider must administer fully and document the Client Assessment Record (CAR) evaluation that assesses the patient's functional abilities. In some circumstances, a completed CAFAS may be substituted for the CAR assessment when authorized by OHCA or its designated agent. The patient must also have a DSM-IV Axis I diagnosis appropriate to his/her symptoms, behaviors, and/or impairments.

(1) The OHCA requires information to be submitted when a provider is requesting prior authorization. If the Medicaid recipient resides in ~~a Nursing Facility or~~ an ICF/MR, or receives Residential Behavioral Management in a Foster Care setting or receives Residential Behavior Management in a Group Home setting, the individual treatment plan required for that service must be included with the request and must reflect the need for the requested Behavioral Health Services. The patient must agree to the treatment plan and sign the request. The required information for prior authorization includes:

(A) Pertinent demographic and identifying information;

(B) Complete and current CAR assessment (CAFAS may be substituted in some instances when authorized by OHCA or its designated agent);

(C) Complete multi axial DSM IV diagnosis with supportive documentation and mental status examination summary;

(D) Psychiatric and treatment history;

(E) Treatment plan with goals, objectives and time frames for treatment; and

(F) Services requested.

(2) Medicaid recipients will be considered for prior-authorization after receipt of complete and appropriate information submitted by the provider. Based on diagnosis, functional assessment, history and other Medicaid services being received, the Medicaid recipient may be approved to receive one of four levels of care. There are four levels of care for children and four levels of care for adults. Medicaid recipients who reside in Nursing Facilities or ICF/MRs may be approved for one of two levels of care. Medicaid recipients who receive Residential Behavior Management in a Foster Care setting or receive Residential Behavior Management in a Group Home setting may be approved for additional counseling based on demonstrated medical necessity and prior authorization by OHCA or its designated agent, regardless of provider type requesting to perform the additional services. A Medicaid recipient may be approved for a time frame of one to six months. For each level of care the documentation must illustrate the recipient meets the established medical criteria. The OHCA (or its designated agent) will review the request for completeness and appropriateness. The provider will be notified within 24 hours (excluding weekends and holidays) if the request is incomplete, deficient, or inappropriate, and additional information will be requested. A completed request will be reviewed and processed within 72 working hours. Requests will be reviewed by licensed master's prepared therapist (Licensed Clinical Social Workers, Licensed Professional Counselors, Licensed Marriage and Family Therapists) with experience in behavioral health care, or Licensed Registered Nurses with experience in behavioral health care. Psychiatrists, (M.D. and D.O.) and Psychologists possessing current State licenses may be utilized for reviews and appeals.

(3) A prior authorization decision may be appealed by the provider or patient if filed within five working days of receipt of the decision. The first level of appeal is to request a reconsideration, which will be performed under the supervision of the manager of OHCA's designated agent's Pre-Authorization Unit. If the appeal is not satisfactorily resolved during reconsideration, the provider or patient may submit an appeal to the OHCA through its standard grievance process (see OAC 317:2).

(4) Providers seeking prior-authorization will follow OHCA's designated agent's Outpatient Behavioral Health Prior Authorization Manual guidelines for submitting requests on behalf of the Medicaid recipient.

*[OAR Docket #03-3005; filed 7-17-03]*

## TITLE 317. OKLAHOMA HEALTH CARE AUTHORITY
## CHAPTER 30. MEDICAL PROVIDERS-FEE FOR SERVICE

*[OAR Docket #03-3004]*

**RULEMAKING ACTION:**
EMERGENCY adoption

**RULES:**
Subchapter 5. Individual Providers and Specialties
Part 5. Pharmacists
317:30-5-72.1 [AMENDED]
317:30-5-77.2. [AMENDED]
**(Reference APA WF # 03-01)**

**AUTHORITY:**
The Oklahoma Health Care Authority Board; The Oklahoma Health Care Authority Act, Section 5003 through 5016 of Title 63 of Oklahoma Statutes; Article 10, Section 23 of the Oklahoma Constitution; Title 42 U.S.C. Section 1396r-8; Title 42 U.S.C. Section 1396r-8.

**DATES:**
**Adoption:**
April 10, 2003
**Approved by Governor:**
May 26, 2003
**Effective:**
Immediately upon Governor's approval or July 1, 2003, whichever is later

**Expiration:**

Effective through July 14, 2004, unless superseded by another rule or disapproved by the Legislature.

**SUPERSEDED EMERGENCY ACTIONS:**

N/A

**INCORPORATIONS BY REFERENCE:**

N/A

**FINDING OF EMERGENCY:**

The Agency finds that a compelling public interest exists which necessitates promulgation of emergency rules and requests emergency approval of rule revisions to conserve state resources. The state constitution requires all agencies to maintain a balanced budget. An emergency rule is necessary in order for the Agency to maintain a balanced budget as failure to do so would lead to a breach of the state constitution. Based on a 30% increase in usage of the medication for fiscal year 2003, agency staff has estimated an annual savings of $1 million in state dollars by adding the drug Clopidigrel (Plavix) to list of scope-based prior authorized medications. Agency staff has estimated an annual savings of $1.2 million in state dollars by changing non-sedating antihistamine prior authorization requirements.

**ANALYSIS:**

Medical Providers-Fee for Service, Pharmacists specific, rules are revised to add the drug Clopidigrel (Plavix) to list of scope-based prior authorized medications. The revision would allow the agency to better assess and review the utilization of the drug. Clopidigrel is used to prevent blood clotting which may lead to stroke or other circulatory events. The Federal Drug Administration has approved the drug for use in a relatively well-defined group of patients for specific indications. However, a utilization review showed a large number of Medicaid patients are receiving the drug without documented necessity. Use of this drug has increased 40% or more each fiscal year since fiscal year 1999. The desired outcome is to provide proper therapy to clients while conforming to medically accepted best practices. Due to state government budget constraints, the Agency Board voted on December 12, 2002, to require a prior authorization for Clopidigrel effective April 1, 2003. According to Article 10, Section 23 of the Oklahoma Constitution, all state agencies must maintain a balanced budget.

Other revisions change non-sedating antihistamine prior authorization requirements. The need for the revision was precipitated by the availability of Loratidine (Claritin™) without a prescription. The desired outcome is to provide proper therapy to clients with a diagnosis supporting the long-term use of a non-sedating antihistamine while conforming to medically accepted best practices for those conditions. In order to comply with 56 O.S. §1010.12, the non-prescription products would be covered drugs for children under 21 years of age. Due to state government budget constraints, the Agency Board voted on December 12, 2002, to require a prior authorization for non-sedating antihistamines effective January 1, 2003. According to Article 10, Section 23 of the Oklahoma Constitution, all state agencies must maintain a balanced budget. Both of these revisions are needed in order for the Agency to maintain a balanced budget.

**CONTACT PERSON:**

Joanne Terlizzi at (405)522-7272

**PURSUANT TO THE ACTIONS DESCRIBED HEREIN, THE FOLLOWING EMERGENCY RULES ARE CONSIDERED PROMULGATED UPON APPROVAL BY THE GOVERNOR AS SET FORTH IN 75 O.S., SECTION 253(D), AND EFFECTIVE UPON APPROVAL BY GOVERNOR OR JULY 1, 2003, WHICHEVER IS LATER:**

## SUBCHAPTER 5. INDIVIDUAL PROVIDERS AND SPECIALTIES

## PART 5. PHARMACISTS

### 317:30-5-72.1. Drug benefit

OHCA administers and maintains an Open Formulary subject to the provisions of Title 42, United States Code (U.S.C.), Section 1396r-8. The Authority covers any drug for its approved purpose that has been approved by the Food and Drug Administration (FDA) for manufacturers who have entered into a drug rebate agreement with the Centers for Medicare and Medicaid Services, (CMS) formerly known as the Health Care Financing Administration (HCFA) subject to the following exclusions, and limitations.

(1) The following drugs, classes of drugs, or their medical uses are excluded from coverage:

(A) Agents used to promote fertility.

(B) Agents primarily used to promote hair growth.

(C) Agents used for cosmetic purposes.

(D) Agents used for the symptomatic relief of coughs and colds. Cough and cold drugs are not covered.

(E) Vitamins and Minerals.

(F) Agents used primarily for the treatment of anorexia or weight gain. Drugs used primarily for the treatment of obesity, such as appetite suppressants are not covered. Drugs used primarily to increase weight are not covered unless otherwise specified.

(G) Agents used for smoking cessation. Nicotine replacement products are not covered.

(H) Food supplements.

(I) Agents that are experimental or whose side effects make usage controversial.

(J) Covered outpatient drugs which the manufacturer seeks to require as a condition of sale that associated tests or monitoring services be purchased exclusively from the manufacturer or designee.

(K) Over-the-counter drugs. Over-the-counter medications are not covered except for those medications listed in Paragraph (3) of this subsection.

(2) The exceptions to the exclusions provided in subsection OAC 317:30-5-72.1(1) are as follows:

(A) Agents used for the systematic relief of cough and colds. Antihistamines for allergies or antihistamine use associated with asthmatic conditions may be covered when medically necessary and prior authorized. ~~Non-sedating antihistamines are covered for children without prior authorization.~~

(B) Vitamins and Minerals. Vitamins and minerals are not covered except under the following conditions:

(i) prenatal vitamins are covered for pregnant women up to age 50;

(ii) fluoride preparations are covered for persons under 16 years of age or pregnant; and

(iii) calcifediol/calciferol when used to treat end stage renal disease are covered.

(C) Agents used primarily for the treatment of anorexia or weight gain. There is limited coverage under the scope based prior authorization.

(D) Agents used for smoking cessation. A limited smoking cessation benefit is available through OAC 317:30-5-77.2(e)(1)(B)(ii).

(E) Over the counter drugs. Insulin and the following family planning products are covered.

(i) Male and Female Condoms.

(ii) Contraceptive sponges.

(iii) Diaphragms.

(iv) Spermicidal jellies, creams, suppositories, and foams.

(3) All covered outpatient drugs are subject to prior authorization as provided in OAC 317-30-5-77.2 and 317:30-5-77.3.

(4) All covered drugs may be excluded or coverage limited if:

(A) the prescribed use is not for a medically accepted indication as provided under 42 U.S.C. § 1396r-8;

(B) the drug is subject to such restriction pursuant to the rebate agreement between the manufacturer and the Health Care Financing Administration;

(C) OHCA has excluded coverage of the drug from its formulary established by the State as provided under 42 U.S.C. § 1396r-8.

**317:30-5-77.2. Prior authorization**

(a) **Definition.** The term prior authorization means an authorization by OHCA to the pharmacist to fill the prescription before it is filled by the pharmacist.

(b) **Process.** Because of the required interaction between a prescribing provider (such as a physician) and a pharmacist to receive a prior authorization, OHCA allows a pharmacist up to a 30 calendar day period from the point of sale notification to provide the data necessary for OHCA to make a decision regarding prior authorization. Should a pharmacist fill a prescription prior to the actual authorization he/she takes a business risk that the claim for filling the prescription will be denied. In the case that information regarding the prior authorization is not provided within the 30 day calendar period, claims will be denied.

(c) **Documentation.** OHCA administers a prior authorization program through a contract with an agent. Prior Authorization requests with clinical exceptions must be mailed or faxed to the Medication Authorization unit of the agent. Other authorization requests, claims processing questions and questions pertaining to DUR alerts must be addressed by contacting the Pharmacy help desk. Authorization requests with complete information are reviewed and a response returned to the dispensing pharmacy within 24 hours.

(d) **Emergencies.** In an emergency situation the Health Care Authority will authorize a 72 hour supply of medications to a client. The authorization for a 72 hour emergency supply of medications does not count against the Medicaid limit described in OAC 317:30-5-72(a)(1).

(e) **Utilization and scope.** There are three reasons for the use of prior authorization: utilization controls, product based controls, and scope controls. Scope controls refer to constraints used to insure a drug is used for approved indications and is therapeutically appropriate.

(1) **Utilization.**

(A) **Quantity.** Toradol is covered for eligible individuals for a quantity up to 22 tablets or a 5 day supply which ever is less, each month. Prior authorization is required when additional coverage is medically necessary beyond this limit.

(B) **Duration.**

(i) **H2 antagonists/proton pump inhibitors/carafate.** H2 receptor antagonists and Carafate are covered for eligible individuals for 90 days of therapy in the previous 360 days. H2 antagonists and Carafate do not require prior authorization when prescribed at the recommended doses or lower after the 90 day limit. The following are recommended doses for these drugs.

(I) Drug name: Ranitidine (Zantac): 300mg per day

(II) Drug name: Cimetidine (Tagamet): 800mg per day

(III) Drug name: Famotidine (Pepcid): 20mg per day

(IV) Drug name: Nizatidine (Axid): 150mg per day

(V) Drug name: Sucralfate (Carafate): 1000mg four times per day

(ii) **Smoking cessation products.** A 90-day smoking cessation benefit consisting of Zyban, prescription nicotine patches, or Zyban/patch combination is covered once per twelve months when prior authorized. Any additional coverage is considered on a case by case basis.

(iii) **Benzodiazepines and barbiturates.** Barbiturates and Benzodiazepines are covered for eligible individuals for 90 days of therapy in the previous 360 days. Prior authorization is required when additional coverage is medically necessary beyond this limit.

(iv) **Hypnotics.** Ambien a hypnotic medication similar in activity to benzodiazepines is covered for eligible individuals for 90 days of therapy in the previous 360 days. Prior authorization is required when additional coverage is medically necessary beyond this limit.

(2) **Scope.**

(A) **Antihistamines.** Legend antihistamines are covered only after a previous trial with an over-the-counter antihistamine. Over-the-counter non-sedating antihistamines are a covered benefit for children under 21 years of age. The trial should be with an antihistamine that exhibits comparable characteristics to the legend alternative. Also, the trial should have been in the last ~~three months~~ month and be of adequate dose and duration. A fourteen day trial of an over-the-counter non-sedating antihistamine is required prior to approval of a legend product for

all clients. ~~Non-sedating antihistamines for children under 21 years of age are exempt from the prior authorization program as put forth in Oklahoma Statutes.~~

(B) **Growth Hormone.** Growth Hormone is a covered medication via the prior authorization program provided the patient meets the applicable criteria for initiation and continuance of treatment. The following are the specific indications in which growth hormone therapy will be considered for coverage:

(i) the treatment of short stature, Turner's syndrome, hypoglycemia related growth hormone deficiency;

(ii) physiologic replacement for adults who previously met growth hormone deficiency guidelines as children; and

(iii) catabolic wasting in AIDS patients.

(C) **Anorexiants.** Limited anorexiant coverage is available for the treatment of Attention Deficit Hyperactivity Disorder (ADHD) and Narcolepsy. All products require prior authorization for use in adults. The ~~Anorexiants~~ anorexiants are divided into three categories. The first category requires no prior authorization for children and includes Methylphenidate immediate and controlled release formulations, Dextroamphetamine immediate and controlled release formulations, and the immediate release formulation of Adderall™, including generic equivalents. The second category requires a prior authorization for children and adults and also requires a previous trial with both Methylphenidate and Dextroamphetamine. The products in this category are Pemoline and Methamphetamine. The third category includes Concerta, Metadate CD, and Adderall XR. These drugs require prior authorization for children and adults and a previous trial with a medication from the first category. The prescribing physician must complete and sign the petition for prior authorization. Authorizations will be issued for a one year period.

(D) **TB related medications.** Drugs prescribed for the treatment of TB related morbidities not listed in OAC 317:30-3-46 require prior authorization.

(E) **Clopidigrel (Plavix™).** Clodpidigrel is covered for eligible individuals through the prior authorization process. Authorization will be granted to individuals with diagnoses for which an approved indication exists and the individual has a contra-indication for aspirin use or has a therapeutic failure with previous aspirin therapy.

*[OAR Docket #03-3004; filed 7-17-03]*

---

## TITLE 317. OKLAHOMA HEALTH CARE AUTHORITY
## CHAPTER 30. MEDICAL PROVIDERS-FEE FOR SERVICE

*[OAR Docket #03-3003]*

**RULEMAKING ACTION:**
EMERGENCY adoption
**RULES:**
Subchapter 5. Individual Providers and Specialties
Part 5. Pharmacists
317:30-5-77. [AMENDED]
**(Reference APA WF # 03-12)**
**AUTHORITY:**
The Oklahoma Health Care Authority Board; The Oklahoma Health Care Authority Act, Section 5003 through 5016 of Title 63 of Oklahoma Statutes; Article 10, Section 23 of the Oklahoma Constitution
**DATES:**
**Adoption:**
April 10, 2003
**Approved by Governor:**
May 26, 2003
**Effective:**
Immediately upon Governor's approval or July 1, 2003, whichever is later
**Expiration:**
Effective through July 14, 2004, unless superseded by another rule or disapproved by the Legislature.
**SUPERSEDED EMERGENCY ACTIONS:**
N/A
**INCORPORATIONS BY REFERENCE:**
N/A
**FINDING OF EMERGENCY:**
The Agency finds that a compelling public interest exists which necessitates promulgation of emergency rules and requests emergency approval of rule revisions to manage the rapid rise in prescription costs for Medicaid recipients. The state constitution requires all agencies to maintain a balanced budget. An emergency rule is necessary in order for the Agency to maintain a balanced budget as failure to do so would lead to a breach of the state constitution. Total annual estimated savings is between $1 to $2 million dollars with a state share savings between $300,000 to $600,000. As more drugs become generically available, the savings will increase.
**ANALYSIS:**
Medical Providers-Fee for Service, Pharmacists specific, rules are revised to require a prior authorization for brand name medically necessary drug products when a generic equivalent is available. Establishing a prior authorization requirement mandates the prescriber and patient to justify the use of expensive brand name drugs when a less costly generic is available. The products that will be affected by this rule typically exhibit a cost differential of 70-90% between generic and brand name prices. If a patient has tried the generic product and has not have a therapeutic response or has had an adverse reaction, the brand name will be authorized. The prior authorization requirement will help ensure that public funds are expended appropriately in exchange for cost-effective pharmacotherapy. Pharmacy providers may see an increase in profit margins because generic products cost less to stock and dispense and generally have a higher rate of return than brand name products. According to Article 10, Section 23 of the Oklahoma Constitution, all state agencies must maintain a balanced budget. In order for the Agency to accomplish the necessary financial reductions, rules are in need of revision to require a prior authorization for brand name medically necessary drug products when a generic equivalent is available.
**CONTACT PERSON:**
Joanne Terlizzi at (405)522-7272

**PURSUANT TO THE ACTIONS DESCRIBED HEREIN, THE FOLLOWING EMERGENCY RULES ARE CONSIDERED PROMULGATED UPON APPROVAL BY THE GOVERNOR AS SET FORTH IN 75 O.S., SECTION 253(D), AND EFFECTIVE UPON APPROVAL**

**BY GOVERNOR OR JULY 1, 2003, WHICHEVER IS LATER:**

## SUBCHAPTER 5. INDIVIDUAL PROVIDERS AND SPECIALTIES

## PART 5. PHARMACISTS

**317:30-5-77. Brand necessary certification**

(a) Unless the prescribing provider certifies a brand name drug product is medically necessary for the well being of the patient a generic must be substituted for the name brand product. ~~The requirements for a brand name certification are as follows:~~ A prior authorization will be required for brand necessary certification. The prescribing provider must complete a petition for prior authorization and the FDA MedWatch form, stating the dates of generic drug use and a description of the adverse event reported. For certain narrow therapeutic index drugs, a MedWatch form will not be required. The DUR Board will select and maintain the list of narrow therapeutic index drugs.

~~(1) The certification must be written in the physician's or other prescribing provider's handwriting.~~

~~(2) Certification must be written directly on the prescription blank or on a separate sheet which is attached to the original prescription.~~

~~(3) A standard phrase indicating the need for a specific brand is required. The Authority recommends use of the phrase "Brand Necessary".~~

~~(4) It is unacceptable to use a printed box on the prescription blank that could be checked by the physician to indicate brand necessary, or to use a hand-written statement that is transferred to a rubber stamp and then stamped onto the prescription blank.~~

~~(5) If a physician phones a prescription to the pharmacy and indicates the need for a specific brand, the physician should be informed of the need for a handwritten certification. The pharmacy can either request that the certification document be given to the patient who then delivers it to the pharmacy upon receipt of the prescription, or request the physician send the certification through the mail.~~

(b) The Brand Necessary Certification applies to HCFA Upper Limit and State Maximum Allowable Cost (SMAC) products.

*[OAR Docket #03-3003; filed 7-17-03]*

---

## TITLE 317. OKLAHOMA HEALTH CARE AUTHORITY
## CHAPTER 35. MEDICAL ASSISTANCE FOR ADULTS AND CHILDREN-ELIGIBILITY

*[OAR Docket #03-3006]*

**RULEMAKING ACTION:**
EMERGENCY adoption

**RULES:**
Subchapter 1. General Provisions
317:35-1-2. [AMENDED]
Subchapter 3. Coverage and Exclusions
317:35-3-1. [AMENDED]
317:35-3-2. [AMENDED]
Subchapter 5. Eligibility and Countable Income
Part 1. Determination of Qualifying Categorical Relationships
317:35-5-1. [AMENDED]
Part 5. Countable Income and Resources
317:35-5-46. [AMENDED]
Subchapter 6. SoonerCare Health Benefits for Categorically Needy Pregnant Women and Families with Children
Part 5. Determination of Eligibility for SoonerCare Health Benefits for Pregnant Women and Families with Children
317:35-6-36. [AMENDED]
Part 7. Certification, Redetermination and Notification
317:35-6-60. [AMENDED]
317:35-6-63. [AMENDED]
Subchapter 7. Medical Services
Part 1. General
317:35-7-1. [AMENDED]
Part 5. Determination of Eligibility for Medical Services
317:35-7-37. [AMENDED]
317:35-7-39. [REVOKED]
317:35-7-41. [AMENDED]
317:35-7-45. [REVOKED]
Part 7. Certification, Redetermination and Notification
317:35-7-60. [AMENDED]
317:35-7-64. [AMENDED]
Subchapter 9. ICF/MR, HCBW/MR, and Individuals Age 65 or Older in Mental Health Hospitals
Part 1. Services
317:35-9-1. [AMENDED]
Subchapter 10. Medical Aid to Families with Dependent Children
Part 5. Income
317:35-10-26. [AMENDED]
317:35-10-29. [AMENDED]
317:35-10-31. [AMENDED]
Subchapter 15. Personal Care Services
317:35-15-1. [AMENDED]
317:35-15-6. [AMENDED]
**(Reference APA WF 03-13B)**

**AUTHORITY:**
The Oklahoma Health Care Authority Board; The Oklahoma Health Care Authority Act, Section 5003 through 5016 of Title 63 of Oklahoma Statutes; Article 10, Section 23 of the Oklahoma Constitution; 42 CFR 435.301

**DATES:**
**Adoption:**
April 10, 2003
**Approved by Governor:**
May 26, 2003
**Effective:**
Immediately upon Governor's approval or July 1, 2003, whichever is later
**Expiration:**
Effective through July 14, 2004, unless superseded by another rule or disapproved by the Legislature.

**SUPERSEDED EMERGENCY ACTIONS:**
N/A

**INCORPORATIONS BY REFERENCE:**
N/A

**FINDING OF EMERGENCY:**
The Agency finds that a compelling public interest exists which necessitates promulgation of emergency rules and requests emergency approval of rule revisions to eliminate the Medically Needy Program. The state constitution requires all agencies to maintain a balanced budget. An emergency rule is necessary in order for the Agency to maintain a balanced budget as failure to do so would lead to a breach of the state constitution. Agency staff has estimated an annual budget savings of $960,000 state dollars.

**ANALYSIS:**
Agency rules are revised to eliminate the Oklahoma Medicaid Medically Needy Program. States have the option under the Medicaid program to extend coverage to individuals categorized as Medically Needy. Due to state government budget constraints, the OHCA Board voted on December 12,

2002, to eliminate coverage of medically needy individuals effective February 1, 2003. According to Article 10, Section 23 of the Oklahoma Constitution, all state agencies must maintain a balanced budget. In order for the Agency to accomplish the necessary financial reductions, rules are in need of revision to eliminate the Medically Needy Program.

**CONTACT PERSON:**

Joanne Terlizzi at (405)522-7272

**PURSUANT TO THE ACTIONS DESCRIBED HEREIN, THE FOLLOWING EMERGENCY RULES ARE CONSIDERED PROMULGATED UPON APPROVAL BY THE GOVERNOR AS SET FORTH IN 75 O.S., SECTION 253(D), AND EFFECTIVE UPON APPROVAL BY GOVERNOR OR JULY 1, 2003, WHICHEVER IS LATER:**

## SUBCHAPTER 1. GENERAL PROVISIONS

### 317:35-1-2. Definitions

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

**"Administrative agent"** means the Enid or Tulsa Long-Term Care Authority who are under contract with DHS to perform certain administrative functions related to the ADvantage Waiver.

**"AFDC"** means Aid to Families with Dependent Children.

**"Aged"** means an individual whose age is established as 65 years or older.

**"Aid to Families with Dependent Children"** means the group of low income families with children described in Section 1931 of the Social Security Act. The Personal Responsibility and Work Opportunity Act of 1996 established the new eligibility group of low income families with children and linked eligibility income and resource standards and methodologies and the requirement for deprivation for the new group to the State plan for Aid to Families with Dependent Children in effect on July 16, 1996. Oklahoma has elected to be less restrictive for all Medicaid clients related to AFDC.

**"Area nurse"** means a registered nurse in the DHS Aging Services Division, designated according to geographic areas who evaluates the UCAT and determines medical eligibility for Personal Care, ADvantage Waiver, and Nursing Facility services. The area nurse also approves care plan and service plan implementation for Personal Care services.

**"Area nurse designee"** means a registered nurse selected by the area nurse who evaluates the UCAT and determines medical eligibility for Personal Care, ADvantage Waiver, and Nursing Facility services.

**"Authority"** means the Oklahoma Health Care Authority.

**"Blind"** means an individual who has central visual acuity of 20/200 or less in the better eye with the use of a correcting lens.

**"Board"** means the Oklahoma Health Care Authority Board.

**"Buy-in"** means the procedure whereby the Authority pays the client's Medicare premium.

(A) **"Part A Buy-in"** means the procedure whereby the Authority pays the Medicare Part A premium for individuals determined eligible as Qualified Medicare Beneficiaries Plus (QMBP) who are enrolled in Part A and are not eligible for premium free enrollment as explained under Medicare Part A. This also includes individuals determined to be eligible as Qualified Disabled and Working Individuals (QDWI).

(B) **"Part B Buy-in"** means the procedure whereby the Authority pays the Medicare Part B premium for categorically needy individuals who are eligible for Part B Medicare. This includes individuals who receive TANF or the State Supplemental Payment to the Aged, Blind or Disabled, those approved for nursing care or alternative care who have SSI income, and those determined to be Qualified Medicare Beneficiary Plus (QMBP)/Specified Low Income Medicare Beneficiaries (SLMB) or Qualifying Individual-1 (QI-1). Also included are individuals who continue to be categorically needy under the PICKLE amendment and those who retain eligibility after becoming employed. Qualified Disabled and Working Individuals (QDWI) are not eligible for Part B Buy-In.

**"Case management"** means the activities performed for client's to assist them in accessing services, advocacy and problem solving related to service delivery.

**"Categorically needy"** means that income and when applicable, resources are within the standards for the category to which the client is related.

**"Categorically related" or "related"** means the individual is:

(A) aged, blind, or disabled;

(B) pregnant;

(C) an adult individual who has a minor child under the legal age of 18 and the child is deprived of parental support due to absence, death, incapacity, unemployment; or

(D) a child under 19 years of age.

**"Certification period"** means the period of eligibility extending from the effective date of certification to the date of termination of eligibility or the date of the next periodic redetermination of eligibility.

**"County"** means the Department of Human Services' office or offices located in each county within the State.

**"DHS"** means the Department of Human Services.

**"Deductible/Coinsurance"** means the payment that must be made by or on behalf of an individual eligible for Medicare before Medicare payment is made. The coinsurance is that part of the allowable medical expense not met by Medicare, which must be paid by or on behalf of an individual after the deductible has been met.

(A) For Medicare Part A (Hospital Insurance), the deductible relates to benefits for in-patient services while the patient is in a hospital or nursing facility. After the deductible is met, Medicare pays the remainder of the allowable cost.

(B) For Medicare Part B (Supplemental Medical Insurance), the deductible is an annual payment that must be made before Medicare payment for medical services. After the deductible is met, Medicare pays 80% of the allowable charge. The remaining 20% is the coinsurance.

**"Disabled"** means an individual who is unable to engage in any substantial gainful activity by reason of any medically determinable physical or mental impairment which can be expected to result in death, or which has lasted (or can be expected to last) for a continuous period of not less than 12 months.

**"Disabled child"** means for purposes of Medicaid Recovery a child of any age who is blind, or permanently and totally disabled according to standards set by the Social Security Administration.

**"Estate"** means all real and personal property and other assets included in the recipient's estate as defined in Title 58 of the Oklahoma Statutes.

**"Gatekeeping"** means the performance of a comprehensive assessment by the LTC nurse utilizing the Uniform Comprehensive Assessment Tool (UCAT) for the determination of Medical eligibility, care plan development, and the determination of Level of Care for Personal Care, ADvantage Waiver and Nursing Facility services.

**"Local office"** means the Department of Human Services' office or offices located in each county within the State.

**"LOCEU"** means the Oklahoma Health Care Authority's Level of Care Evaluation Unit.

**"LTC nurse"** means a registered nurse in the DHS Aging Services Division who meets the certification requirements for UCAT Assessor and case manager, and who conducts the uniform assessment of individuals utilizing the Uniform Comprehensive Assessment Tool (UCAT) for the purpose of medical eligibility determination. The LTC nurse also develops care plans and service plans for Personal Care services based on the UCAT.

~~**"Medically needy"** means that the individual's income and, if applicable, resources are in excess of the needs standards for the category to which he/she is related but such income and resources are insufficient to meet the cost of medical care.~~

**"Medicare"** means the federally funded health insurance program also known as Title XVIII of the Social Security Act. It consists of two separate programs. Part A is Hospital Insurance (HI) and Part B is Supplemental Medical Insurance (SMI).

(A) **"Part A Medicare (HI)"** means Hospital Insurance that covers services for inpatient services while the patient is in a hospital or nursing facility. Premium free enrollment is provided for all persons receiving OASDI or Railroad Retirement income who are age 65 or older and for those under age 65 who have been receiving disability benefits under these programs for at least 24 months.

(i) Persons with end stage renal disease who require dialysis treatment or a kidney transplant may also be covered.

(ii) Those who do not receive OASDI or Railroad Retirement income must be age 65 or over and pay a large premium for this coverage. Under Authority rules, these individuals are not required to enroll for Part A to be eligible for Medicaid benefits as categorically needy or ~~medically needy~~. They must however, enroll for Medicare Part B. Individuals eligible as a QMBP or as a Qualified Disabled and Working Individual (QDWI) under Medicaid are required to enroll for Medicare Part A. The Authority will pay Part A premiums for QMBP individuals who do not qualify for premium free Part A and for all QDWI's.

(B) **"Part B Medicare (SMI)"** means Supplemental Medical Insurance that covers physician and related medical services other than inpatient or nursing facility care. Individuals eligible to enroll in Medicare Part B are required to do so under Authority policy. A monthly premium is required to keep this coverage in effect.

**"Minor child"** means a child under the age of 18.

**"Nursing Care"** for the purpose of Medicaid Recovery is care received in a nursing facility, an intermediate care facility for the mentally retarded or other medical institution providing nursing and convalescent care, on a continuing basis, by professional personnel who are responsible to the institution for professional medical services.

**"OHCA"** means the Oklahoma Health Care Authority.

**"Qualified Disabled and Working Individual (QDWI)"** means individuals who have lost their Title II OASDI benefits due to excess earnings, but have been allowed to retain Medicare coverage.

**"Qualified Medicare Beneficiary Plus (QMBP)"** means certain aged, blind or disabled individuals who may or may not be enrolled in Medicare Part A, meet the Medicaid QMBP income and resource standards and meet all other Medicaid eligibility requirements.

**"Qualifying Individual"** means certain aged, blind or disabled individuals who are enrolled in Medicare Part A, meet the Medicaid Qualifying Individual income and resource standards and meet all other Medicaid eligibility requirements.

**"Qualifying Individual-1"** means a Qualified Individual who meets the Qualifying Individual-1 income and resource standards.

**"Qualifying Individual-2"** means a Qualified Individual who meets the Qualifying Individual-2 income and resource standards.

**"Recipient lock-in"** means when a recipient is restricted to one primary physician and/or one pharmacy. It occurs when the OHCA determines that a Medicaid recipient has used multiple physicians and/or pharmacies in an excessive manner over a 12-month period.

**"Scope"** means the covered medical services for which payment is made to providers on behalf of eligible individuals. The Oklahoma Health Care Authority Provider Manual (OAC 317:30) contains information on covered medical services.

**"Specified Low Income Medicare Beneficiaries (SLMB)"** means individuals who, except for income, meet all

of the eligibility requirements for QMBP eligibility and are enrolled in Medicare Part A.

**"Spenddown"** means the procedure by which an otherwise eligible individual applies excess income to the covered medical service before payment can be made from Medicaid funds.

**"Spenddown computation period"** means the period of time during which income, maintenance standards and medical expenses are considered to determine the amount of spenddown for the certification period.

**"Worker"** means the DHS worker responsible for Medicaid eligibility determinations.

## SUBCHAPTER 3. COVERAGE AND EXCLUSIONS

### 317:35-3-1. Payment for Medicaid

(a) **Payment eligibility.** In order for the Authority to make payment for Medicaid services, the individual must be determined eligible to have such payment made by:

(1) having eligibility previously determined ~~as a categorically needy or medically needy individual~~, or

(2) making application for Medicaid at the time the medical services is requested, and having eligibility determined at that time.

(b) **Recipient lock-in.** Medicaid recipients who have demonstrated Medicaid usage above the statistical norm, during a 12-month period, may be "locked-in" to one primary physician and/or one pharmacy. If OHCA has determined that Medicaid has been over-utilized, the recipient is notified, by letter, of the need to select a primary physician and/or pharmacy and of their opportunity for a fair hearing. A copy of the letter is sent to the DHS county office. If the recipient does not select a physician and/or pharmacy, one is selected for her/him. "Locked-in" recipients may obtain emergency services from a physician and/or an emergency room facility in the event of a medical emergency.

### 317:35-3-2. Amount, duration and scope of coverage for Title XIX

Coverage for Medicaid shall be as follows:

(1) Inpatient hospital services. Payment is made for compensable inpatient medical and surgical services to hospitals which contract with the Authority. General acute care inpatient hospital services are limited to 24 days per adult per State fiscal year (July 1 through June 30). For persons under the age of 21, inpatient hospital services are not limited. All psychiatric admissions for children require prior authorization for an approved length of stay.

(2) Outpatient hospital services. Payment is made for the following outpatient hospital services:

(A) Emergency department services for persons over age 21 are covered. Payment is made at a case rate which includes all non-physician services provided during the visit.

(B) Dialysis.

(C) Therapeutic radiology or chemotherapy.

(D) Chemotherapeutic agents and therapeutic radiology related to the treatment of opportunistic infections.

(E) Outpatient surgical services (Ambulatory Surgery). Services are limited to selected surgical procedures performed on an outpatient basis.

(F) Outpatient behavioral health services. These services are medical and remedial care services provided on an outpatient basis by appropriately accredited hospital based facilities who are also contracted as providers of Outpatient Behavioral Health Services. Services include:

(i) crisis intervention services,
(ii) treatment plan development,
(iii) psychological testing,
(iv) individual counseling,
(v) group counseling,
(vi) rehabilitative treatment services,
(vii) treatment plan review,
(viii) medical review,
(ix) case management,
(x) family counseling,
(xi) individual rehabilitation, and
(xii) nursing facility behavioral health rehabilitative services.

(G) Ambulatory services related to the treatment of persons infected with tuberculosis (TB). Ambulatory services related to the treatment of TB are not limited to the scope of the Medicaid program, but services that exceed the scope require prior authorization.

(H) Outpatient hospital services, not specifically addressed, are covered only when prior authorized by the Medical Professional Services Unit of the Oklahoma Health Care Authority.

(3) Rural health clinic services. Payment for Rural Health Clinic Services (RHCS) is made within limits of other providers for the same services and is limited to services specified in certification.

(4) Other laboratory and x-ray services. Payment is made for diagnostic x-ray and laboratory services provided in a physician's office or similar facility other than outpatient hospital.

(5) Nursing facility services. See Long Term Care (Subchapter 19 of this Chapter) for coverage of nursing facility services. For coverage of drugs see (15) of this subsection for the definition of Prescribed Drugs for individuals receiving nursing facility services.

(6) Early and Periodic Screening, Diagnosis and Treatment of individuals under 21 years of age. The Oklahoma EPSDT Program is a comprehensive child health program, designed for ensuring the availability of and access to required health care resources and helping parents and guardians of Medicaid eligible children to effectively use these resources. An effective EPSDT program assures that health problems found are diagnosed and treated early before they become more complex and their treatment

more costly. The receipt of an identified EPSDT screening makes the Medicaid child eligible for all necessary follow-up care that is within the scope of the Medicaid program. Necessary follow-up care identified by an EPSDT screening to correct or ameliorate defects and physical and mental illness and conditions beyond the scope of Medicaid and for which there is Federal matching funds available under Medicaid are allowed when prior authorized. Coverage under EPSDT includes the following:

(A) Child health screening examination by a licensed physician, medical or osteopathic.

(i) Scheduled screenings include:

(I) six screenings during the first year of life;

(II) two screenings in the second year;

(III) one screening yearly for age 2 through 5 years; and

(IV) one screening every other year for ages 6 through 20 years.

(ii) Interperiodic screenings at necessary intervals outside the periodicity schedule for child health screening examinations are allowed when a medical condition is suspected.

(B) Diagnostic x-ray, laboratory, and/or injections when prescribed by a physician.

(C) Immunizations.

(D) Outpatient care.

(E) Dental services, inpatient services in an eligible participating hospital, including admission history and physical, two outpatient dental screenings, two bite wing x-rays, and/or two oral Prophylaxis each 12 months; emergency services for relief of pain and/or acute infection; limited restoration, repair and/or replacement of dental defects after the treatment plan submitted by dentist has been authorized. Interperiodic screenings at intervals outside the periodicity schedule for dental examinations are allowed when a dental condition is suspected.

(F) Optometrists' services. The periodicity schedule provides for a minimum of one visual screening or visual analysis and one pair of glasses once each 12 months. In addition, payment is made for glasses for children with congenital aphakia or following cataract removal. Interperiodic screenings and glasses at intervals outside the periodicity schedule for optometrists' examinations are allowed when a vision condition is suspected.

(G) Hearing evaluation once every 12 months, hearing aid evaluation if indicated as a result of the hearing evaluation, and purchase of a hearing aid when prescribed by a state licensed audiologist who holds a certificate of clinical competence from the American Speech and Hearing Association and preauthorized. Interperiodic screenings at intervals outside the periodicity schedule for hearing examinations are allowed when a hearing condition is suspected.

(H) Prescription drugs. The number of prescriptions per month is not limited for eligible individuals under 21 years of age

(I) Psychological services - for eligible individuals under 21 years of age, payment is made for individual psychotherapy, family therapy, and group therapy. Four hours of psychological testing is covered each year, per recipient. Additional hours are covered when prior authorized. Services may be covered if provided in provider's office, patient's home, or hospital. Inpatient psychotherapy and testing are compensable when not a part of the per diem reimbursable cost of the facility.

(J) Transportation - provided when necessary in connection with examination or treatment when not otherwise available.

(K) Medical supplies, equipment, appliances and prosthetic devices beyond the normal scope of Medicaid are covered.

(L) Inpatient hospital services are not limited. All psychiatric admissions require prior authorization for an approved length of stay.

(M) EPSDT services furnished in a qualified child health center include child health screening examination, dental screening examination, child health encounter, dental encounter, child health diagnostic encounter, child guidance treatment encounter, multidisciplinary review, immunizations, dental sealants, hearing evaluations, audiometric tests and ear impression molds.

(N) Early intervention services provided by early intervention centers include:

(i) audiology services;

(ii) family training and counseling;

(iii) health services necessary to enable a child to benefit from the other early intervention services during the time the child is receiving these services;

(iv) medical services only for diagnostic or evaluation purposes by a licensed physician to determine a child's developmental status and need for early intervention services;

(v) nursing services;

(vi) nutrition services;

(vii) occupational therapy;

(viii) physical therapy;

(ix) psychological services;

(x) social work services;

(xi) speech-language pathology; and

(xii) early intervention case management services.

(7) Family planning services and supplies. Payment is made for counseling, insertion of intrauterine devices and other family planning products, and sterilizations for persons 21 years of age and over who are legally competent, not institutionalized and have signed the "Consent Form" within the prescribed time limit. Payment is also made for Family Planning Center services. The Family

Planning Centers must be certified by the Oklahoma State Department of Health.

(A) Services include:

(i) initial examination;

(ii) annual examination;

(iii) encounter visit;

(iv) vasectomy services; and

(v) tubal ligations.

(B) Vasectomies and tubal ligations are limited to persons 21 years of age and over.

(C) Reversal of sterilization procedures for the purposes of conception are not covered. Reversal of sterilization procedures may be covered when medically necessary and substantiating documentation is attached to the claim.

(8) Physicians' services whether furnished in the office, the patient's home, a hospital, a nursing facility or elsewhere. Payment is made for compensable medical and surgical outpatient and inpatient services. Hospital visits for adults are limited to one per day for 24 compensable inpatient hospital days per individual, each State fiscal year. (SEE EPSDT (6) of this Section for exceptions for children). Office visits, home visits or elsewhere are limited to two per month, per patient regardless of the number of physicians and two visits per month in a nursing facility. The following services are excluded from number of visits limitation per month:

(A) Services for persons age 21 and older in connection with an emergency department visit.

(B) EPSDT services for persons under age 21 (including additional office visits).

(C) Family Planning services.

(D) Ambulatory services related to the treatment of tuberculosis (TB). Services related to the treatment of TB are not limited to the scope of Title XIX, but services that exceed the scope require prior authorization.

(9) Podiatrists' services.

(10) Optometrists' services. Payment is made to optometrists for medical services (visits) within the scope of the optometric practice as defined by State law for these services. Visits are subject to the two per month outpatient visit limitation.

(11) Psychological services. Services by a psychologist are not covered for adult recipients.

(12) Home health services. Home health services and standard medical supplies are available.

(13) Clinic services. The following clinic services are covered:

(A) **Maternity Clinic Services.** Maternity clinic services furnished in clinics certified by the Oklahoma State Department of Health.

(B) **Free standing ambulatory surgery center.** Payment is made for a facility fee for certain surgical procedures performed in Medicare certified free-standing ambulatory surgical centers which have contracts on file with the Authority.

(C) **Renal dialysis facilities.** Payment is made for dialysis services provided by Medicare certified renal dialysis facilities which have contracts on file with the Authority.

(D) **Coverage for tuberculosis infected individuals.**

(i) Individuals may be eligible for coverage under the Authority's Optional Medicaid Coverage for Categorically Needy Individuals Infected with Tuberculosis (TB). In addition to a written statement verifying tuberculosis infection by a medical practitioner, the individual must meet income and resource requirements.

(ii) Individuals certified eligible for this program may only receive TB-related services. They are not eligible for the full range of Medicaid services available to other Medicaid recipients unless a separate determination is made.

(iii) TB-related services include:

(I) Medications;

(II) Physician services;

(III) Outpatient hospital;

(IV) Rural Health Clinic services;

(V) Federally Qualified Health Center services;

(VI) Laboratory and x-ray services;

(VII) Clinic services and FQHC services;

(VIII) Case Management services; and

(IX) Direct observed therapy.

(14) Dental services. Dental coverage for adults is limited to emergency extractions.

(15) Prescribed drugs. Payment is made to pharmacies with whom the Authority has a contract on behalf of categorically needy recipients up to a maximum of three prescriptions (new or refill) per month per eligible recipient. The number of prescriptions per month is not limited for eligible individuals under 21 years of age or for drugs used for the treatment of tuberculosis. Drugs prescribed for the treatment of TB not listed in OAC 317:30-3-47.1 require prior authorization from the University of Oklahoma College of Pharmacy using form "Petition for TB Related Therapy". Prescription quantities are limited to a 34 day supply or 100 dosage units, whichever is greater, and only drugs approved by the Food and Drug Administration (FDA) and included in the Drug Rebate Agreement Program are covered.

~~(A) Payment is made on behalf of medically needy recipients suffering from a catastrophic illness for drugs. A catastrophic illness is a terminal illness which can be expected, with reasonable medical judgement, to result in death within six months. Catastrophic illness also includes malignancies which are inoperable or have widespread metastases and are unresponsive to palliative therapy, severe incapacitating burn or injury for which the duration of anticipated active treatment is six months or more, psychotic disorders, congenital or acquired disease of the blood which require the use of blood or blood~~

~~products, and immunosuppressive drugs for transplant patients. Catastrophic illness does not include mental illness other than psychotic disorders, cerebral vascular accident (CVA), hormone dependent tumors, isotope sensitive tumors and malignancies with metastases which have not been apparent for five years. These services will not exceed the limits placed on the same services which are provided to the categorically needy. For any case having spenddown, the spenddown is applied to the first claim(s) filed.~~

~~(B)~~ For individuals in nursing facilities, intermediate care facilities for the mentally retarded, Home and Community Based Waivers or the ADvantage Program Waiver, additional medically necessary prescriptions are covered.

(16) Prosthetic devices. Limited to catheters and catheter accessories, colostomy and urostomy bags and accessories, tracheostomy accessories, nerve stimulators, hyperalimentation and accessories, home dialysis equipment and supplies, oxygen/oxygen concentrator equipment and supplies, respirator or ventilator equipment and supplies, and those devices inserted during the course of a surgical procedure.

(17) Eyeglasses. Eyeglasses are not covered for adults.

(18) Blood and blood fractions.

(A) Blood and blood fractions inpatient - payment is made to blood banks for blood when the cost of blood is not included in the hospital per diem cost.

(B) Blood and blood fractions outpatient - payment is made for blood and blood fractions on behalf of an eligible recipient who is suffering from a congenital or acquired disease of the blood which requires the use of blood or blood fractions. Payment may be made to physician, clinics, outpatient hospitals or blood banks.

(19) Services for individuals 65 or older in institutions for mental diseases. See Subchapter 9 of this Chapter for coverage of services for individuals 65 or older in institutions for mental diseases.

(20) Outpatient behavioral health services. Payment is made for medical and remedial care services provided on an outpatient basis by hospital providers who are also contracted to provide Outpatient Behavioral Health Services. Services include:

(A) crisis intervention services,
(B) community based structured emergency care,
(C) treatment plan development,
(D) psychological testing,
(E) individual counseling-group counseling,
(F) rehabilitative treatment services,
(G) treatment plan review,
(H) medical review,
(I) case management,
(J) family therapy, and
(K) nursing facility behavioral health rehabilitative services.

(21) Long Term Care in a Nursing Facility, Intermediate Care Facility for the Mentally Retarded, or in home Personal Care.

(22) Inpatient psychiatric facility services for individuals under 22. Payment is made for services in an institution which is accredited as a psychiatric facility or program by the Joint Commission on Accreditation of Hospitals in behalf of individuals whose plan of treatment and certification of need meets the requirements of 1905(a) of the Social Security Act as amended.

(23) Transportation and subsistence. The Oklahoma Health Care Authority (OHCA) is responsible for assuring that necessary transportation is available to all eligible Medicaid recipients who are not otherwise covered through their Managed Care Plan and who are in need of Medicaid medical services. Reimbursement for transportation costs must be prior authorized by the local Department of Human Services' (DHS) county director. Transportation costs must be for a medically necessary examination or treatment and only when transportation is not otherwise available. Payment through Medicaid may be made for transportation by private vehicle, bus, taxi, ambulance or airplane. Payment is made for a private vehicle at the Medicaid fee schedule rate and for public carrier at the public carrier rate. Individuals transporting more than one authorized recipient, from and to one destination and back, at the same time are reimbursed for only one trip. When transporting more than one authorized recipient, from and to and back to different locations, at the same time, reimbursement is made for one round trip. Beginning June 1, l999, the Oklahoma Health Care Authority (OHCA) will begin a pilot transportation broker project with the Metropolitan Tulsa Transit Authority (MTTA) known as SoonerRide. SoonerRide will exclude individuals who are enrolled in a Managed Care Organization (MCO) through OHCA, those individuals who are categorized as institutionalized, and those individuals who are categorized as Qualified Medicare Beneficiaries Plus (QMBP), Specified Low Income Medicare Beneficiaries (SLMB), Qualifying Individuals-1 and 2. Clients seeking medically necessary non-emergency transportation will be required to contact the SoonerRide reservation center. Contact will be made via a toll-free phone number which will be answered Monday through Saturday, 8 a.m. to 6 p.m. Whenever possible, the client is required to notify SoonerRide at least 72 hours prior to the appointment. The client will be asked to furnish the SoonerRide reservation center the case number, home address, the time and date of the medical appointment, the address of the medical provider, and any physical/mental limitations which will impact the type of transportation needed. SoonerRide will make arrangements for the most appropriate, least costly transportation. SoonerRide will verify appointments when appropriate. The SoonerRide contractor will be responsible for recruiting providers in each county and ensuring that all transportation providers meet all appropriate regulations for the provision of public transportation. Provider qualifications will include, but is not

limited to, verification of liability insurance and drug testing. All non-emergency transportation will be arranged by SoonerRide. If the client disagrees with the transportation arranged or denied by SoonerRide, an appeal should be filed with SoonerRide within 48 hours of the notification. The appropriateness of transportation may be appealed only to the extent that the transportation does not meet the medical needs of the client. Dissatisfaction with the use of public transportation, shared rides, type of vehicle, etc., is not appropriate grounds for appeal. The Oklahoma Health Care Authority will make the final decision on any disputes which cannot be settled between the client and SoonerRide. As provider networks are developed, SoonerRide will be expanded to include additional counties. Before a county is phased into SoonerRide, county officials and clients will be notified. A public meeting will be held prior to inclusion of each new county.

(A) **Authorization for transportation by private vehicle.**

(i) Reimbursement for transportation by a private vehicle (privately owned, leased or rented) may be made directly to the client or to another person providing the private transportation for the client. Authorization cannot be made to a DHS or OHCA employee or the spouse of a DHS or OHCA employee, unless he/she is a certified volunteer, or any employee of another county, state or federal agency who is providing the transportation as a part of the regular duties within that agency. Private transportation is authorized at the Medicaid fee schedule rate from and to the transporter's point of origin. Claim for payment is filed on a travel reimbursement form, after it has been documented that the individual kept the appointment(s) for the medical services. Transportation by a private vehicle may be authorized when the recipient:

(I) lives in a rural area where needed Medicaid medical examination or treatment is not available and the recipient must travel outside his/her local community to receive the needed medical services.

(II) receives Medicaid medical services within his/her own community, and it has been documented that the transportation cannot be made available through the individual's own efforts or through community volunteer resources.

(ii) The distances for which reimbursement is claimed may not exceed the distances set forth in the latest Transportation Commission road map. Travel claimed between points not shown on the official map shall be based on actual odometer readings. Vicinity travel is entered on travel claims as a separate item from road map mileage, for city and rural traveling within a small area, and is computed using mileage on the basis of actual odometer readings.

(iii) Travel is reimbursed on the basis of the actual number of miles traveled from the transporter's point of origin to the first official call, subsequent official calls, and return to the point of origin. Recipients or transporters returning to a destination other than the original starting point (with local DHS County Director approval) must provide a brief explanation on the travel reimbursement form.

(iv) Reimbursement for out-of-state transportation (not to exceed 100 map miles) that is medically necessary and would not require reimbursement for per diem may be authorized when the transportation is deemed in the best interest of the recipient and the OHCA.

(B) **Reimbursement for public transportation.**

(i) **Authorization for transportation by bus.** Transportation by bus is authorized when it is necessary for an eligible individual to receive treatment in a medical facility. (If the services of an escort are necessary, see (F) of this paragraph).

(ii) **Authorization for transportation by taxi.** Taxi service may be authorized only when transportation cannot be arranged through the individual's own efforts or through community resources. When taxi service is necessary to transport recipients to and from their home to the medical provider or to the nearest point of common carrier access or a common carrier to the medical provider, reimbursement is paid on the basis of actual expenses. A memo giving a detailed explanation of why the taxi service had to be used must be attached to the travel reimbursement form. Taxicab charges must be itemized on the travel reimbursement form and are reimbursed only upon justification as to the necessity of their use.

(C) **Transportation by ambulance (ground, air ambulance or helicopter).** Transportation by ambulance is compensable for individuals eligible for Medicaid benefits when other available transportation does not meet the medical needs of the individual. Payment is made for ambulance transportation to and/or from a medical facility (a physician's office or clinic is not considered a medical facility) for medical care compensable under Medicaid.

(D) **Transportation by airplane.** When an individual's medical condition is such that transportation out-of-state by a commercial airline is required, approval for airfare must be secured by telephoning the OHCA, Medical Authorization Unit, who will make the necessary flight arrangements.

(E) **Subsistence (sleeping accommodations and meals).** An individual who is eligible for transportation to or from a medical facility to obtain medical services may receive assistance with the necessary expenses of lodging and meals from Medicaid funds. If the individual does not have the funds for the necessary subsistence, authorization is made by the local

office on Room and Board Order form. The individual may choose to pay for the lodging and meals and be reimbursed by filing a travel reimbursement form. Any subsistence expense claimed on the travel reimbursement form must be documented with receipts, and reimbursement cannot exceed state per diem amounts. Payment for meals is based on a daily per diem and may be used for breakfast, lunch or dinner, or all three meals, whichever is required.

(F) **Escort assistance required.** Payment for transportation and subsistence of one escort may be authorized if the service is required. Only one escort may be authorized. It is the responsibility of the Department of Human Services' social worker to determine this necessity. The decision should be based on the following circumstances:

(i) when the individual's health does not permit traveling alone; and

(ii) when the individual seeking medical services is a minor child.

(24) Nurse midwife services. Payment is made in behalf of categorically needy ~~and medically needy~~ individuals for certified nurse midwife services provided during the maternity cycle which includes pregnancy, labor, birth and the postpartum period.

(25) Transplants. Organ and tissue transplantation services for children and adults, limited to bone marrow, stem cells, cornea, heart, kidney, liver, lung, SPK (simultaneous pancreas kidney), PAK (pancreas after kidney), and heart-lung, are covered services based upon the conditions listed in (A)-(D) of this paragraph:

(A) All transplantation services, except kidney and cornea, must be prior authorized to be compensable.

(B) To be prior authorized all procedures are reviewed based on appropriate medical criteria.

(C) To be compensable under the Medicaid program all organ transplants must be performed at a Medicare approved transplantation center.

(D) Finally, procedures considered experimental or investigational are not covered.

(26) Durable medical equipment.

(27) Services in a Federally Qualified Health Center. Payment is made on an encounter basis which includes all services provided by the center in one day. Covered services include a medical encounter, dental encounter, EPSDT screening, dental screening, vision screening, hearing screening and family planning encounter.

(28) Advanced practice nurse. Payment is made for primary health care.

(29) Certified registered nurse anesthetists. Payment is made for inpatient and outpatient anesthesia services which are in the scope of Medicaid and under the state law for Certified Registered Nurse Anesthetists.

(30) Coverage for Qualified Medicare Beneficiaries Plus (QMBP). Individuals determined eligible as QMBP's are eligible under Medicaid as ABD related categorically needy individuals.

(31) Case management services.

(A) **Case management services for the chronically and/or severely mentally ill (Adults).** Case management services to the chronically and/or severely mentally ill are provided by case management agencies established for the purpose of providing these services and are certified by the Department of Mental Health and Substance Abuse. Case management services provided are to assist clients gaining access to needed medical, social, educational and other services essential to meeting basic human needs.

(B) **Case management services for persons under age 21.** Case management services to persons under age 21 who are in imminent risk of out-of-home placement due to psychiatric or substance abuse reasons are provided by case management agencies established for the purpose of providing these services and are certified by the Department of Mental Health and Substance Abuse. Case management services provided are to assist clients gaining access to needed medical, social, educational and other services essential to meeting basic human needs.

(C) **Early Intervention Case Management Services.** Early Intervention (EI) Case Management Services are provided by Early Intervention case managers certified by the Oklahoma State Department of Education for the purpose of providing case management services to developmentally delayed infants and toddlers, ages 0 to age 3.

(D) **Case management services for high risk pregnant women.** Case management services are provided to high risk pregnant women by agencies certified by the Oklahoma State Health Department for the purposes of locating, coordinating and monitoring appropriate services for an individual.

(E) **Case management services for individuals infected with tuberculosis.** Case management services are provided to persons infected with tuberculosis by case managers certified by the Oklahoma State Department of Health. Case management services provided are services which will assist individuals eligible in gaining access to needed medical, social, educational and other services. See OAC 317:30-5-921 for these case management services.

(32) Coverage for Qualified Disabled and Working Individuals. Individuals determined eligible as Qualified Disabled and Working Individuals (QDWI) are eligible under Title XIX for Medicare Part A premiums only.

(33) Coverage for Specified Low-Income Medicare Beneficiaries. Individuals determined eligible as Specified Low-Income Medicare Beneficiaries (SLMB) are eligible under Title XIX for payment of Medicare Part B premiums only.

(34) Coverage for Qualifying Individuals.

(A) Individuals determined eligible as Qualifying Individuals-1 (QI-1) are eligible under Title XIX for payment of Medicare Part B premiums only.

(B) Individuals determined eligible as Qualifying Individuals-2 (QI-2) are eligible under Title XIX for payment of the amount attributable to the shift of some home health benefits from Medicare Part A to Medicare Part B.

## SUBCHAPTER 5. ELIGIBILITY AND COUNTABLE INCOME

## PART 1. DETERMINATION OF QUALIFYING CATEGORICAL RELATIONSHIPS

**317:35-5-1. Scope and applicability**

The provisions in this Part apply to all individuals requesting medical services who meet the definitions of categorically needy ~~and medically needy~~ within the scope of the ~~Title XIX~~ Medicaid Program. See Part 5 of this Subchapter for income and resource determinations specific to the different categories.

## PART 5. COUNTABLE INCOME AND RESOURCES

**317:35-5-46. Determination of income and resources for categorical relationship to pregnancy-related services**

Countable income for an individual categorically related to pregnancy-related services is determined the same as for an individual categorically related to AFDC. (See OAC 317:35-5-45). Eligibility is based on the income received in the first month of certification with changes in income not considered after certification. Countable resources are determined using the methodology for SSI eligibility (OAC 317:35-5-41). A change in the individual's resources must be reported, as resource eligibility continues through the certification period. ~~For individuals determined as medically needy, the rule on resources in OAC 340:10-3 is applied. A determination of ineligibility is made if resources exceed the medically needy standards.~~

## SUBCHAPTER 6. SOONERCARE HEALTH BENEFITS FOR CATEGORICALLY NEEDY PREGNANT WOMEN AND FAMILIES WITH CHILDREN

## PART 5. DETERMINATION OF ELIGIBILITY FOR SOONERCARE HEALTH BENEFITS FOR PREGNANT WOMEN AND FAMILIES WITH CHILDREN

**317:35-6-36. Financial eligibility of individuals categorically related to AFDC or pregnancy-related services**

(a) In determining financial eligibility for an individual related to AFDC or pregnancy-related services, the income of the following persons (if living together or if living apart as long as there has been no break in the family relationship) are considered. These persons include:

(1) the individual;

(2) the spouse of the individual;

(3) the biological or adoptive parent(s) of the individual who is a minor dependent child. For Health Benefits only, income of the stepparent of the minor dependent child is determined according to OAC 317:35-5-45;

(4) minor dependent children of the individual if the children are being included in the case for Health Benefits. If the individual is 19 years or older and not pregnant, at least one minor dependent child must be living in the home and included in the case for the individual to be related to AFDC;

(5) blood related siblings, of the individual who is a minor child, if they are included in the case for Health Benefits;

(6) a caretaker relative and spouse (if any) and minor dependent children when the caretaker relative is to be included for coverage.

(b) The family has the option to exclude minor dependent children or blood related siblings [OAC 317:35-6-36(a)(4) and (5)] and their income from the eligibility process. However, for the adult to be eligible, at least one minor child and his/her income [see OAC 317:35-10-56(b)] must be included in the case. The worker has the responsibility to inform the family of the most advantageous consideration in regard to coverage and income.

(c) When determining financial eligibility for an individual related to AFDC or pregnancy-related services, consideration is not given to income of any person who is aged, blind or disabled and receives SSI or is determined to be categorically needy. ~~If the person who is aged, blind or disabled is medically needy, his/her income is considered in the financial eligibility for the individual categorically related to AFDC.~~

## PART 7. CERTIFICATION, REDETERMINATION AND NOTIFICATION

**317:35-6-60. Certification for SoonerCare Health Benefits for pregnant women and families with children**

An individual determined eligible for SoonerCare Health Benefits may be certified for a medical service provided on or after the first day of the month of application. The period of certification may not be for retroactive months. The certification period in family cases is assigned for the shortest period of eligibility determined for any individual in the case. However, the individual who is categorically needy and categorically related to pregnancy-related services retains eligibility for

the period covering prenatal, delivery and postpartum periods without regard to other certification periods in the case.

(1) **Certification as a TANF (cash assistance) recipient.** A categorically needy individual who is determined eligible for TANF is certified effective the first day of the month of TANF eligibility.

(2) **Certification of non-cash assistance individuals categorically needy and categorically related to AFDC.** The certification period for the individual categorically related to AFDC is six months. The certification period can be less than six months if the individual:

(A) is certified as eligible in a money payment case during the six-month period;

(B) is certified for long-term care during the six-month period;

(C) becomes ineligible for medical assistance after the initial month; or

(D) becomes ineligible as categorically needy.

(i) If an income change after certification causes the case to exceed the categorically needy maximums, the case is closed. ~~If medical services are required, a reapplication must be made to determine eligibility as medically needy.~~

(ii) Individuals, however, who are determined pregnant and eligible as categorically needy continue to be eligible for pregnancy-related services through the prenatal delivery and postpartum period, regardless of income changes. A pregnant individual included in a TANF case which closes continues to be eligible for pregnancy related services through the postpartum period.

(3) **Certification of individuals categorically needy and categorically related to pregnancy-related services.** The certification period for the individual categorically related to pregnancy-related services will cover the prenatal, delivery and postpartum periods. The postpartum period is defined as the two months following the month the pregnancy ends. Eligibility as categorically needy is based on the income received in the first month of the certification period. No consideration is given to changes in income after certification.

(4) **Certification of newborn child deemed eligible.**

(A) ~~There are two circumstances that a~~ A newborn child is deemed eligible on the date of birth for Medicaid benefits when the child is born to a woman who is eligible for pregnancy-related services as categorically needy. (For purposes of this subparagraph, a newborn child is defined as any child under the age of one year.)

~~(i) The first circumstance is when a child is born to a woman who is eligible for pregnancy-related services as categorically needy.~~ The newborn child is deemed eligible~~, as categorically needy,~~ through the last day of the month the newborn child attains the age of one year. The newborn child's eligibility is not dependent on the mother's continued eligibility. The mother's coverage may expire at the end of the postpartum period; however, the newborn child is deemed eligible until age one. The newborn child's eligibility is based on the original eligibility determination of the mother for pregnancy-related services, and consideration is not given to any income or resource changes that occur during the deemed eligibility period.

~~(ii) The second circumstance is when a child is born to a woman who is eligible for pregnancy-related services as medically needy. In this instance, see OAC 317:35-7-60 (b)(2)(D)(i)(II).~~

(B) ~~In both instances, the~~ The newborn child is deemed eligible for Medicaid only as long as he/she continues to live in Oklahoma with the mother. No other conditions of eligibility are applicable, including social security number enumeration and child support referral. However, it is recommended that social security number enumeration be completed as soon as possible after the newborn child's birth. It is also recommended that a child support referral be completed, if needed, as soon as possible and sent to DHS Child Support Enforcement Division (CSED). The referral enables Child Support Services to be initiated.

(C) During the original eligibility determination process for pregnancy-related services, the worker informs the mother that the newborn child will be deemed eligible on the date of birth. The mother is also advised of the importance of her reporting the newborn child's birth immediately so deeming can be done timely.

(D) When a categorically needy newborn child is deemed eligible for Medicaid, he/she is added for a certification period of 13 months. The certification period expires at the end of the month that the newborn child reaches age one. The certification period is shortened only in the event the child:

(i) leaves the mother's home;

(ii) loses Oklahoma residence;

(iii) has medical needs included in another assistance case; or

(iv) expires.

(E) A newborn child cannot be deemed eligible when the mother's only coverage was presumptive eligibility, and continued eligibility was not established.

**317:35-6-63. Denials**

If the denial of Health Benefits is for an entire family case, the computer input form is updated and the appropriate notice is computer generated to the client and provider. If an individual(s) is being denied but other family members are eligible ~~(e.g., a medically needy person who requested to be included but has not had nor expects to have a medical service in a family group with a categorically needy individual),~~ the county provides the denied individual(s) with notice using the Notification of Eligibility Status for Medical Assistance form.

## SUBCHAPTER 7. MEDICAL SERVICES

## PART 1. GENERAL

**317:35-7-1. Scope and applicability**

The rules in this Subchapter apply when determining eligibility for Medical Services ~~whether the individual is categorically needy or medically needy~~ under Medicaid.

## PART 5. DETERMINATION OF ELIGIBILITY FOR MEDICAL SERVICES

**317:35-7-37. Financial eligibility of individuals categorically related to AFDC or pregnancy-related services**

(a) In determining financial eligibility for an individual related to AFDC or pregnancy-related services, the income of the following persons (if living together or if living apart as long as there has been no break in the family relationship) are considered. These persons include:

(1) the individual;

(2) the spouse of the individual;

(3) the biological or adoptive parent(s) of the individual who is a minor dependent child. Income of the stepparent of the minor dependent child is determined according to OAC 317:35-5-45;

(4) minor dependent children of the individual if the children are being included in the case for Medicaid. If the individual is 19 years or older and not pregnant, at least one minor dependent child must be living in the home and included in the case for the individual to be categorically related to AFDC;

(5) blood related siblings, of the individual who is a minor child, if they are included in the case for Medicaid;

(6) a caretaker relative and spouse (if any) and minor dependent children when the caretaker relative is to be included for coverage.

(b) The family has the option to exclude minor dependent children or blood related siblings [OAC 317:35-7-37(a)(4) and (5)] and their income from the eligibility process. However, for the adult to be eligible, at least one minor child and his/her income [see OAC 317:35-10-56(b)] must be included in the case. The worker has the responsibility to inform the family of the most advantageous consideration in regard to coverage and income. When determining financial eligibility for an individual related to AFDC or pregnancy-related services, consideration is not given to income of any person who is aged, blind or disabled and receives SSI or is determined to be categorically needy. ~~If the person who is aged, blind or disabled is medically needy, his/her income is considered in the financial eligibility for the individual categorically related to AFDC.~~

**317:35-7-39. Financial eligibility of medically needy individuals [REVOKED]**

~~Individuals whose income exceed the amount allowed for the categorically needy but the amount is insufficient to meet the cost of medical and remedial care services are considered to be medically needy. Capital resources are disregarded for individuals categorically related to pregnancy-related services and AFDC.~~

~~(1) **Medically needy standards/categorically related to ABD, pregnancy-related services and AFDC.** The medically needy income and resource standards are shown on DHS Appendix C-1, Schedule II.A. The annual income standard is according to family size, based on 133 1/3% of annual AFDC payment standards in effect as of 7-16-96. This standard is considered as maintenance for the family in determining the amount of income available to meet the medical need. The ABD resource maximum reflects the amount of resources an individual or an individual and his/her spouse can retain and be eligible for Medicaid benefits.~~

~~(A) Medically needy individuals must be evaluated using the medically needy standards. All countable income and resources of individuals categorically related to ABD are considered. Excess income is required to be applied toward the medical expense. Supplemental Security Income is not considered in computing the spenddown.~~

~~(B) The aged, blind or disabled individual determined as medically needy is also potentially eligible as a Specified Low Income Beneficiary (SLMB) if income and resources are within SLMB standards on DHS Appendix C-1, Schedule VII.~~

~~(2) **Determination of countable income for spenddown computation.** When an eligible individual(s) in a family case is determined to be medically needy, the countable income to be used in the spenddown computation is determined as follows:~~

~~(A) If the eligible individuals are all categorically related to ABD, the countable income is determined according to OAC 317:35-7-36.~~

~~(B) If the eligible individuals are all categorically related to AFDC or pregnancy related services, the countable income is determined according to OAC 317:35-7-37.~~

~~(C) If there are eligible individuals categorically related to ABD and AFDC and/or pregnancy-related services, the countable income for the spenddown computation includes the countable income of any medically needy ABD individual and the countable income of all other individuals determined according to OAC 317:35-7-37.~~

~~(3) **Verified medical expenses.** Verified medical expenses which may be used in the formula for computation of the spenddown include current medical debts not covered by Medicaid or medical insurance, premiums for medical insurance, previously incurred medical debts not~~

~~covered by previous applications nor included in a spenddown obligation, and medically necessary non-prescription items prescribed by the physician. (These can be for compensable or non-compensable services.) Verified cost of transportation for medical services may be claimed as a medical expense only if transportation is not covered by Medicaid. Transportation costs may be claimed for the actual expense if payment has been made "out-of-pocket", i.e., bus, ambulance, etc. Transportation costs at the state approved mileage reimbursement rate for state employees may be allowed for private auto expense based on proof of a scheduled appointment. Payment for loans incurred for the purpose of paying medical expenses is not considered a medical expense. If it is determined that the individual has excess income to apply in the spenddown process, application of the spenddown will be made on the first claim received on the individual. After the claim(s) is processed, the individual will receive a computer generated notice advising him/her of the provider(s) name and the amount owed.~~

**317:35-7-41. Eligibility as Qualified Disabled and Working Individual**

(a) An individual determined to be categorically related to Aid to the Blind or Disabled is eligible for Medicaid as a Qualified Disabled and Working Individual (QDWI) if the following eligibility conditions are met.

(1) Social Security disability benefits were terminated solely due to excess earnings.

(2) Countable income and resources do not exceed the standards as shown on DHS Appendix C-1, Schedule V, in which the income standards are based on 200% of the Federal Poverty Level.

(3) Medicaid eligibility cannot be established under QMB or categorically needy programs.

(4) Individual is enrolled in Medicare Part A.

(b) Individuals applying for QDWI must also meet the general eligibility requirements for social security number, residence, citizenship, and assignment of rights.

(c) Countable income and resources are determined using the same rules followed in determining eligibility for individuals categorically related to Aid to the Aged, Blind or Disabled, with the following exception: The $20 general income disregard is applied to either earned or unearned income, but not both.

(d) Coverage for a Qualified Disabled and Working Individual is restricted to payment of the Medicare Part A premiums. Medical cards are not issued.

~~(e) It is possible for a QDWI recipient to apply and be approved for a specific medical service. Since the case would be medically needy, there would be no duplication of benefits.~~

**317:35-7-45. Eligibility for catastrophic illness [REVOKED]**

~~(a) Payment is made on behalf of medically needy recipients suffering from a catastrophic illness for drugs. A catastrophic illness includes a terminal illness which can be expected, with reasonable medical judgement, to result in death within six months. This includes malignancies which are inoperable or have widespread metastases and are unresponsive to palliative therapy. Catastrophic illness also includes an end stage illness, severe incapacitating burn or injury for which the duration of anticipated active treatment is six months or more, psychotic disorders, congenital or acquired disease of the blood which require the use of blood or blood products, and immunosuppressive drugs for transplant patients. Mental illness other than psychotic disorders, cerebral vascular accident (CVA), hormone dependent tumors, isotope sensitive tumors and malignancies with metastases which have not been apparent for five years, are excluded as catastrophic illnesses. These services will not exceed the limits placed on the same services which are provided to the categorically needy.~~

~~(1) When application is made for Medicaid by a medically needy person who requests that payment be made on his/her behalf for prescribed drugs for a catastrophic illness, the worker explains that if he/she meets the eligibility conditions of need and categorical relationship and is determined by medical evidence to be suffering from a catastrophic illness, payment may be made for up to three prescriptions per month. Applications are handled in the same manner as any other medically needy application. At the end of the twelve month certification period, a new application is required.~~

~~(2) When the medically needy individual requesting payment for drugs for catastrophic illness already has an active Medicaid case, the worker prepares a memorandum, including the physician's name and address, diagnosis, medication and length of time the patient has been taking the medication, if available. The memorandum is submitted to the Oklahoma Health Care Authority. A physician in the OHCA reviews the information to determine if the facts substantiate the designation of catastrophic illness and the drug is FDA approved.~~

~~(3) OHCA notifies the county office of approval or disapproval for catastrophic illness. A medical redetermination is not required after certification or on a subsequent application unless improvement is such that the OHCA must be notified.~~

~~(4) When the medically needy individual requesting payment for drugs for catastrophic illness does not have a currently active Medicaid case, the local worker accepts the application and processes it in the regular manner. While the other conditions of eligibility are being determined the local worker prepares a memorandum as described in (2) of this subsection and sends it to the OHCA. When eligibility has been determined, certification of eligibility or ineligibility is made by use of the computer input form in the regular manner.~~

~~(b) Payment is made for blood and blood fractions on behalf of an eligible recipient who is suffering from a congenital or acquired disease of the blood which requires the use of blood or blood fractions. The physician must enter the diagnosis and plan of treatment on the MS-MA-5. A physician in the OHCA reviews the information, contacts the patient's attending physician, if necessary, and makes a determination as to whether the diagnosis and plan of treatment come within the scope of the catastrophic illness definition. The OHCA notifies the provider and the county office of approval or disapproval of blood or blood fractions based on catastrophic illness on Form MS-MA-4, Prior Authorization Notice. A medical redetermination is not required after certification or on a subsequent application unless improvement is such that the OHCA must be notified.~~

## PART 7. CERTIFICATION, REDETERMINATION AND NOTIFICATION

### 317:35-7-60. Certification for Medical Services

(a) The rules in this Section apply to all categories of eligibles **EXCEPT**:

(1) categorically needy SoonerCare Health Benefit recipients who are categorically related to AFDC or Pregnancy Related Services, AND

(2) who if eligible, would be enrolled in SoonerCare (managed care).

(b) An individual determined eligible for Medical Services may be certified for a medical service provided on or after the first day of the third month prior to the month of application. The certification period is determined beginning with the month the medical service was received or expected to be received or the month of application for categorically needy cases in which a medical service has not been received. The period of certification may cover retroactive or future months. Assignment of the certification period is dependent on the categorical relationship ~~and whether the individual is categorically or medically needy~~. Form MA-2, Medical Assistance Computation Work Sheet, is used to determine the certification period. Children in DHS custody who are placed outside the home are assigned a certification period according to categorical relationship, 6 months for AFDC and 12 months for ABD. The certification period in family cases is assigned for the shortest period of eligibility determined for any individual in the case.

(1) **Certification as categorically needy.** A categorically needy individual who is determined eligible for a State Supplemental Payment is certified effective the month of application. If the individual is eligible for payment for medical services received during the three months preceding the month of application, the application for Medicaid is processed in as a Medical Assistance Only case. A categorically needy individual who is categorically related to ABD but is not being certified for SSP is assigned a certification period of six months. The first month of certification is the month that a medical service was provided or, if no medical service was provided, the month of application. A child in DHS custody or Indian Tribal custody (under Foster Care agreement with DHS) who is determined eligible, is certified effective the month custody was granted. There is not a spenddown on a case certified as categorically needy.

(A) **Certification of individuals categorically needy and categorically related to ABD.** The certification period for the individual categorically related to ABD can be assigned for up to six months. The individual must be determined as categorically needy for each month of the certification period. ~~The individual cannot be certified as categorically needy if he/she is medically needy during one month of the first three months of the certification period.~~ The certification period is six months unless the individual:

(i) is certified as eligible in a money payment case during the six-month period;

(ii) is certified for long-term care during the six-month period;

(iii) becomes ineligible for medical assistance after the initial month;

(iv) becomes ineligible as categorically needy; or

(v) is deceased.

(B) **Certification period.** If the certification period was determined as six months and any of the situations listed in subparagraph (A) of this paragraph occur after the initial month, the case is closed by the worker.

(i) If income and/or resources change after certification causing the case to exceed the categorically needy maximums, the case is closed. ~~If medical services are required, a reapplication must be made to determine eligibility as medically needy.~~

(ii) A pregnant individual included in an ABD case which closes continues to be eligible for pregnancy related services through the postpartum period.

~~(2) **Certification as medically needy.** The certification period for medically needy individuals is determined beginning with the month that the medical service was received or is expected to be received with the certification period assigned in accordance with subparagraph (A) of this paragraph. In a family case where some individuals are medically needy and others are categorically needy, the medically needy individuals are certified only if a medical service has been received or is expected to be received by at least one of the medically needy individuals.~~

~~(A) **Certification period.**~~

~~(i) The certification period for medically needy individuals is three months unless the individual is:~~

~~(I) certified as eligible in a money payment case during the three-month period;~~

~~(II) certified for long-term care during the three-month period;~~

~~(III) ineligible for medical assistance after the initial month;~~

~~(IV) certified as eligible for the Catastrophic Illness Program, which is a 12 month certification; or~~

~~(V) deceased.~~

~~(ii) If the certification period was determined as three months and any of the situations in (i) of this subparagraph occurs after the initial month, the case is closed by the worker.~~

~~(B) **Spenddown computation period.** For medically needy cases, spenddown for the certification period is computed based on a spenddown computation period. The spenddown computation period is three months except as given in unit (i) of this subparagraph. All income, maintenance standards and medical expenses are totaled for all family members for the spenddown computation period to determine the spenddown for the entire certification period.~~

~~(i) The spenddown computation period may be less than three months only if:~~

~~(I) the individual is certified for long-term care;~~

~~(II) the individual is certified for a money payment after the initial month;~~

~~(III) monthly income, medical expenses and maintenance standard have already been considered in a spenddown computation for another certification period;~~

~~(IV) the individual is certified for coverage of a catastrophic illness, which has a monthly spenddown computation period; or~~

~~(V) the individual is deceased.~~

~~(ii) The first month of the spenddown computation period will be the first month of the certification period. If that month was included in a previous computation, the spenddown computation of income, maintenance standards and medical expenses will include only the amounts not previously considered.~~

~~(iii) The spenddown computation period may include months which are not included in the certification period if ineligibility is determined for any month in the certification period.~~

~~(iv) A case which is determined medically needy for any month during the computation period is considered medically needy for the entire certification period.~~

~~(C) **Certification of individuals medically needy and categorically related to pregnancy-related services.** Federal legislation requires that Medicaid eligibility be extended two months for postpartum care to the woman determined eligible as medically needy.~~

~~(i) Criteria for this extended coverage is as follows:~~

~~(I) To be eligible for the extended coverage, application for Medicaid must have been filed prior to the end of the pregnancy and the case was Medicaid eligible for the month that pregnancy ended.~~

~~(II) The extended eligibility is for two months after the month that pregnancy ends by delivery, miscarriage or federally funded induced abortion.~~

~~(ii) The individual who meets the criteria in (i) of this subparagraph is deemed eligible without regard to income and a spenddown is not computed for the extended eligibility period.~~

~~(iii) During this special extended eligibility period, the individual is eligible for the full scope of Medicaid services. The special extended medical provision does not apply if the individual is determined eligible for Medicaid benefits for reasons other than postpartum care since postpartum services would be covered under the Medicaid eligibility.~~

~~(iv) When eligibility for extended medical services for postpartum care is determined, the case is recertified (a new application is not required) using the same application date. The certification date for the extended eligibility period, not to exceed two months, is determined based on the expiration of the Medicaid certification.~~

~~(v) The procedure for recertification of the mother is handled through the Medical Authorization File and will issue computer generated notices to the client and provider, if known.~~

~~(D) **Certification of newborn child deemed eligible.**~~

~~(i) There are two circumstances that a newborn child is deemed eligible on the date of birth for Medicaid benefits. For purposes of this subparagraph, a newborn child is defined as any child under the age of one year.~~

~~(I) The first circumstance is when a child is born to a woman who is eligible for pregnancy related services as categorically needy. In this instance, see OAC 317:35-6-60(4)(A)(i).~~

~~(II) The second circumstance is when a child is born to a woman who is eligible for pregnancy related services as medically needy. The newborn child is deemed eligible, as medically needy, through the last day of the month that the child attains the age of one year, as long as the mother remains eligible for Medicaid. The newborn child is added to the mother's case prior to the expiration of the postpartum period.~~

~~(ii) In both instances, the newborn child is deemed eligible for Medicaid benefits only as long as he/she continues to live in Oklahoma with the mother. No other conditions of eligibility are applicable, including social security number enumeration and child support referral. However, it is recommended that social security number enumeration be completed as soon as possible after the newborn child's birth. It is also recommended that a child support referral be completed,~~

~~if needed, as soon as possible and sent to DHS Child Support Enforcement Division (CSED). The referral enables Child Support Services to be initiated.~~

~~(iii) During the original eligibility determination process for pregnancy related services, the worker informs the mother that the newborn child will be deemed eligible on the date of birth. The mother is also advised of the importance of her reporting the newborn child's birth immediately so deeming can be done timely.~~

~~(iv) In medically needy cases, the certification period may be shortened if the mother loses her Medicaid eligibility, as well as in the event the newborn child:~~

~~(I) leaves the mother's home;~~

~~(II) loses Oklahoma residence;~~

~~(III) has medical needs included in another assistance case; or~~

~~(IV) expires.~~

~~(v) A newborn child cannot be deemed eligible when the mother's only Medicaid coverage was presumptive eligibility, and continued Medicaid eligibility was not established.~~

(~~3~~2) **Certification of individuals categorically related to ABD and eligible as Qualified Medicare Beneficiaries Plus.** In the event of a SSP case, the effective date of the QMBP benefit is the month of certification. If the individual is not eligible for SSP, the Medicaid benefit, except for the Medicare Part B premium buy-in, may be certified on the first day of the third month prior to the month of application or later. The effective date of certification for the Medicare Part B premium buy-in is the first day of the month following the month in which the eligibility determination is made (regardless of when application was made).

(A) An individual determined eligible for QMBP benefits is assigned a certification period of 12 months. At any time during the certification period that the individual becomes ineligible, the case is closed using regular negative action procedures.

(B) At the end of the certification period a redetermination of QMBP eligibility is required, using the same forms and procedures as for ABD categorically needy individuals. However, a redetermination of QMBP eligibility must also be done at the same time the dually eligible individual has a redetermination of eligibility for other Medicaid benefits, i.e., as categorically needy and receiving SSP or as a long-term care recipient.

(4~~2~~3) **Certification of individual categorically related to ABD and eligible as Qualified Disabled and Working Individual.** The Social Security Administration is responsible for referrals of individuals potentially eligible for QDWI. Eligibility factors verified by the SSA are Medicare Part A eligibility and discontinuation of disability benefits due to excessive earnings. When the DHS State Office receives referrals from SSA the county will be notified and is responsible for obtaining an application and establishing other factors of eligibility. If an individual contacts the county office stating he/she has been advised by SSA that they are a potential QDWI, the county takes a Medicaid application. If the individual does not have verification of eligibility factors determined by SSA, the county contacts DHS, FSSD, State Office, for assistance in verifying those factors. The verification will be obtained by DHS State Office and sent to the county office. The effective date of certification for QDWI benefits is based on the date of application and the date all eligibility criteria, including enrollment for Medicare Part A, are met. For example, if an individual applies for benefits in October and is already enrolled in Medicare Part A, eligibility can be effective October 1 (or up to three months prior to October 1, if all eligibility criteria are met during the three month period). However, if in the example, the individual's enrollment for Part A is not effective until November 1, eligibility cannot be effective until that date. Eligibility can never be effective prior to July 1, 1990, the effective date of this provision. These cases will be certified for a period of 12 months. At the end of the 12-month period, eligibility redetermination is required. If the individual becomes ineligible at any time during the certification period, the case is closed. The reason for closure is 69, and the worker completes the Notice to Client form.

(~~5~~4) **Certification of Individual Categorically Related to ABD and Eligible as Specified Low-Income Medicare Beneficiary (SLMB).** The effective date of certification of SLMB benefits may begin on the first day of the third month prior to the month of application or later. A certification can never be earlier than the date of entitlement of Medicare Part A. An individual determined eligible for SLMB benefits is assigned a certification period of 12 months. At any time during the certification period the individual becomes ineligible, the case is closed using standard negative action procedures. At the end of the certification period a redetermination of SLMB eligibility is required. A redetermination of SLMB eligibility must also be done at the same time a dually eligible individual has a redetermination of eligibility for other Medicaid benefits such as long-term care.

(~~6~~5) **Certification of individuals categorically related to disability and eligible for TB related services.**

(A) An individual determined eligible for TB related services may be certified the first day of the third month prior to the month of application or later, as long as verification is received of a diagnosis of TB infection.

(B) A certification period of 12 months will be assigned. At any time during the certification period that the individual becomes ineligible, the case is closed using the regular negative action procedures.

(C) At the end of the certification period a new application will be required if additional treatment is needed.

(~~7~~6) **Certification of Individual Categorically Related to ABD and Eligible as Qualifying Individuals.**

(A) **Qualifying Individuals-1.** The effective date of certification for the QI-1 may begin on the first day of the third month prior to the month of application or later. A certification can never be earlier than the date of entitlement of Medicare Part A. An individual determined eligible for QI benefits is assigned a certification period of 12 months. At any time during the certification period the individual becomes ineligible, the case is closed using standard negative action procedures. At the end of the certification period, a redetermination of QI eligibility is required.

(i) Since the State's allotment to pay Medicare premiums for this group of individuals is limited, the State must limit the number of QIs so that the amount of assistance provided during the year does not exceed the State's allotment for that year.

(ii) Persons selected to receive assistance in a calendar year are entitled to receive assistance with their Medicare premiums for the remainder of the year, but not beyond, as long as they continue to qualify. The fact that an individual is selected to receive assistance at any time during the year does not entitle the individual to continued assistance for any succeeding year.

(B) **Qualifying Individuals-2.** The effective date of certification for the QI-2 individual is the first day of the month in which eligibility is established. The certification is a one time payment consisting of the total number of months in the calendar year in which the individual was not covered by Medicaid. The payment is the amount attributable to the shift of some home health benefits from Medicare Part A to Medicare Part B.

(i) Since the State's allotment for Qualifying Individuals is capped, the State must limit the number of QIs so that the amount of assistance provided during the year does not exceed the State's allotment for that year.

(ii) The fact that an individual is selected to receive assistance at any time during the year does not entitle the individual to continued assistance for any succeeding year.

**317:35-7-64. Denials**

If denial of ~~short term~~ medical care is for an entire family case, the computer input form is updated and the appropriate notice is computer generated to the client and provider. If an individual(s) is being denied but other family members are eligible ~~(e.g., a medically needy person who has not had nor expects to have medical service in a family group with a categorically needy individual)~~, the county provides the denied individual(s) with notice using the Notification of Eligibility Status for Medical Assistance form.

## SUBCHAPTER 9. ICF/MR, HCBW/MR, AND INDIVIDUALS AGE 65 OR OLDER IN MENTAL HEALTH HOSPITALS

### PART 1. SERVICES

**317:35-9-1. Overview of long-term medical care services; relationship to QMB, SLMB, and other Medicaid services eligibility, and spenddown calculation**

(a) **Long Term Medical Care Services.** Long-term medical care for the categorically needy includes care in a nursing facility (refer to OAC 317:35-19), public and private intermediate care facility for the mentally retarded (refer to this subchapter), persons age 65 years or older in mental health hospitals (refer to this subchapter), Home and Community Based Waiver Services for the Mentally Retarded (refer to this subchapter), and Home and Community Based Waiver Services for frail elderly and a targeted group of adults with physical disabilities age 21 and over who have not been determined to have a developmental disability, mental retardation or a related condition (refer to OAC 317:35-17). Personal Care provides services in the own home for ~~both~~ categorically needy ~~and medically needy~~ individuals (refer to OAC 317:35-15). Any time an individual is certified as eligible for Medicaid coverage of long-term care, the individual is also eligible for other Medicaid services. Another application or additional spenddown computation is not required. Spenddown is applied to the first long-term care claim filed. Any time an aged, blind or disabled individual is determined eligible for long-term care, a separate determination must be made to see if eligibility conditions as a Qualified Medicare Beneficiary (QMB) or Specified Low-Income Medicare Beneficiary (SLMB) are met. Another application for QMB or SLMB benefits is not required. Any spenddown computed for long-term care is not applicable to QMB or SLMB coverage.

(b) **Medicaid recovery.** The State of Oklahoma operates a Medicaid Recovery program to recover for services identified in OAC 317:35-9-15. Recovery can be accomplished in two ways: liens against real property or claims made against estates.

## SUBCHAPTER 10. MEDICAL AID TO FAMILIES WITH DEPENDENT CHILDREN

### PART 5. INCOME

**317:35-10-26. General provisions regarding income**

(a) The income of categorically needy individuals who are categorically related to AFDC does not require verification, unless questionable. If the income is questionable ~~or it appears the income makes an individual medically needy,~~ the worker must verify the income in the usual manner. On all individuals, the worker views all data exchange screens, i.e. IEV, OWL, BENDEX, etc. If the data exchange screen reveals conflicting information, the worker must resolve the conflicting information and if necessary, requests verification.

~~(b) The income of medically needy individuals who are categorically related to AFDC must be verified.~~

(~~c~~b) All available income, except that required to be disregarded by law or OHCA's policy, is taken into consideration in determining need. Income is considered available both when actually available and when the applicant or recipient has a legal interest in a liquidated sum and has the legal ability to make such sum available for support and maintenance. When an individual's income is reduced due to recoupment of an overpayment or garnishment, the gross amount before the recoupment or garnishment is counted as income. The client is responsible for reporting all income, the source, amount and regularity of receipt.

(1) Income received on behalf of a member of the assistance unit by another individual such as but not limited to a guardian or conservator, is considered available to the assistance unit.

(2) Money received and used for the care and maintenance of a third party who is not included in the assistance unit is not counted as income if it can be identified and verified as intended for third party use.

(3) If it appears any member of the assistance unit or an individual whose income is considered when determining eligibility is eligible for any type of income or benefits, the assistance unit must be notified in writing by the DHS. The notice must contain the information that failure to apply for and take all appropriate steps to obtain such benefits within 30 days from the date of the notice will result in a determination of ineligibility. Supplemental Security Income (SSI) does not fall under these types of benefits.

(4) If the recipient and spouse are living together or they are living apart but there has not been a clear break in the family relationship, income received by either spouse and income received jointly is considered as family income. Income of individuals included in TANF cases cannot be diverted to members in A, B or D cases. Income of a natural or adoptive parent cannot be diverted to meet the needs of a stepparent. Consideration is not given to a SSI recipient's income in computing eligibility for the AFDC related unit.

(5) Income which can reasonably be anticipated to be received is considered to be available for the month its receipt is anticipated.

**317:35-10-29. Irregular income**

Income that is based on the number of hours worked, as opposed to income based on regular monthly wages, must be computed as irregular income. The income received irregularly or in varying amounts will be averaged to establish the amount to be anticipated and considered for prospective budgeting. The past two month's income is averaged to indicate what income can be anticipated. ~~For medically needy individuals, income is verified by the best available information which would consist of pay stubs presented by the assistance unit or, in the absence of pay stubs, contact with the employer.~~ Pay stubs may only be used for verification if they have the client's name and/or social security number indicating that the pay stubs are in fact the client's wages. The pay stubs should also include the date(s) of the pay period and the amount of income before deductions. If this information is not included, employer verification is required. With new employment it is necessary to verify the beginning date.

**317:35-10-31. Earned income**

The term "earned income" refers to monies earned by an individual through the receipt of wages, salary, commission or profit from activities in which the individual is engaged as self-employed or as an employee. Payments made for accumulated annual leave/vacation leave, sick leave or as severance pay are considered as earned income whether paid during employment or at termination of employment. Temporary disability insurance payment(s) and temporary worker's compensation payments are considered as earned income if payments are employer funded and the individual remains employed. Income received as a one-time nonrecurring payment is considered as a lump sum payment. Earned income includes in-kind benefits received by an employee from an employer in lieu of wages or in conjunction with wages. An exchange of labor or services, e.g., barter, is considered as an in-kind benefit. Such benefits received in-kind are considered as earned income only when the employee/employer relationship has been established. ~~For categorically needy or medically needy individuals, the~~ The cash value of the in-kind benefits must be verified by the employer. Income from self-employment also includes in-kind benefits for a work activity or service for which the self-employed person ordinarily receives payment in the business enterprise. Medical insurance secured through the employer, whether purchased or as a benefit, is not considered in-kind income.

(1) Gross earned income is used to determine eligibility. Gross earned income is defined as the "true wage" prior to payroll deductions and/or withholdings.

(2) Countable earned income excludes income from:

(A) capital investments with respect to which the individual is not actively engaged. Dividends and interest or rental properties in the hands of a rental agent with the check forwarded to the recipient would be excluded from "earned income";

(B) benefits not in the nature of wages, salary or profit accruing as compensation or reward for services, or as compensation for lack of employment.

(3) Income that must be verified is verified by the best available information such as pay stubs presented by the client or an interview with the employer. Pay stubs may only be used for verification if they have the client's name and/or social security number indicating that the pay stubs are in fact the client's wages. The stubs should also include the date(s) of the pay period and the amount of income before deductions. If this information is not included, employer verification is required. The worker verifies medical insurance which may be available at the same time that income is verified.

(4) When a member of the family unit accepts employment and has not received any wages, verification (if necessary) of the amount of income to be considered and the anticipated date of receipt must be obtained from the employer. Income which is expected to be received during

a month is considered available to the family unit and is counted in determining eligibility for the month of receipt.

## SUBCHAPTER 15. PERSONAL CARE SERVICES

### 317:35-15-1. Overview of long-term medical care services; relationship to QMB, SLMB and other Medicaid service eligibility and spenddown calculation

Long-term medical care for the categorically needy includes care in a nursing facility (refer to OAC 317:35-19), public and private intermediate care facility for the mentally retarded (refer to OAC 317:35-9), persons age 65 years or older in mental health hospitals (refer to OAC 317:35-9), Home and Community Based Waiver Services for the Mentally Retarded (refer to OAC 317:35-9), Home and Community Based Waiver Services for the ADvantage program (refer to OAC 317:35-17), and Personal Care services (refer to this subchapter). Personal Care provides services in the own home ~~for both categorically needy and medically needy~~. Any time an individual is certified as eligible for Medicaid coverage of long-term care, the individual is also eligible for other Medicaid services. Another application or spenddown computation is not required. Spenddown is applied to the first long-term care claim filed. Any time an aged, blind or disabled individual is determined eligible for long-term care, a separate determination must be made to see if eligibility conditions as a Qualified Medicare Beneficiary (QMB) or Specified Low-Income Medicare Beneficiary (SLMB) are met. Another application for QMB or SLMB benefits is not required. Any spenddown computed for long-term care is not applicable to QMB coverage.

### 317:35-15-6. Determining financial eligibility of categorically needy individuals

Financial eligibility for Personal Care for categorically needy individuals is determined as follows:

(1) **Financial eligibility/categorically related to AFDC.** In determining income for the individual related to AFDC, all family income is considered. (See OAC 317:35-5-45 for Exceptions to AFDC rules.) The "family", for purposes of determining need, includes the following persons if living together (or if living apart but there has been no break in the family relationship):

(A) spouse; and

(B) parent(s) and minor children of their own.

(i) For adults, to be categorically needy, the net income must be less than the categorically needy standard as shown on the DHS Appendix C-1, Schedule X.

(ii) For individuals under 19, to be categorically needy, the net income must be equal to or less than the categorically needy standard as shown on the DHS Appendix C-1, Schedule I. A.

(2) **Financial eligibility/categorically related to ABD.** In determining income and resources for the individual related to ABD, the "family" includes the individual and spouse, if any. To be categorically needy, the countable income must be less than the categorically needy standard as shown on the DHS Appendix C-1, Schedule VIII. A. If an individual and spouse cease to live together for reasons other than institutionalization or receipt of the ADvantage waiver or HCBW/MR services, income and resources are considered available to each other through the month in which they are separated. Mutual consideration ceases with the month after the month in which the separation occurs. Any amounts which are actually contributed to the spouse after the mutual consideration has ended are considered.

(3) **Determining financial eligibility for Personal Care.** For individuals determined categorically needy for Personal Care, excess income is not applied to a vendor payment. ~~If the individual is determined ineligible as categorically needy based on income and resources, the eligibility is determined under the medically needy standards on the DHS Appendix C-1, Schedule II. A., Medically Needy Maintenance Standard.~~

*[OAR Docket #03-3006; filed 7-17-03]*

---

## TITLE 317. OKLAHOMA HEALTH CARE AUTHORITY
## CHAPTER 35. MEDICAL ASSISTANCE FOR ADULTS AND CHILDREN-ELIGIBILITY

*[OAR Docket #03-3007]*

**RULEMAKING ACTION:**
EMERGENCY adoption
**RULES:**
Subchapter 5. Eligibility and Countable Income
Part 3. Non-Medical Eligibility Requirements
317:35-5-25. [AMENDED]
**(Reference APA WF # 03-08)**
**AUTHORITY:**
The Oklahoma Health Care Authority Board; The Oklahoma Health Care Authority Act, Section 5003 through 5016 of Title 63 of Oklahoma Statutes;
**DATES:**
**Adoption:**
April 10, 2003
**Approved by Governor:**
May 26, 2003
**Effective:**
Immediately upon Governor's approval
**Expiration:**
Effective through July 14, 2004, unless superseded by another rule or disapproved by the Legislature.
**SUPERSEDED EMERGENCY ACTIONS:**
N/A
**INCORPORATIONS BY REFERENCE:**
N/A
**FINDING OF EMERGENCY:**
The Agency finds that a compelling public interest exists which necessitates promulgation of emergency rules and requests emergency approval of revisions to clarify agency rules regarding Medicaid citizenship and alienage requirements and to better reflect compliance with federal regulations. Revisions are needed to provide current information to the employees of the Department of Human Service (DHS) responsible for making Medicaid eligibility determinations to assure the accuracy of those decisions.

**ANALYSIS:**

Medical Assistance for Adults and Children-Eligibility rules are revised to comply with federal regulations related to citizenship and alienage. In order for DHS workers to make valid Medicaid eligibility determinations, agency rules must provide accurate information. These revisions are needed to comply with federal regulation and remove obsolete language from the rules.

**CONTACT PERSON:**

Joanne Terlizzi at (405)522-7272

**PURSUANT TO THE ACTIONS DESCRIBED HEREIN, THE FOLLOWING EMERGENCY RULES ARE CONSIDERED PROMULGATED AND EFFECTIVE UPON APPROVAL BY THE GOVERNOR AS SET FORTH IN 75 O.S., SECTION 253(D):**

## SUBCHAPTER 5. ELIGIBILITY AND COUNTABLE INCOME

## PART 3. NON-MEDICAL ELIGIBILITY REQUIREMENTS

**317:35-5-25. Citizenship requirements**

(a) **Establishment of citizenship and alienage.** ~~Title XIX medical~~ Medicaid services are provided to the defined groups provided in this subsection if they meet all other factors of eligibility.

(1) **U. S. Citizens~~,~~ and aliens admitted for permanent residence ~~or permanently residing under color of law~~.** The groups listed in the following subparagraphs are eligible for the full range of Medicaid services.

(A) U.S. Citizens~~, qualified~~;

(B) aliens admitted for permanent residence ~~prior to August 22, 1996~~ who have resided in the United States for a period greater than five years from the date of entry; and ~~or permanently residing under color of law prior to August 22, 1996 are eligible for Title XIX. Also included in this group are~~

(C) certain parolees, refugees, Western Hemisphere aliens, immigrants, conditioned entries, Kickapoo Indians and American Indians born in Canada. ~~Persons meeting the definitions are entitled to the full range of Title XIX medical services.~~

(2) **~~Qualified~~ Eligible aliens (qualified aliens).** A qualified alien is:

(A) an alien who was admitted to the United States ~~prior to August 22, 1996~~ and has resided in the United States for a period greater than five years from the date of entry and who:

(i) was lawfully admitted for permanent residence under the Immigration and Nationality Act;

(ii) was paroled into the United States under Section 212(d)(5) of such Act for a period of at least one year;

(iii) was granted conditional entry pursuant to Section 203(a)(7) of such Act as in effect prior to April 1, 1980;

(iv) was granted asylum under Section 208 of such Act regardless of the date asylum is granted;

(v) was a refugee admitted to the United States under Section 207 of such Act regardless of the date admitted; or

(vi) was an alien with deportation withheld under Section 243(h) of such Act regardless of the date deportation was withheld;

(B) a Cuban or Haitian entrant who ~~was~~ has resided in the United States ~~prior to August 22, 1996~~ for a period greater than five years from the date of entry;

(C) an alien who is a veteran as defined in 38 U.S.C. § 101, with a discharge characterized as an honorable discharge and not on the grounds of alienage;

(D) an alien who is on active duty, other than active duty for training, in the Armed Forces of the United States;

(E) the spouse or unmarried dependent child of an individual described in (C) or (D) of this subsection; ~~or~~

(F) an alien who is lawfully admitted for permanent residence under the Immigration and Nationality Act, and has worked 40 qualifying quarters of coverage as defined under Title II of the Social Security Act or can be credited with 40 qualifying quarters as provided under Section 435, and in the case of any qualifying quarter creditable for any period beginning after December 31, 1996, the alien did not receive any Federal means-tested public benefit, as provided under Section 403, during any such period; or

(G) a battered spouse, battered child, or parent or child of a battered person with a petition under 204(a)(1)(A) or (B) or 244(a)(3) of the Immigration and Naturalization Act.

(3) **~~Non-qualified~~ Other aliens lawfully admitted for permanent residence (non-qualified aliens).** Non-qualified aliens are those individuals who were admitted to the United States ~~on or after August 22, 1996~~ and who do not meet any of the definitions in (1)-(2) of this subsection. Non-qualified aliens are ineligible for Medicaid for five years from the date of entry except that non-qualified aliens are eligible for emergency services only when the individual has a medical condition (including emergency labor and delivery) with acute symptoms which may result in placing his/her health in serious jeopardy, serious impairment to bodily functions or serious dysfunction of body organ or part without immediate medical attention.

(4) **Illegal aliens.** Illegal aliens who do not meet any of the definitions in (1)-(2) of this subsection are eligible for emergency services only when the individual has a medical condition (including emergency labor and delivery) with acute symptoms which may result in placing his/her health in serious jeopardy, serious impairment to bodily functions or serious dysfunction of body organ or part without immediate medical attention.

(5) **Ineligible aliens.** Ineligible aliens who do not fall into the categories in (1)-(4) of this subsection, yet have been lawfully admitted for temporary or specified

periods of time include, but are not limited to: foreign students, visitors, foreign government representatives, crewmen, members of foreign media and temporary workers including agricultural contract workers. This group is ~~eligible~~ ineligible for ~~emergency medical services only as described in (4) of this subsection for illegal aliens~~ Medicaid, including emergency services, because of the temporary nature of their admission status. ~~These individuals are generally issued Form I-94, Arrival Departure Record, on which an expiration date is entered. (This form is not the same Form I-94 that is issued to persons who have been paroled into the United States. Parolees carry a Form I-94 that is titled "Arrival-Departure Record - Parole Edition" (see (c)(3) of this Section. Two other forms that do not give the individual "Immigrant" (see (c)(1) of this Section) status are Form I-186, Nonresident Alien Mexican Border Crossing Card, and Form SW-434, Mexican Border Visitors Permit.)~~

(6) **Declaration.** A declaration of citizenship/alien status is required for all adults and children ~~in the case~~ approved for Medicaid. This requirement is met when all adults in the case or person acting in behalf of individual(s) in the case have signed the application form attesting to the status indicated for all case members on ~~page one of~~ the application form. ~~Signatures on Form PS-4, Declaration of Citizenship Status, are required only if there are adults in the case who did not sign the application form or when there is a change of payee.~~ Persons determined as having lawful alien status must have the status verified through Systematic Alien Verification for Entitlements (SAVE). ~~When Form PS-4, Declaration of Citizenship Status, has been used to meet the declaration requirement for any individual in the case, it also becomes a part of the application and becomes a part of the case record for subsequent applications.~~

(7) **Preauthorization.** Preauthorization is required for payment of emergency medical services rendered to ~~legalized~~ non-qualified and illegal aliens ~~who are not eligible for full Title XIX coverage, illegal aliens or ineligible aliens~~. ~~The case is certified or denied after the preauthorization decision is received from OHCA. The certification period for these cases based on preauthorized medical services is for the month(s) of service only. Due to the variable Title XIX coverage for the groups defined in this subsection, identifying the group with complete documentation and/or verification of appropriate proof of status and identification of the group is recorded in the case record.~~

(b) **Citizenship.** An individual may be a citizen of the United States by being born in the United States or by being born in some other country but moving to the United States and being granted United States citizenship through the ~~Immigration and Naturalization Service (INS)~~ Bureau of Citizenship and Immigration Services (BCIS). The area defined by ~~Title XIX~~ Medicaid regulations pertaining to United States citizenship include the 50 states, the District of Columbia, Puerto Rico, Guam, Virgin Islands and the Northern Marianas. Nationals from American Samoa or Swain's Island are also regarded as U.S. citizens for ~~Title XIX~~ Medicaid purposes. ~~Persons from the Marshall Islands are classified as "permanent non-immigrants" and eligible the same as citizens or nationals.~~

(1) When the situation indicates a need to verify citizenship, birth in the United States may be verified by a birth certificate, religious or similar proof of birth, or a United States passport.

(2) If the individual's birth occurred in some other country and he/she entered the United States as an alien but has become a United States citizen, this must be verified by a certificate of citizenship or certificate of naturalization provided by ~~INS~~ BCIS.

(3) If the Social Security Administration has already determined the individual meets the citizenship and alienage requirement for SSI or Medicare eligibility, DHS accepts this determination. In such an instance, the individual's notification of eligibility for SSI, SSI check, or Medicare card must be seen and an entry made in the ~~case record~~ FACS Case Notes as to which of these documents was seen as verification.

(4) In all other instances in which the adult (or a parent of a minor) was an alien who has become a naturalized citizen of the United States, the citizenship papers of the individual must be seen and the exact name shown and any pertinent numbers, dates, etc., must be recorded in the ~~case record~~ FACS Case Notes.

(c) **Alienage.** ~~Documents that constitute verification of the individual's meeting the alienage requirement are described in paragraphs (1)-(7) of this subsection.~~ A decision regarding eligibility cannot be made until the eligibility condition of citizenship and alienage is determined.

(1) **Immigrants.** Aliens lawfully admitted for permanent residence in the United States are classified as immigrants by the ~~INS~~ BCIS. These are individuals who entered this country with the express intention of residing here permanently.

~~(A) Acceptable proof of immigration status is Form I-151 or Form I-551, Alien Registration Receipt Cards. Earlier versions of this form, AR-3A, Alien Registration Receipt Card, and AR-3, which carries the same name, are proof of permanent residency if specifically endorsed as such. Also, a Reentry Permit is acceptable proof inasmuch as permanent residency is a requirement of its issuance. Possession of any of these cards verifies that the individual meets the citizenship and alienage requirement.~~

~~(B) An individual who comes to the United States after marriage to, or to marry, a member of the armed forces of the United States would have been admitted with the right of permanent residence and should have the necessary papers to show this status. Subsequent divorce would not affect this right, even though he/she has not become a citizen in his/her own right, and would meet the citizenship and alienage requirement.~~

~~(2) **Permanent Residence Under Color of Law.** A Permanent Resident Under Color of Law (PRUCOL) is an alien who entered the United States before January 1, 1972, has maintained continuous residence since then, and~~

~~intends to continue living here. PRUCOL is defined by INS to include aliens who are living in the United States with the knowledge and permission of INS. Certain deportable aliens are considered PRUCOL if deportation is deferred, unlikely, or the individual has been granted voluntary departure for an indefinite time period based on INS determination. INS forms or documents which support or may indicate PRUCOL status include, but are not limited to: Forms I-84, I-220B, I-210, I-181, orders from an Immigration Judge, INS letters or local INS documents.~~

(~~3~~2) **Parolees.** Under Section 212(d)(5) of the Immigration and Nationality Act, individuals can be paroled into the United States for an indefinite or temporary period at the discretion of the United States Attorney General. Individuals admitted as Parolees are considered to meet the "citizenship and alienage" requirement. ~~Individuals in this category should have Form I-94, Arrival-Departure Record, which identifies by stamped information that the alien has been paroled pursuant to Section 212 (d)(5) of the Immigration and Nationality Act. The case record must include a statement that the form identifies the individual as a parolee on Form I-94.~~

(~~4~~3) **Refugees and Western Hemisphere aliens.** Under Section 203(a)(7) of the Immigration and Nationality Act, Refugees and Western Hemisphere aliens may be lawfully admitted to the United States if, because of persecution or fear of prosecution due to race, religion, or political opinion, they have fled from a Communist or Communist-dominated country or from the area of the Middle East; or if they are refugees from natural catastrophes. ~~Verification of the individual's entry under this section of the law is made by seeing his/her Form I-94, Arrival-Departure Record, which contains stamped information to the effect that the individual was paroled into the United States indefinitely (no expiration date) as a refugee and specifies the country from which he/she is a refugee.~~ These entries meet the citizenship and alienage requirement. Western Hemisphere aliens will meet the citizenship requirement for ~~Title XIX~~ Medicaid if they can provide either of the documents in subparagraphs (A) and (B) of this paragraph as proof of their alien status.

(A) Form I-94 endorsed "Voluntary Departure Granted-Employment Authorized", or

(B) The following court-ordered notice sent by ~~INS~~ BCIS to each of those individuals permitted to remain in the United States: "Due to a Court Order in Silva vs. Levi, 76 C4268 entered by District Judge John F. Grady in the District Court for the Northern District of Illinois, we are taking no action on your case. This means that you are permitted to remain in the United States without threat of deportation or expulsion until further notice. Your employment in the United States is authorized".

(~~5~~4) **Conditioned entries of aliens made available by the U. S. Attorney General for emergent reasons or for reasons deemed strictly in the public interest.** Conditioned entries of aliens may be made available by the U.S. Attorney General for emergent reasons or for reasons deemed strictly in the public interest. Because the reasons for conditioned entries differ, a decision regarding eligibility can not be made until clearance is received from ~~INS~~ BCIS.

(~~6~~5) **Special provisions relating to Kickapoo Indians.** Kickapoo Indians migrating between Mexico and the United States carry Form I-94, Arrival-Departure Record (Parole Edition). If Form I-94 carries the statement that the Kickapoo is "paroled pursuant to Section 212(d)(5) of the Immigration and Nationality Act" or that the "Kickapoo status is pending clarification of status by Congress" regardless of whether such statements are preprinted or handwritten and regardless of a specific mention of the "treaty", they meet the "citizenship and alienage" requirement ~~because they are in the United States "under color of law"~~. All Kickapoo Indians paroled in the United States must renew their paroled status each year at any local Immigration Office. There are other Kickapoos who have entered the United States from Mexico who carry Form I-151 or Form I-551, Alien Registration Receipt Cards. These individuals have the same status as other individuals who have been issued Form I-151 or Form I-551 and therefore, meet the citizenship and alienage requirements. Still other Kickapoos are classified as Mexican Nationals by the ~~Immigration and Naturalization Service~~ BCIS. They carry Form I-94, Arrival-Departure Record, which has been issued as a visiting visa and does not make mention of the treaty. Such form does not meet the "citizenship and alienage" requirements but provides only the non-immigrant status described in (c)(1) of this Section.

(~~7~~6) **American Indians born in Canada.** An American Indian born in Canada, who has maintained residence in the United States since entry, is considered to be lawfully admitted for permanent residence if he/she is of at least one-half American Indian blood. This does not include the non-citizen whose membership in an Indian tribe or family is created by adoption, unless such person is of at least 50 percent or more Indian blood. The methods of documentation are birth or baptismal certificate issued on a reservation, tribal records, letter from the Canadian Department of Indian Affairs, or school records.

~~(d) **Qualified aliens.** The Immigration Reform Act of 1986 [PL 99-603] allows aliens who have resided illegally in this country since January 1, 1982 to begin a legalization process beginning May, 1987 and ending May, 1988. If the individual meets INS requirements under this law, temporary resident status is granted. Qualified alien status begins with the date that temporary resident status is granted. After 18 months of temporary status, application for permanent status can be made. Granting of permanent status does not change Title XIX entitlements for five years from the date that temporary resident status was granted. Documents in the possession of the alien should reflect status and date status was granted.~~

~~(e) **Ineligible aliens.** Aliens who are eligible for emergency services only are ineligible for other Title XIX benefits because of the temporary nature of their admission status. These aliens would have the following types of documentation: student visa; Form I-94 Arrival-Departure Record; Form I-185,,~~

~~Canadian Border Crossing Card; Form I-186, Mexican Border Crossing Card; Form SW-434, Mexican Border Visitor's Permit; or Form I-85A, Crewman's Landing Permit.~~

*[OAR Docket #03-3007; filed 7-17-03]*

## TITLE 317. OKLAHOMA HEALTH CARE AUTHORITY
## CHAPTER 35. MEDICAL ASSISTANCE FOR ADULTS AND CHILDREN-ELIGIBILITY

*[OAR Docket #03-3008]*

**RULEMAKING ACTION:**
EMERGENCY adoption
**RULES:**
Subchapter 7. Medical Services
Part 7. Certification, Redetermination and Notification
317:35-7-62. [AMENDED]
**(Reference APA WF # 03-07)**
**AUTHORITY:**
The Oklahoma Health Care Authority Board; The Oklahoma Health Care Authority Act, Section 5003 through 5016 of Title 63 of Oklahoma Statutes; 42 CFR 435.911; 42 CFR 435.916; Article 10, Section 23 of the Oklahoma Constitution
**DATES:**
**Adoption:**
April 10, 2003
**Approved by Governor:**
May 26, 2003
**Effective:**
Immediately upon Governor's approval
**Expiration:**
Effective through July 14, 2004, unless superseded by another rule or disapproved by the Legislature.
**SUPERSEDED EMERGENCY ACTIONS:**
N/A
**INCORPORATIONS BY REFERENCE:**
N/A
**FINDING OF EMERGENCY:**
The Agency finds that a compelling public interest exists which necessitates promulgation of emergency rules and requests emergency approval of revisions to assist the Oklahoma Department of Human Services (DHS) in controlling administrative costs associated with Medicaid eligibility determinations.
**ANALYSIS:**
Medical Assistance for Adults and Children-Eligibility rules regarding the length of certification periods for the group of children in custody and subsidized adoptions are revised at the request of DHS to lengthen the Medicaid certification period. Current Medicaid rules state that in general, the Medicaid certification period for children related to Aid to Families with Dependent Children is six months. Children and Family Service Division of DHS have requested a twelve month certification for the limited group of children in custody and subsidized adoptions. Due to state budget constraints, DHS has a small number of specialized workers to complete the Medicaid eligibility determinations for these children. Due to numerous factors, the number of custody children continues to grow, increasing the workloads of the DHS eligibility specialists. By lengthening the certification period for this small group of recipients, DHS will be able to meet established timeliness deadlines and better contain their administrative costs.
**CONTACT PERSON:**
Joanne Terlizzi at (405)522-7272

**PURSUANT TO THE ACTIONS DESCRIBED HEREIN, THE FOLLOWING EMERGENCY RULES ARE CONSIDERED PROMULGATED AND EFFECTIVE UPON APPROVAL BY THE GOVERNOR AS SET FORTH IN 75 O.S., SECTION 253(D):**

## SUBCHAPTER 7. MEDICAL SERVICES

## PART 7. CERTIFICATION, REDETERMINATION AND NOTIFICATION

**317:35-7-62. Special redetermination procedures for children in ~~DHS~~ custody <u>or subsidized adoptions</u>**

A ~~six month short-term medical care review~~ <u>periodic redetermination of eligibility for Medical Services is required every twelve months</u> for children in ~~DHS~~ custody ~~is completed and changes between reviews for continuing eligibility are made~~ <u>or subsidized adoptions as reported by DHS</u>.

*[OAR Docket #03-3008; filed 7-17-03]*

## TITLE 317. OKLAHOMA HEALTH CARE AUTHORITY
## CHAPTER 35. MEDICAL ASSISTANCE FOR ADULTS AND CHILDREN-ELIGIBILITY

*[OAR Docket #03-3009]*

**RULEMAKING ACTION:**
EMERGENCY adoption
**RULES:**
Subchapter 13. Client Rights and Responsibilities
317:35-13-6. [AMENDED]
317:35-13-7. [NEW]
**(Reference APA WF # 03-03C)**
**AUTHORITY:**
The Oklahoma Health Care Authority Board; The Oklahoma Health Care Authority Act, Section 5003 through 5016 of Title 63 of Oklahoma Statutes; 42 CFR 455.15; 42 CFR 455.16(c)(4); 42 USC § 320a-7; 42 USC § 1396r-6
**DATES:**
**Adoption:**
April 10, 2003
**Approved by Governor:**
May 26, 2003
**Effective:**
Immediately upon Governor's approval
**Expiration:**
Effective through July 14, 2004, unless superseded by another rule or disapproved by the Legislature.
**SUPERSEDED EMERGENCY ACTIONS:**
N/A
**INCORPORATIONS BY REFERENCE:**
N/A
**FINDING OF EMERGENCY:**
The Agency finds that a compelling public interest exists which necessitates promulgation of emergency rules and requests emergency approval of revisions to assist the Agency in the prevention of abuse and misuse of the Medicaid program by recipients.
**ANALYSIS:**
Agency rules are revised to establish abuse and misuse regulations for recipients of Medicaid. Under federal Medicaid regulations, Oklahoma residents are entitled to Medicaid benefits if they meet the criteria established by the Oklahoma Health Care Authority. However, certain recipients have abused the program by certain affirmative actions. These actions damage the Medicaid program by causing an expenditure of monies that would not otherwise by spent, by causing more state taxpayer dollars to be spent than necessary, or by abusing their right to medical care. In many cases these actions are crimes but law enforcement activity does not ensue because of the dollar value of the activity involved. To counteract these recipient actions, the agency is promulgating these rules to take administrative action against individuals who abuse the entitlement given to them under federal law. Agency

rules do not prohibit the state agency from referring these same acts to law enforcement entities who are charged with the responsibility of determining criminal liability. However, OHCA deems it important to act to reduce the expenditure of federal and state dollars prior to the actions of criminal investigation and prosecution. Federal law requires that persons who commit program related crimes such as misrepresentation of income or resources, misrepresentation of facts that cause Medicaid claims to be submitted, or abuse of the program be excluded from the program. Therefore, agency rules are in need of revision to establish abuse and misuse regulations for recipients of Medicaid.

**CONTACT PERSON:**

Joanne Terlizzi at (405)522-7272

**PURSUANT TO THE ACTIONS DESCRIBED HEREIN, THE FOLLOWING EMERGENCY RULES ARE CONSIDERED PROMULGATED AND EFFECTIVE UPON APPROVAL BY THE GOVERNOR AS SET FORTH IN 75 O.S., SECTION 253(D):**

## SUBCHAPTER 13. CLIENT RIGHTS AND RESPONSIBILITIES

### 317:35-13-6. Fraud

Federal and State laws make it unlawful for persons to make any false statement or misrepresent facts to receive benefits or payments under the ~~Title XIX~~ Medicaid Program. The ~~local~~ worker, employed by the Department of Human Services, is responsible for ensuring each individual who applies for ~~Title XIX~~ Medicaid is advised of the responsibilities to provide correct information and to report changes in circumstances which may affect his/her eligibility for ~~Title XIX~~ Medicaid benefits. As each new provider or supplier of medical services is approved, a letter is mailed to him/her from the OHCA advising of the penalties for misrepresentation of fact on claims for ~~Title XIX~~ Medicaid benefits. When a local office obtains information indicating possible fraud or abuse by a provider, ~~or~~ supplier of medical services, or a recipient, a memorandum explaining the circumstances is forwarded to the ~~DHS Office of the Inspector General~~ OHCA Legal Division. This office has the responsibility for any required action on this type of complaint and appropriate referral of the complaint.

### 317:35-13-7. Program Abuse and Administrative Sanctions

(a) **Definitions.** The following words and terms, when used in this Section, shall have the following meaning, unless the context clearly indicates otherwise.

(1) **"Abuse"** means recipient actions that defraud the Oklahoma Health Care Authority (OHCA), cause unnecessary medical expenses to the program or over-utilize services provided by the OHCA. It shall also mean causing unnecessary or excessive claims to be submitted to the OHCA.

(2) **"Conviction"** or **"Convicted"** means a judgment of conviction has been entered by a Federal, State or local court, regardless of whether an appeal from that judgment is pending.

(3) **"Exclusion"** means not being able to be certified for Medicaid benefits under the State Plan or Waivered services in Oklahoma.

(4) **"Fraud"** means an intentional deception or misrepresentation made by a person with the knowledge that the deception could result in some unauthorized benefit to himself or some other person. It includes any act that constitutes fraud under applicable Federal or State law.

(5) **"Knowingly"** means that a person, with respect to information:

(A) has actual knowledge of the information;

(B) acts in deliberate ignorance of the truth or falsity of the information; or

(C) acts in reckless disregard of the truth or falsity of the information, and no proof of specific intent to defraud is required.

(6) **"Medical Services Providers"** means:

(A) **"Practitioner"** means a physician or other individual licensed under State law to practice his or her profession or a physician who meets all requirements for employment by the Federal Government as a physician and is employed by the Federal Government in an IHS facility or affiliated with a 638 Tribal facility.

(B) **"Supplier"** means an individual or entity, other than a provider or practitioner, who furnishes health care services under Medicaid or other medical services programs administered by the OHCA.

(C) **"Provider"** means:

(i) a hospital, skilled nursing facility, comprehensive outpatient rehabilitation facility, home health agency, or a hospice that has in effect an agreement to participate in Medicaid, or any other medical services program administered by the OHCA, or

(ii) a clinic, a rehabilitation agency, or a public health agency that has a similar agreement.

(D) **"Laboratories"** means any laboratory or place equipped for experimental study in science or for testing or analysis which has an agreement with the OHCA to receive Medicaid monies.

(E) **"Pharmacy"** means any pharmacy or place where medicines are compounded or dispensed or any pharmacist who has an agreement with OHCA to receive Medicaid monies for the dispensing of drugs.

(F) **"Any other provider"** means any provider who has an agreement with OHCA to deliver health services, medicines, or medical services for the receipt of Medicaid monies.

(7) **"OIG"** means the Office of Inspector General of the Department of Health and Human Services.

(8) **"Recipient"** means a beneficiary, patient or person served by the OHCA.

(9) **"Sanctions"** means any administrative decision by OHCA to suspend or exclude a recipient from the ability to be certified for medical assistance. A sanction may include a decision to use the remedy provided in OAC

317:30-3-14(b) or to require payment by the recipient of the service.

(10) **"Suspension"** means an administrative action to suspend temporarily the certification of a case for medical assistance.

(11) **"Willfully"** means proceeding from a conscious motion of the will; voluntary, intending the result which comes to pass; intentional.

(b) **Basis for sanctions.**

(1) The OHCA may sanction a recipient who has or has had a certified medical assistance case with OHCA for the following reasons:

(A) Knowingly or willfully made, or causing to be made, any false statement or misrepresentation of material fact to get a case certified or causing services to be rendered to the recipient;

(B) Caused or ordered services under Medicaid that are substantially in excess of the recipient's needs or that fail to meet professionally recognized standards for health care;

(C) Submitted or caused to be submitted to the Medicaid program, bills or requests for payment containing charges or costs that are substantially in excess of customary charges or costs; or

(D) Threatened harm to medical providers or state officials.

(2) The agency may base its determination that services are excessive or unnecessary based upon reports, including sanction reports, from any of the following sources:

(A) The PRO for the area served by the provider or the PRO contracted by OHCA;

(B) State or local law enforcement agencies and licensing or certification authorities;

(C) Peer review committees of fiscal agents or contractors;

(D) State or local professional societies;

(E) Surveillance and Utilization Review Section Reports done by OHCA;

(F) Medicaid Fraud Control Unit;

(G) Other sources, including internal investigations, deemed appropriate by the Medicaid agency or the OIG.

(3) OHCA must suspend from the Medicaid program any recipient who has been suspended from participation in Medicare or Medicaid due to a conviction of a program related crime. This suspension must be at a minimum, the same period as the Medicare suspension.

(c) **Procedures for imposing sanctions.**

(1) Notice of proposed administrative sanction.

(A) If the OHCA proposes to sanction, it will send the recipient a written notice stating:

(i) the reasons for the proposed sanction;

(ii) the date upon which the sanction will be effective;

(iii) the result of the sanction should it be imposed; and

(iv) a statement that the recipient has a right to an evidentiary hearing prior to the imposition of the sanction.

(B) A copy of this section of the rules will be attached to the letter of proposed action.

(2) Notice of sanction.

(A) After an evidentiary hearing is conducted under OAC 317:2-1-2, the Agency will make a final administrative decision regarding the decision to sanction.

(B) Based upon its final decision, the Agency shall send a notice to the recipient that provides:

(i) the reasons for the decision;

(ii) the effective date of the sanction;

(iii) the effect of the sanction on the party's participation in the Medicaid program;

(iv) the recipient's right to request a reconsideration of the Agency's final decision;

(v) the earliest date in which the Agency will accept a request for reinstatement;

(vi) the requirements and procedures for reinstatement; and

(vii) instructions on how to ask for reconsideration.

(d) **Effect of sanction.** OHCA will advise its eligibility agent of the closure or suspension of the case and when the recipient can be recertified.

(e) **Criteria for reinstatement.**

(1) Upon the request for reinstatement made by the recipient, OHCA may consider the following factors to reinstate the recipient;

(A) The number and nature of the program violations and other related offenses.

(B) The nature and extent of any adverse impact the violations have had on providers or other recipients;

(C) The amount of any damages;

(D) Any mitigating circumstances;

(E) Other facts bearing on the nature and seriousness of the program violations and related offenses;

(F) Convictions in a federal, state, or local court of other offenses related to participation in the Medicare or Medicaid program which were not considered during the development of the exclusion; and

(G) Whether the state or local licensing authorities have taken any adverse action against the party for offenses related to participation in the Medicare or Medicaid program which were not considered during the development of the exclusion.

(2) Regardless of the applicability of one or many of the factors in paragraph (1) of this subsection, reinstatement shall not be granted unless it is reasonably certain that the violation(s) that led to the exclusion will not be repeated.

*[OAR Docket #03-3009; filed 7-17-03]*

# TITLE 340. DEPARTMENT OF HUMAN SERVICES
# CHAPTER 40. CHILD CARE SERVICES

*[OAR Docket #03-2096]*

**RULEMAKING ACTION:**
EMERGENCY adoption
**RULES:**
Subchapter 5. Plan of Service
340:40-5-1 [AMENDED]
Subchapter 7. Eligibility
340:40-7-1 [AMENDED]
340:40-7-6 [AMENDED]
340:40-7-8 [AMENDED]
340:40-7-11 through 340:40-7-13 [AMENDED]
**(Reference APA WF # 03-15)**
**AUTHORITY:**
Commission for Human Services, Article XXV, Sections 2, 3 and 4 of the Oklahoma Constitution; Personal Responsibility and Work Opportunity Reconciliation Act of 1996 [Public Law 104-193]; the Balanced Budget Act of 1997 [Public Law 105-33]; and 45 Code of Federal Regulations (CFR) Parts 98 and 99.
**DATES:**
**Adoption:**
June 10, 2003
**Approved by Governor:**
June 26, 2003
**Effective:**
August 1, 2003
**Expiration:**
Effective through July 14, 2004, unless superseded by another rule or disapproved by the Legislature.
**SUPERSEDED EMERGENCY ACTIONS:**
n/a
**INCORPORATIONS BY REFERENCE:**
n/a
**FINDING OF EMERGENCY:**
Emergency approval is requested as the agency finds Emergency approval is requested as the Agency finds that as a result of a budget shortfall imminent peril to the preservation of the public health, safety, and welfare of families with children exists for those who receive or expect to receive child care benefits. Without approval of the proposed rules, some families eligible for child care benefits will be denied.
**ANALYSIS:**
The purpose of the proposed rules is to increase the amount of financial contribution paid by a family receiving child care subsidy to maintain increased utilization, migration to higher quality care, and additional demands on Temporary Assistance for Needy Families (TANF) services. This will be accomplished through an increase in family share co-payments, removing the earned income deduction from a family's earned income, and no longer predetermining zero family share co-payments for children receiving TANF or Supplemental Security Income (SSI).

340:40-5-1 is revised to remove the words "income eligible" as this is no longer a child care term.

340:40-7-1 is revised by showing who has priority for child care services in the event that the Oklahoma Department of Human Services (OKDHS) does not have sufficient funding to subsidize all families applying for and meeting eligibility guidelines for child care and eliminating any families from being predetermined eligible for a child care subsidy with a zero co-payment.

340:40-7-6 is revised to specify that all members of a TANF household included in a TANF benefit must be included in the child care household income computation and to clarify that family members looking for work or working away from home are still considered child care household members.

340:40-7-8 is revised to remove language that allowed a child receiving SSI to be exempt from a co-payment.

340:40-7-11 is revised by adding language about how income is classified as earned and unearned income, removing the earned income deduction as a deduction from gross income for child care services, adding adoption subsidy payments as countable income, removing out-dated language about the Comprehensive Employment and Training Act (CETA) program, and removing Family Support Assistance Payments from countable income.

340:40-7-12 is revised by excluding Family Support Assistance, payments made to Victims of Crime Act of 1984, and monetary allowances paid to certain children of Vietnam War veterans as income for child care.

340:40-7-13 is revised by removing the earned income deduction as a deduction from gross income for child care services.
**CONTACT PERSON:**
Dena Thayer at (405)521-4326

**PURSUANT TO THE ACTIONS DESCRIBED HEREIN, THE FOLLOWING EMERGENCY RULES ARE CONSIDERED PROMULGATED UPON APPROVAL BY THE GOVERNOR, AS SET FORTH IN 75 O.S., SECTION 253(D), WITH A LATER EFFECTIVE DATE OF AUGUST 1, 2004:**

## SUBCHAPTER 5. PLAN OF SERVICE

### 340:40-5-1. Plan of service

(a) **Plan of service.** Providing child care is part of an overall plan of service designed to help the parent(s) or caretaker(s) with whom the child(ren) lives to achieve his or her maximum potential for self-support. Quality child care services assure the parent(s) or caretaker(s) that each child has adequate care which affords developmental and learning experiences while the parent(s) or caretaker(s) is engaged in self-support activities. ~~The worker helps the client to become more independent by suggesting ways to increase household income and identifying strengths in the client's life. The Family Support Services (FSS) worker and the Child Welfare staff freely share information to develop a plan that best meets the needs of the family when both are working with the family.~~

(b) **Plan components.** The plan of service consists of many components that all link to form a goal-directed plan of care. These components include:

(1) the name, age, and grade level of the child(ren) for whom child care is needed;

(2) need for child care;

(3) the days and hours for which care is approved, including travel time;

(4) whether care is approved on a weekly, full-time, blended, or part-time care basis;

(5) whether there is an appropriate, feasible alternative to Oklahoma Department of Human Services (~~DHS~~OKDHS) subsidized child care;

(6) that the plan to increase the client's income is in place;

(7) a back up plan for care when the child(ren) cannot go to the authorized child care provider;

(8) the name, address, and telephone number of a person ~~who could be called~~ to call on in case of an emergency;

(9) a plan to help the client choose a child care provider;

(10) a discussion about the family share co-payment ~~the family must pay toward the cost of child care~~, if one is required;

(11) a discussion of any other social service needs of the family; and

(12) a discussion of the client's responsibilities and rights when using subsidized child care.

(c) **Alternative to subsidized child care.** The worker explores with the client whether there is an appropriate, feasible alternative to ~~DHS~~ OKDHS subsidized child care. The client has a choice whether to use this alternative unless the alternative is a spouse or the natural or adoptive parent of the child(ren) who lives in the home and who does not meet a need factor. Possible alternatives include:

(1) care by a dependable relative who is able and willing to assume responsibility for care and supervision of the child(ren) for part of the day;

(2) care in a free or low cost facility, such as a preschool, prekindergarten, kindergarten, Head Start, Early Head Start, or tribal child care program;

(3) dependent care expenses paid directly by a Temporary Assistance for Needy Families client which are considered as earned income exemptions; and

(4) for a school age child(ren), the possible rearrangement of the parent's or caretaker's employment or training schedule to coincide with the hours the child(ren) is in school.

(d) **Plan to increase income.** At each application or review, the client and the worker discuss ways the client can increase income to the household. The client and worker identify together the goals child care helps the family achieve. Together they estimate when the family can assume progressively greater responsibility for the cost of child care. The worker makes referrals to other agencies as appropriate.

(e) **Back up plan.** The worker discusses with the client the back up plan for child care he or she has in place if the child(ren) cannot go to the usual provider for some reason such as illness, school holidays, or another unforeseen emergency. The back up plan includes the name and address of a person the client feels he or she can rely on when the normal plan of care cannot be used.

(f) **Emergency contact.** Form FSS-1, Comprehensive Application and Review, or Form K-2, Application for Child Care Services, includes the name, phone number, and address of a person ~~who can be contacted~~ to contact in case of emergency when the primary parent or caretaker cannot be reached.

(g) **Choice of provider.** The worker documents the choice of provider on Form FSS-1 or Form K-2. He or she calls the chosen provider to ensure acceptance of the child(ren) does not cause the provider to exceed his or her licensed capacity after describing the days and hours care is needed. If the client does not choose a provider at the time of the request, the worker provides the client with information to help in making the choice. The client can choose a family child care home regardless of star level. The client cannot choose a child care:

(1) facility that does not have a valid contract with ~~DHS~~ OKDHS;

(2) facility in which the client or his or her spouse has an ownership interest;

(3) home in which the child resides;

(4) home in which the client also works during the hours his or her child(ren) is in care;

(5) center in which the client works and has job responsibilities which include care of the child(ren) for whom child care is requested;

(6) provider who is related to the client and only accepts a relative's child(ren);

(7) provider who does not allow parental access during the hours the provider is caring for children;

(8) provider who is receiving state or federal funds, such as Head Start, Early Head Start, or public schools unless:

(A) all parents are charged a fee for the hours subsidy payment is requested; and

(B) the program is offering extended day or full year services. Programs operating only during typical school or Head Start hours are not eligible;

(9) provider caring for a school age child during the regular school day when such student could be attending a public or private school during those hours; or

(10) center which is a one star facility unless there ~~is~~ are no one star plus, two, or three star centers in the community or one of the special exception criteria are met. Special exception criteria are:

(A) the child(ren) was already approved for care at this one star center prior to January 1, 2003. The child(ren) can remain at this facility unless the ~~child~~ child(ren) stops attending there for more than 30 days. The ~~child~~ child(ren) can also be approved at this same facility again if the only reason the ~~child~~ child(ren) did not attend for more than 30 days was because of a school break or due to circumstances beyond the control of the family such as illness of the child;

(B) care is requested for a child living in the same home as a child already approved for care as described in (10)(A) of this subsection for the same one star child care provider; or

(C) the parent or guardian demonstrates that ~~they do~~ there is not ~~have~~ another child care option that meets the family's needs.

(h) **Family share co-payment.** The worker uses ~~DHS~~ OKDHS Appendix C-4, Child Care Eligibility/Rates Schedule, to determine the family share co-payment ~~paid by clients who are income eligible~~ for each family. The family share co-payment is applied before ~~DHS~~ OKDHS pays a child care subsidy. The amounts the family and ~~DHS~~ OKDHS pay toward the cost of care varies depending on the plan of service, family size, income, and the number of children receiving child care services.

(i) **Social services requests.** When a client requests help in meeting the social services needs listed on Form FSS-1 or Form K-2, the worker provides all available information to aid a client in meeting these needs.

(j) **Client rights and responsibilities.**

(1) The client has ~~a~~ the right to an explanation by the worker of the "Client Child Care Responsibilities and Service Plan Agreement" listed on Form FSS-1 or Form K-2 before signing the form.

(2) The worker must advise the client that a child care request is not approved back to the date of request unless the interview is conducted and verification is provided on that same date.

(3) The client has ~~a~~ the right to ask for a fair hearing if he or she disagrees with an action taken on the case.

(4) The client is advised by the worker that the provider may charge the client extra for special fees such as enrollment or transportation fees as long as these fees are posted and also charged to the general public. The provider is:

(A) not contractually allowed to charge the client more for days and hours covered in the child care plan even if the hours are more than customary for a full-time day; and

(B) not allowed to charge the client for days the child(ren) is not in attendance.

(5) The client is advised he or she is required to cooperate with the ~~DHS~~ OKDHS Office of Inspector General in any audit or investigation of possible overpayments by the client or by his or her chosen provider.

## SUBCHAPTER 7. ELIGIBILITY

**340:40-7-1. ~~Categories of eligibility~~ Priority for child care services**

(a) **Priority for child care services.** ~~An individual may be predetermined eligible for child care services, determined income eligible based on the gross income of the household or have dual eligibility with his or her tribe.~~ In the event that the Oklahoma Department of Human Services (OKDHS) does not have sufficient funding to subsidize all families applying for and meeting eligibility guidelines outlined in this Subchapter for child care services, priority for services is given to families with very low family income and children with special needs. Families specified in Title 45 of the Code of Federal Regulations, Part 98 of the federal guidelines for the Child Care and Development Fund who must be given priority in approval for child care services are included in (1) through (4).

(1) **~~Predetermined eligible~~ Families receiving Temporary Assistance for Needy Families (TANF).** ~~A person is predetermined eligible for child care services with a zero family share co-payment when he or she is a recipient of public assistance or Supplemental Security Income (SSI). Public assistance is defined as receiving a State Supplemental Payment, Temporary Assistance for Needy Families (TANF), or Refugee Cash Assistance. This definition also includes children receiving non-cash vouchers from the TANF program.~~ The United States Department of Health and Human Services (USHHS), Administration for Children and Families (ACF) requires that OKDHS give priority for child care services to families receiving TANF benefits who have dependent children under 13 years of age when that care is needed to help a TANF eligible family member accept employment, remain employed, or participate in an approved education or training activity. TANF eligible families must complete a child care application and follow the same application procedures shown at OAC 340:40-3-1 as all other families who request OKDHS assistance with child care.

(A) ~~The Administration for Children and Families requires that the Department guarantee child care for dependent children under 13 years of age when that care is needed to help a TANF eligible family member accept employment, remain employed, or participate in an approved education or training activity.~~ Children who receive non-cash vouchers from the TANF program are considered TANF recipients for child care.

(B) ~~All TANF recipients who currently receive child care services for reasons of employment are eligible for child care under the Child Care and Development Fund or for the cost of child care to be considered as an earned income exemption while continuing to receive cash benefits.~~ TANF families must meet the income guidelines shown on OKDHS Appendix C-4, Child Care Eligibility Rates Schedule, for their household size to receive help with child care costs and may be assessed a family share co-payment.

(C) All TANF recipients with countable earned income have the option to receive child care services from OKDHS or choose to pay their own child care expenses and receive the dependent care exemption as described at OAC 340:10-3-33(3) while continuing to receive cash benefits.

~~(2)~~ **~~Income eligible.~~** ~~Households who are not predetermined eligible for child care services must meet income eligibility guidelines listed on DHS Appendix C-4, Child Care Eligibility/Rates Schedule, for their household size, to receive help with child care costs.~~

(~~3~~2) **~~Transitional child care~~ Families transitioning off of TANF.** ~~Per~~ Families whose TANF benefits have stopped within the last 24 months because of employment receive priority for child care services using the income guidelines shown on OKDHS Appendix C-4, per federal guidelines, and per Section 230.61 of Title 56 of the Oklahoma Statutes, ~~a TANF recipient who becomes employed is eligible for transitional child care services for 24 months following the date of employment~~ unless:

(A) the employer provides child care benefits; or

(B) the monthly salary received from the employer exceeds the monthly ~~allowance of assistance pursuant to the~~ TANF ~~program~~ benefit plus the cost of child care and medical insurance to which the recipient would be entitled.

(3) **Families at risk of becoming dependent on TANF benefits.** Families at risk of becoming dependent on TANF benefits receive priority for child care services. These are families who fall within income guidelines on OKDHS Appendix C-4, meet all other eligibility conditions discussed in this Subchapter, are not receiving TANF, need child care in order to work, and would otherwise be at risk of becoming dependent on TANF. Examples include:

(A) families who are eligible for TANF benefits but choose not to apply;

(B) teenage parent(s);

(C) families who have previously received TANF benefits and the last payment occurred over 24 months ago;

(D) children not included in a TANF benefit at the point TANF benefits stopped; or

(E) families whose TANF benefit stops for a reason other than employment.

(4) ~~**TANF families in the Work Supplementation Program**~~ **Children with special needs.** ~~TANF families in the Work Supplementation Program are treated as income eligible families.~~ OKDHS uses the term children with disabilities to describe children with special needs. OKDHS defines children with disabilities at OAC 340:40-7-8(h). These children receive priority for child care services as long as the family meets all other eligibility conditions discussed in this Subchapter and household income is within income guidelines shown on OKDHS Appendix C-4.

(b) **Income eligible families.** Households who meet the eligibility conditions shown in this Subchapter but who do not meet a priority reason to receive subsidized child care are approved for child care services as funds are available. These families must meet income eligibility guidelines shown on OKDHS Appendix C-4 for their household size to receive help with child care costs.

(~~5~~c) **Dual eligibility.** An individual may have dual eligibility for both the child care subsidy program through ~~the Department~~ OKDHS and through his or her Indian tribe. The child care provider cannot receive payment from both programs simultaneously. However, the client can be approved for the child care subsidy program and the tribe may pay the client's family share co-payment.

**340:40-7-6. Household composition and income consideration**

(a) **Household composition and income consideration.** To establish a child's eligibility for subsidized child care, it is necessary to define who must be considered part of household composition for income consideration. Individuals who must be included are:

(1) the natural or adoptive parent(s) of the child(ren) who ~~is living~~ lives in the home and for whom child care is needed;

(2) the caretaker(s) of the minor child(ren) who needs child care if that caretaker is legally and financially responsible for the child(ren) or the caretaker(s) is included in the same Temporary Assistance for Needy Families (TANF) benefit as the child(ren) who needs child care;

(3) all minor children ~~residing~~ who live in the home for whom ~~the payee is financially responsible~~ child care is requested and their siblings;

(4) the stepparent of the minor child(ren) who is living in the home and for whom child care is needed;

(5) any non-relative adult of the opposite sex who is living in the home with the natural or adoptive parent; ~~and~~

(6) any child(ren) of the non-relative adult of the opposite sex who is living in the home with the natural or adoptive parent~~.~~; and

(7) all members of a TANF household included in the TANF benefit when child care is requested for one or more of the household members.

(b) **Periods of absence.** When a household member is out of the home due to a temporary absence, he or she is still considered a household member as long as he or she plans to return to the home. Examples of temporary absence include:

(1) a hospitalization for physical or mental health reasons;

(2) incarceration;

(3) attending school;

(4) military service; ~~and~~

(5) vacation time for a child~~.~~; and

(6) working or looking for a job away from home.

(c) **Definition of household composition terms.** The ~~social services specialist~~ worker determines household composition for income considerations using the definition of terms listed in (1) ~~-~~ through (6) of this subsection.

(1) ~~Adults are~~ An adult is an emancipated ~~minors~~ minor or ~~persons~~ person 18 years of age or older. A child who is also a parent is ~~treated as~~ considered an adult.

(2) A child is any unmarried, unemancipated, non-parental person under 18 years of age.

(3) A child who has married or voluntarily left the parental home for any reason and established independent living arrangements, other than being away from home for school or health reasons, is considered emancipated and treated as an adult. Once a child is emancipated, the emancipation is permanent.

(4) Spouses are persons married by ceremony or ~~common law~~ common-law and who are living together, or living separately on a temporary basis with no intentions of severing the marital relationship, or who are involuntarily separated.

(5) A non-relative adult is defined as any person over 18 years of age or an emancipated minor who is not related to the parent or caretaker by blood, adoption, or marriage.

(6) The term legally and financially responsible adult is defined as a parent or stepparent of the child(ren) for whom child care is needed. The term also includes other caretaker adults who are ~~court ordered~~ court-ordered to be legally and financially responsible for the child.

(d) **Joint or shared custody.** When parents separate or divorce and share custody of their child(ren), either voluntarily or through a court order, the ~~social services specialist~~ worker considers each parent's eligibility separately as well as his or her income. If only one parent qualifies for subsidized child care, only the days and hours of care needed while that parent has physical custody of the child(ren) is approved.

**340:40-7-8. Defining the need factor for child care services**

(a) **Employment.** Employment means the adult earns wages for work performed if the adult is part of the household for income purposes.

(1) If the adult is not making at least minimum wage for the number of hours he or she is working, the worker counsels with the individual regarding increasing income.

If counseling is unsuccessful, child care benefits can be reduced or terminated. A person employed and working from his or her own home ~~can receive~~ may be approved for child care services in an out-of-home child care home or center.

(2) Job search meets the definition of employment and child care may be approved only when a recipient who has received child care services for at least 30 days loses employment or successfully completes a formal education or training program and requests child care assistance to look for a job. Child care may be approved for a maximum of 30 calendar days from the date the client loses employment or successfully completes a formal education or training program. Job search may be approved no more than twice per calendar year.

(b) **Training.** Job skills training includes vocational training and "hands-on" work experience to develop technical skills, knowledge, and abilities in specific occupational areas. All training programs must include qualitative measures to evaluate the participant's progress. Examples include competency gains, proficiency levels, and certificates of completion.

(c) **Formal education program.** A formal education program is defined as a course of study which leads to the attainment of an associate's or bachelor's degree.

(d) **Temporary Assistance for Needy Families (TANF) Work activity.** When a client receives TANF assistance, child care may be provided for any activity outlined in the client's Form TW-2, TANF Work/Personal Responsibility Agreement. Need is also met when the individual is waiting to enter an approved TANF Work activity. Approval is limited to a time period not to exceed:

(1) two weeks; or

(2) one month on an exception basis where child care arrangements or other services would otherwise be lost and the subsequent activity is scheduled to begin within that period.

(e) **TANF applicant job search.** TANF applicants referred for immediate employment are eligible for child care for job search. TANF applicants are advised:

(1) child care for job search is limited to 20 days which must be used within 30 calendar days from the date of request;

(2) in-home child care arrangements are not available for TANF applicants;

(3) child care may only be used during the times the applicant is actually looking for a job; and

(4) he or she must notify the county office immediately upon securing employment.

(f) **Food Stamp Employment and Training (E&T) recipients.** Income eligible food stamp recipients who live in a Food Stamp E&T county may receive voucher-authorized child care for E&T activities if child care services are necessary for the parent or caretaker to participate in the E&T activities. Participants are eligible for a maximum of $160 per month per child.

(1) Child care services are available whether the parent or caretaker is a required or voluntary participant.

(2) In two-parent or two-caretaker families, both parents may participate in E&T activities simultaneously and receive voucher-authorized child care unless one parent or caretaker has been exempted to care for a child(ren) under six years of age.

(3) Child care services are only purchased from licensed and contracted out-of-home child care facilities.

(4) Food Stamp E&T participants are predetermined eligible for voucher-authorized child care and are approved with a zero family share co-payment.

(5) At the end of each calendar month, the client submits to the worker a completed Form FSP-22, Job Search Plan.

(6) An overpayment is written for any ~~vouchered~~ voucher-authorized child care used by the client for which he or she was not eligible.

(7) The Family Support Services Division, Food Stamp Section monitors a random selection of cases quarterly to ensure the integrity of the program.

(g) **Protective or preventive child care.** Protective or preventive child care services are used as an early intervention strategy in certain critical situations to help in preventing neglect, abuse, or exploitation. The worker may approve child care in these situations to help stabilize the family situation or to enhance family functioning.

(1) The worker may approve protective or preventive child care for a maximum of 30 calendar days at the county level.

(2) The family may or may not be expected to help in paying the cost of this child care depending on the unique circumstances of the family.

(3) If the family is financially ineligible for child care services but there is evidence the family is so burdened by debt that the additional financial pressure of paying for child care may result in further deterioration of family stability and functioning, the worker may approve protective or preventive child care. A plan to reduce such debt must be established.

(4) If determining financial eligibility will take time, the worker may approve child care while the parent or caretaker is gathering necessary information.

(5) Protective or preventive child care is temporary and planning to reduce or eliminate the need for such child care begins at the initial contact.

(h) **Child with disabilities.** A child with disabilities is defined as a child ~~receiving~~ who receives Supplemental Security Income (SSI), SoonerStart early intervention services, or special education services provided in accordance with an Individualized Education Program (IEP) by the local school district. This definition also includes a child whose SSI payment stops because of financial reasons but who still meets the medical definition of disability as determined by the Social Security Administration. ~~A child must receive SSI to be predetermined eligible for child care services with a zero family share co-payment if he or she meets all conditions of eligibility for child care.~~ Child care may be approved for a child with disabilities through the day before the child's 19th

birthday when a statement from a licensed health care professional is provided stating the child is physically or mentally incapable of self-care as age appropriate.

(1) **Approval for the higher special needs rate.** Form ADM-123, Certification for Special Needs Child Care Rate, is completed and signed by the parent or guardian, the child care provider, Division of Child Care (DCC) licensing staff, and the child's Family Support Services worker or Child Welfare worker. The parent or caretaker must submit the child's ~~Individualized Education Program (~~IEP~~)~~ or Individualized Family Service Plan (IFSP) that documents the care needs of the child. If a child ~~receiving~~ who receives SSI is not receiving special education services or SoonerStart services, a statement from a health professional describing the care needs of the child is submitted. A change from the applicable daily or weekly rate to the higher special needs rate is effective the first of the month following the month eligibility for the rate is determined by DCC licensing staff. When care is not provided until the special needs rate is approved, it is effective the first day care is provided.

(2) **Enrichment child care services for children with disabilities.** The purpose of enrichment child care services is to assist the child in developing socialization skills. Children with disabilities receiving SSI who are normally not eligible for child care may be approved for enrichment child care services based solely on the needs of the child's condition of delay or disability rather than on the activities of the parent or caretaker. Child care is limited to a maximum of two days per week not to exceed ten full-time or part-time days per month for enrichment child care. The parent or caretaker must provide a statement from a professional involved in the child's life recommending child care be provided and the reason child care would be beneficial to the child. When such enrichment child care is approved, it is provided outside of the child's home, preferably in a setting where at least one other child is present.

**340:40-7-11. Sources of income considered**

(a) **Sources of income considered.** Income may be received periodically or at irregular intervals. All income unless specifically excluded in OAC 340:40-7-12 is considered in determining monthly gross income. Income is classified as earned or unearned income. Gross income is treated the same for both types of income.

(b) **Earned income.** The term "earned income" refers to total money earned by an individual through the receipt of wages, salary, commission, or profit from activities in which the individual is engaged as self-employed or as an employee.

(1) **Wages.** Wages include total money received for work performed as an employee including armed forces pay, commissions, tips, piece-rate payments, longevity payments, and cash bonuses before any deductions are made such as taxes, bonds, pensions, union dues, credit union payments, and cafeteria plans.

(A) Only the portion of the cafeteria plan the client controls is counted as income.

(B) Reimbursements for expenses such as a uniform allowance or transportation costs, other than daily commuting, are subtracted from gross income.

(C) Payments made for annual leave, sick leave, or severance pay are considered as earned income during the month such income is received whether paid during employment or at termination of employment.

(D) Wages that are garnisheed or diverted and paid to a third party are also counted as income.

~~(E) An earned income deduction is allowed for each employed person in the household unit.~~

(2) **Self-employment.** Earnings derived from a business enterprise owned by the individual are considered as self-employment income. Gross income is determined by calculating total gross receipts or sales~~,~~ and subtracting the costs of producing the income listed in this Section ~~and allowing the earned income deduction listed on Oklahoma Department of Human Services (OKDHS) Appendix C-4, Child Care Eligibility/Rates Schedule~~.

(A) **Costs of producing self-employment income.** Allowable costs of producing self-employment income include, but are not limited to, the identifiable cost of labor, stock, raw material, seed and fertilizer, and payments on the principal of the purchase price of income producing real estate and capital resources, equipment, machinery, and other durable goods, interest paid to purchase income producing property, insurance premiums, and taxes paid on income producing property. Items not considered as a cost of producing self-employment income are:

(i) net losses from previous periods;

(ii) federal, state, and local income taxes, money set aside for retirement purposes, and other work related personal expenses, such as meals and necessary transportation ~~which are accounted for by the appropriate amount of earned income deduction listed on OKDHS Appendix C-4~~;

(iii) depreciation;

(iv) penalties and fines; and

(v) charitable contributions.

(B) **Monthly self-employment income.** Self-employment income received on a monthly basis is normally averaged over a 12-month period. If the averaged amount does not accurately reflect the household's actual monthly circumstances because the household has experienced a substantial increase or decrease in business, the worker calculates the self-employment income based on anticipated earnings.

(C) **Seasonal self-employment.** Self-employment income intended to meet the household's needs for only part of the year is averaged over the period of time it is intended to cover.

(D) **Annualized self-employment income.** Self-employment income which represents a household's annual support is averaged over a 12-month period, even if the income is received in a short period of time. If the averaged amount does not accurately

reflect the individual's actual monthly circumstances because the individual has experienced a substantial increase or decrease in business, self-employment income is based on anticipated earnings.

(E) **Income from rental property.** Income from rental property is considered income from self-employment. ~~The household is only entitled to the earned income deduction if a member of the household is actively engaged in management of the property an average of at least 20 hours per week.~~

(F) **Income from room and board.** Payments from roomers or boarders are considered self-employment if the roomer or boarder is paying a reasonable amount.

(G) **Self-employed farm income.** Self-employed farm income is determined like other ~~self-employed~~ self-employment income except when the business expenses exceed the self-employment income. When the cost of producing self-employment income exceeds the income derived from self-employment as a farmer, such losses are offset against any other countable income in the household. When the annual net loss has been established, the loss is prorated by dividing by 12 for the monthly amount to be subtracted from the total countable income ~~prior to subtraction of the earned income deduction~~. For purposes of this exception, to be considered a self-employed farmer, the farmer must receive or anticipate receiving annual gross proceeds of $1000 or more from the farming enterprise. Farming is defined as cultivating or operating a farm for profit either as owner or tenant. A farm includes stock, dairy, poultry, fish, fruit, and truck farms, and also plantations, ranches, ranges, and orchards. A fish farm is an area where fish are grown or raised and where they are artificially fed and protected and does not include an area where they are merely caught or harvested. A plant nursery is a farm for purposes of this definition.

~~(3) **Training allowances.** Training allowances for vocational and rehabilitative programs recognized by federal, state, or local governments such as the work incentive program and programs authorized by the Comprehensive Employment and Training Act are considered as income, to the extent they are not reimbursement. The individual must be actively involved in some type of work for the training allowances to be considered countable earnings.~~

(~~4~~3) **On-the-job training.** Earned income from regular employment for on-the-job training is considered as any other earned income.

(~~5~~4) **Workforce Investment Act (WIA).** Income earned in on-the-job training positions is considered earned income. This is on-the-job training provided under Section 134 of ~~the Workforce Investment Act~~ WIA for individuals 19 years of age or older. On-the-job training provided must be full-time positions, and there must be a contract between WIA and the employer for each individual position. This does not include classroom training and institutional training or intern assignments sponsored by WIA, even when an hourly amount is paid for such training.

(~~6~~5) **Title I payments of Domestic Volunteer Services Act.** Payments under Title I of the Domestic Volunteer Services Act of 1973 as amended [P.L. 93-113] are considered income unless they are excluded under OAC 340:40-7-12. This includes income to Volunteers in Service to America, University Year for Action, and similar volunteer payments.

(~~7~~6) **Earnings of children.** Earned income of a minor parent is treated as adult earned income. Earnings of other children 17 years of age and younger who are under the parental control of an adult household member are excluded as long as the child is attending school regularly. This exclusion continues to apply during temporary interruptions in school attendance due to semester or vacation breaks, provided the child's enrollment resumes following the break. See OAC 340:40-7-6(a)(7) and 340:40-7-11(c)(1) for information about 18 year olds receiving Temporary Assistance for Needy Families (TANF) as children.

(c) **Unearned income.** The term "unearned income" refers to income an individual receives for which he or she does not put forth any daily, physical labor. Types of income listed in paragraphs (1) through (10) of this subsection are considered unearned income.

(1) **Assistance payments.** Assistance payments include state means tested programs such as ~~Temporary Assistance for Needy Families~~ TANF and State Supplemental Payments (SSP) to the aged, blind, or disabled, and Refugee Cash Assistance.

(2) **Pensions, disability, and Social Security benefits.** Annuities, pensions, retirement benefits, disability benefits from either government or private sources, or Social Security survivor benefits are considered unearned income.

(3) **Supplemental Security Income (SSI).** SSI is considered unearned income.

(4) **Unemployment and workers' compensation.** Income from unemployment insurance benefits or workers' compensation is counted as unearned income.

(5) **Child support, court-ordered child care, and alimony.** Child support, child care payments, and alimony payments, whether court-ordered or voluntary, which are made directly to the household from non-household members are counted as unearned income. If a child care payment is paid directly to the child care provider, it is not considered income for the client. It is considered as an additional co-payment which must be met before OKDHS makes a subsidy payment to the provider. Any other payment made to a third party for a household expense must be considered as income when a court order directs that the payment be made to the household. Payments for medical support are excluded.

(6) **Veterans' compensation, pensions, or military allotments.** Annuities, pensions, disability compensation, military allotments, servicemen dependents' allowances, and similar payments are considered unearned income.

(7) **Contributions.** Appreciable contributions recurrently received in cash are considered unearned income except in instances where the contribution is not made directly to the recipient. To be appreciable, a contribution must exceed $30 per calendar quarter per individual.

(8) **Dividends, interest, minerals, and royalties.** Dividends, interest income, income from minerals, royalties, and ~~and~~ similar sources are considered unearned income. When income from these sources is received irregularly or in varied amounts, it is averaged over 12 months. Income from royalties is treated as unearned, self-employment income.

(9) **Lump sum payments.** Non-recurring lump sum payments which are from a countable income source are considered as income the month they are received. Money not expended within the month of receipt is considered as a resource. Recurring lump sum payments, including income from earnings, are averaged over the period they are intended to cover.

(10) ~~**Family Support Assistance Payment Program.** Family Support Assistance Payment Program payments paid to individuals by the Developmental Disabilities Services Division of OKDHS are considered unearned income.~~ **Title IV-E or State Adoption Subsidy.** Federally or state funded adoption subsidy payments are made to adoptive parents of children with special needs are considered as unearned income.

**340:40-7-12. Sources of excluded income**

Only the income listed in this Section is excluded in determining a household's eligibility for child care services. No other income is excluded.

(1) **Lump sum payments.** Both one-time and recurring lump sum payments are excluded as income unless they are specifically mentioned in OAC 340:40-7-11.

(2) **In-kind income.** In-kind income is defined as any gain or benefit which is not in the form of money payable directly to the household and is excluded.

(3) **Money received from the sale of property.** Money received from the sale of property such as stocks, bonds, a house, or a car is excluded. This exclusion does not apply if the person is engaged in the business of selling such property.

(4) **Bank or trust account withdrawals.** Money withdrawn from a bank or trust account is excluded as income even if used to meet current living expenses.

(5) **Capital gains.** The proceeds from the sale of capital goods or equipment is excluded.

(6) **Earnings of children.** Earnings of an individual 17 years of age and younger who is considered a child in the case is excluded as long as the child is attending school regularly. This exclusion continues to apply during temporary interruptions in school attendance due to semester or vacation breaks, provided the child's enrollment resumes following the break. Earnings of an 18 year old considered a child in a Temporary Assistance for Needy Families (TANF) benefit are also excluded if he or she is attending school regularly. See OAC 340:40-7-6(a)(7) and 340:40-7-11(c)(1).

(7) **Irregular income.** Any income received too infrequently or irregularly to be reasonably anticipated is not counted unless it is in excess of $30 per calendar quarter.

(8) **Reimbursements.** Reimbursements for past or future expenses to the extent they do not exceed actual expenses are excluded.

(9) **Tax refunds.** Federal or state income tax refunds, including the state and federal Earned Income Tax Credit (EITC), and advance payments of federal EITC are excluded.

(10) **Money received for third parties.** Money received and used for the care and maintenance of a third party ~~beneficiary~~ who is not a household member is excluded.

(11) **Loans.** All loans, including loans from private as well as commercial institutions, other than educational loans where repayment is deferred is excluded. Verification that the income is a loan is required.

(12) **Grants.** Grants obtained and used under conditions that preclude their use for current living costs is excluded.

(13) **Educational assistance.** All education grants, work-study, scholarships, and student loans are exempt if receipt is contingent upon the student regularly attending school.

(14) **Stipends.** Stipends paid to students participating in the Indian Vocational Education Program through the Carl D. Perkins Vocational and Applied Technology Education Act is excluded.

~~(15) **IV-E Adoption Subsidy.** Money received for payment of and reimbursement for expenses for the IV-E Adoption Subsidy program is excluded.~~

(~~16~~15) **Service Corps of Retired Executives (SCORE) and Active Corps of Executives (ACE).** Payment for supportive services or reimbursement of out-of-pocket expenses made to ~~individual~~ volunteers serving as foster grandparents, senior health aides, or senior companions, and to persons serving in SCORE and ACE is excluded.

(~~17~~16) **Government rent or housing subsidies.** Government rent or housing subsidies by government agencies which is received in-kind or in cash for rent, mortgage payments, or utilities is excluded.

(~~18~~17) **Foster care payments.** Foster care payments received for a foster child in state or tribal custody are excluded as income.

(~~19~~18) **Victims of Crime Act of 1984.** Payments made from the crime victims compensation program as amended in Section 1402 of the Victims of Crime Act of 1984 are excluded. [42 U.S.C. 10602]

(19) **Family Support Assistance Payment Program.** Family Support Assistance Payment Program payments

paid to individuals by the Developmental Disabilities Services Division of the Oklahoma Department of Human Services (OKDHS) are excluded as income.

(20) **Income excluded by federal law.** Income excluded by federal law is defined as:

(A) payments received under Title II of the Uniform Relocation Assistance and Real Property Acquisition Policy Act of 1970;

(B) payments received under the Alaska Natives Claims Settlement Act [P.L. 92-203, Sec. 21 (a)], under the Sac and Fox Indian Claims Agreement [P.L. 94-189], from the disposition of funds to the Grand River Band of Ottawa Indians [P.L. 94-540], by members of the Confederated Tribes of the Mescalero Reservation [P.L. 95-433], or under the Maine Indian Claims Settlement Act of 1980 to members of the Passamaquoddy and the Penobscot Nation [P.L. 96-420];

(C) any payment to volunteers under Title II, Retired and Senior Volunteer Program, Foster Grandparents and others, of the Domestic Volunteer Services Act of 1973 [P.L. 93-113] as amended. Payments under Title I of that Act, Volunteers in Service To America, University Year for Action, and Urban Crime Prevention Program, to volunteers are excluded only if the monthly amount, when converted to an hourly rate, is less than the State's minimum wage;

(D) income derived from submarginal land of the United States which is held in trust for certain Indian tribes [P.L. 94-114, Sec. 6];

(E) Indian payments, which include judgment funds or funds held in trust, distributed per capita by the Secretary of the Interior of the Bureau of Indian Affairs or distributed by the tribe subject to approval by the Secretary of the Interior. Also, any interest or investment income accrued on such funds while held in trust or any purchases made with judgment funds, trust funds, interest, or investment income accrued on such funds. Any income from mineral leases, from tribal businesses investments, and the like, as long as the payments are paid per capita. For purposes of this paragraph, per capita is defined as each tribal member receiving an equal amount. However, any interest or income derived from the principal or produced by purchases made with the funds after distribution is considered as any other income;

(F) income up to $2,000 per year received by individual Indians, which is derived from leases or other uses of individually-owned trust or restricted lands is not counted as income. The income exclusion applies to calendar years beginning January 1, 1994. Any remaining disbursements from the trust or restricted lands are considered as income;

(G) allowances, earnings, and payments received by a child(ren) in the household from a program funded by the Job Training and Partnership Act including Job Corps income;

(H) payments, allowances, or earnings to individuals participating in programs under Title I of the National and Community Service Trust Act of 1993. Title I includes three Acts: Serve-America, The Community Service, Schools and Service-Learning Act of 1990, the American Conservation and Youth Service Corps Act of 1990, and the National and Community Service Act. Most of the payments are made as a weekly stipend or for educational assistance. The Higher Education Service-Learning Program and the AmeriCorps Umbrella Program come under this Title. This includes Americorp income;

(I) payments or allowances made under any federal law for the purpose of energy assistance, Low Income Home Energy Assistance Program, and also utility payments and reimbursements made by the Department of Housing and Urban Development and the Farmers Home Administration;

(J) the amount of the mandatory salary reduction of military service personnel used to fund the G.I. Bill;

(K) all funds paid to individuals under the Community Service Employment Program under Title V. [P.L. 100-175] This program is authorized by the Older Americans Act. Each State and eight organizations receive some Title V funds. These organizations include:

(i) Green Thumb;
(ii) National Council on Aging;
(iii) National Council of Senior Citizens;
(iv) American Association of Retired Persons;
(v) U.S. Forest Service;
(vi) National Association for Spanish Speaking;
(vii) National Urban League; and
(viii) National Council on Black Aging;

(L) payments made from the Agent Orange Settlement Fund or any other fund established pursuant to the settlement In Re Agent Orange Product Liability Litigation, M.D.L. No. 381 (E.D.N.Y.);

(M) payments received under the Civil Liberties Act of 1988;

(N) payments made from the Radiation Exposure Compensation Trust Fund as compensation for injuries or deaths resulting from exposure to radiation from nuclear testing and uranium mining;

(O) payments for the fulfillment of a Plan for Achieving Self-Support under Title XVI of the Social Security Act;

(P) payments made to individuals because of their status as victims of Nazi persecution;

(Q) payments made for the Experimental Housing Allowance Program under Annual Contributions Contracts entered into prior to January 1, 1975, under Section 23 of the U.S. Housing Act of 1937 as amended;

(R) ~~allowances paid to a child(ren), including an adult child(ren), of a Vietnam veteran for any disability resulting from spina bifida suffered by such child(ren) made under Title IV of the Department~~

~~of Veteran Affairs and Housing and Urban Development, and Independent Agencies Appropriations Act of 1997 [P.L. 104-204, Section 1805(d)]~~ monetary allowances provided to certain children of Vietnam War veterans as described in 38 United States Code (USC) Chapter 18;

(S) federal major disaster and emergency assistance provided under the Disaster Relief Act of 1974, and comparable disaster assistance provided by states, local governments, and disaster assistance organizations;

(T) the value of the food stamp allotment under the Food Stamp Act of 1977; and

(U) the value of supplemental food assistance under the Child Nutrition Act of 1966 and the special food services program for children under the National School Lunch Act of 1970, both as amended by the Omnibus Budget Reconciliation Act of 1981.

**340:40-7-13. Computation of income**

(a) Any income that is received regularly but in amounts that vary, or income received irregularly, is averaged over a minimum of 30 days unless the client has received less than 30 days of representative income. This includes overtime pay, irregular child support, and other occasional increases or decreases in the monthly gross income. When income is received more often than once per month, the income is converted to a monthly amount.

(b) Income of the applicant or recipient is verified by the best available information. With new employment, ~~it is necessary to verify~~ the worker verifies the beginning date, date the first full paycheck is expected to be received, hourly rate, and anticipated number of hours per week.

(c) All earned and unearned income is added together to arrive at the gross income for the household.

(d) Once gross income is computed, ~~an earned income deduction is allowed for every person who is working and whose earnings are considered. A deduction is also given~~ the only allowable deduction from gross income is for the amount of any verified legally-binding child support payments made to someone outside the child care household.

*[OAR Docket #03-2096; filed 7-11-03]*

---

## TITLE 590. OKLAHOMA PUBLIC EMPLOYEES RETIREMENT SYSTEM CHAPTER 10. PUBLIC EMPLOYEES RETIREMENT SYSTEM

*[OAR Docket #03-3011]*

**RULEMAKING ACTION:**
EMERGENCY adoption
**RULES:**
Subchapter 1. General Provisions
590:10-1-14. Compensation for retirement purposes [NEW]
**AUTHORITY:**
Oklahoma Public Employees Retirement System Board of Trustees, pursuant to 74 O.S. §901
**DATES:**
**Public hearing:**
June 17, 2003
**Adoption:**
June 17, 2003
**Approved by Governor:**
June 19, 2003
**Effective:**
Immediately upon Governor's approval
**Expiration:**
Effective through July 14, 2004, unless superseded by another rule or disapproved by the legislature
**SUPERSEDED EMERGENCY ACTIONS:**
n/a
**INCORPORATIONS BY REFERENCE:**
n/a
**FINDING OF EMERGENCY:**
Promulgation of emergency rules necessary to implement House Bill 1660 and SB 1223 enacted during the 2002 regular legislative session. Emergency is found to exist in order to have changes implemented with the new fiscal year and to permit programming necessary for the CORE project.
**ANALYSIS:**
House Bill 1660 and SB 1223 each clarify the Board of Trustees' authority to define "compensation" for retirement purposes; and also grants rule-making authority. The new rule under Subchapter 1 defines the term "compensation" as "salary" and "wages" generally. The rule provides specific examples of payments which are and are not compensation for retirement purposes. The rule provides that the employer is responsible for deducting retirement contributions appropriately. It will be applicable for compensation earned on or after July 1, 2003.
**CONTACT PERSON:**
Lydia Lee (405) 858-6737

**PURSUANT TO THE ACTIONS DESCRIBED HEREIN, THE FOLLOWING EMERGENCY RULES ARE CONSIDERED PROMULGATED AND EFFECTIVE UPON APPROVAL BY THE GOVERNOR AS SET FORTH IN 75 O.S., SECTION 253(D):**

### SUBCHAPTER 1. GENERAL PROVISIONS

**590:10-1-14. Compensation for retirement purposes**

(a) Compensation for retirement purposes, as determined by the Board of Trustees, shall be limited to salary and wages as follows:

(1) "Salary" means a predetermined or fixed amount of cash remuneration that is made payable by the participating employer to the employee in exchange for services rendered personally by the employee for the participating employer but excluding any type of overtime payments paid to an employee for service rendered in excess of full-time;

(2) "Wages" means cash remuneration, dependent upon the hours of work, that is made payable by the participating employer to the employee in exchange for services rendered personally by the employee for the participating employer excluding any type of overtime payments paid to an employee for service rendered in excess of full-time.

(b) Subject to the limitations contained elsewhere in the retirement act or in these rules, salary and wages include, by way of example and not by limitation, the following:

(1) any longevity payments made to employees based upon a standardized plan which recognizes length of service to the employer,
(2) pay differential which is paid to employees in return for special or hazardous shifts or in return for additional training or duties,
(3) amounts deducted from the employee's paycheck for retirement and deferred compensation contributions,
(4) pre-tax cafeteria purchases which are not funded by the employer or the employee's benefit allowance,
(5) performance, skill, or mission critical based pay adjustments.

(c) Any payments made by an employer to an employee which do not meet the definition of salary or wages as set forth in subsection (a) of this rule are not to be considered compensation for retirement purposes, including but not limited to the following:
(1) payments which are for reimbursement for expenses incurred by the employee,
(2) payments for maintenance or allowances, including, but not limited to, uniform allowances, clothing allowances, or housing allowances,
(3) any payments or amounts made available to an employee for insurance benefits or benefits allowances, including any amounts paid directly to the employee,
(4) illegal payments made to an employee by an employer,
(5) payments made in error to an employee,
(6) payments made by the employer for services rendered by the employee, which services are not part of the employee's job duties and responsibilities of his or her job position with the participating employer,
(7) payments in the form of tips or commissions paid to an employee in the course of his or her employment,
(8) payments made to other than the employee by the participating employer which are not deducted from the employee's paycheck,
(9) workers compensation benefit payments,
(10) any payments made by a participating employer to a non-employee, such as compensation to Board or Commission members,
(11) payments made in anticipation of employment, such as signing bonuses,
(12) any payments which are excluded from retirement compensation by law.

(d) The provisions of this rule shall be effective for all compensation paid for service by an employee to the employer on or after July 1, 2003. It shall be the responsibility of the employer to ensure that the appropriate retirement contributions are deducted or paid correctly and in accordance with this rule.

(e) The compensation of each member as set forth above shall be used for calculating the monthly retirement compensation for each retiring member. Provided, however, the calculation shall include the compensation prior to July 1, 2003, for which retirement contributions were withheld in determining the final average compensation, if applicable, for the highest three (3) years of the last ten years of service.

*[OAR Docket #03-3011; filed 7-21-03]*

---

## TITLE 590. OKLAHOMA PUBLIC EMPLOYEES RETIREMENT SYSTEM CHAPTER 15. UNIFORM RETIREMENT SYSTEM FOR JUSTICES AND JUDGES

*[OAR Docket #03-3012]*

**RULEMAKING ACTION:**
EMERGENCY adoption
**RULES:**
590:15-1-16. Longevity and other annual lump-sum payments [REVOKED]
**AUTHORITY:**
Oklahoma Public Employees Retirement System Board of Trustees, pursuant to 20 O.S. §1101.1; §1103; §1103.1; §1103.3; §1104
**DATES:**
**Public hearing:**
June 17, 2003
**Adoption:**
June 17, 2003
**Approved by Governor:**
June 19, 2003
**Effective:**
Immediately upon Governor's approval
**Expiration:**
Effective through July 14, 2004, unless superseded by another rule or disapproved by the legislature
**SUPERSEDED EMERGENCY ACTIONS:**
n/a
**INCORPORATIONS BY REFERENCE:**
n/a
**FINDING OF EMERGENCY:**
Promulgation of emergency rules necessary to revoke rule providing for inclusion of longevity in retirement calculation. Statutes limit this to "salary" and salary is set by law. Emergency is found to exist in order to have changes implemented with the new fiscal year and to permit programming necessary for the CORE project.
**ANALYSIS:**
The proposed revocation of the rule under 590:15-1-16 excludes longevity from "salary" in accordance with the URSJJ plan provisions. 20 O.S. § 1103 and 1104 limit contributions and benefits to "salary." Salary for all judges and justices are set by statute. Therefore, to properly determine retirement benefits in accordance with state law, all other forms of compensation including longevity payments are excluded. The new rule will be applicable for all members for salary earned on or after July 1, 2003.
**CONTACT PERSON:**
Lydia Lee (405) 858-6737

**PURSUANT TO THE ACTIONS DESCRIBED HEREIN, THE FOLLOWING EMERGENCY RULES ARE CONSIDERED PROMULGATED AND EFFECTIVE UPON APPROVAL BY THE GOVERNOR AS SET FORTH IN 75 O.S., SECTION 253(D):**

### 590:15-1-16. Longevity and other annual lump-sum payments [REVOKED]

~~(a) Only the three (3) highest annual longevity payments received during the last three years of salary (thirty-six months) will be added into the sum used in computing the final average compensation. If a retiring member is scheduled to receive a~~

~~prorated longevity payment at or near the effective date of retirement, the prorated longevity payments will be used only in the amount actually paid and if it is one of the three highest longevity payments.~~

~~(b) Other lump sum annual payments that are included as compensation for retirement purposes, shall be averaged over the previous twelve (12) months of salary immediately preceding the month of payment for use in computing the final average compensation. These lump sum payments include those which are paid on an annual basis at the discretion of the employer.~~

*[OAR Docket #03-3012; filed 7-21-03]*

## TITLE 710. OKLAHOMA TAX COMMISSION
## CHAPTER 50. INCOME

*[OAR Docket #03-2098]*

**RULEMAKING ACTION:**
EMERGENCY adoption
**RULES:**
Subchapter 15. Oklahoma Taxable Income
Part 1. General Provisions
710:50-15-2. Application of the Oklahoma Individual Income Tax to Native Americans serving in the Armed Forces [NEW]
**AUTHORITY:**
Oklahoma Tax Commission; 68 O.S. § 203
**DATES:**
**Adoption:**
May 20, 2003 (Commission Order No. 2003-05-20-06)
**Approved by Governor:**
June 26, 2003
**Effective:**
Immediately upon Governor's approval.
**Expiration:**
Effective through July 14, 2004, unless superseded by another rule or disapproved by the Legislature.
**SUPERSEDED EMERGENCY ACTIONS:**
n/a
**INCORPORATIONS BY REFERENCE:**
n/a
**FINDING OF EMERGENCY:**
A compelling public interest was determined to exist in order to set a policy with respect to the many Native American Oklahomans who are currently serving or will soon begin active service with the Armed Forces of the United States.
**ANALYSIS:**
This rule explicitly exempts military income earned by Native Americans who resided within Indian Country at the time of entering the Armed Forces of the United States.
**CONTACT PERSON:**
Carolyn Swifthurst, Tax Policy Analyst, Tax Policy and Research Division, Oklahoma Tax Commission, 2501 North Lincoln Boulevard, Oklahoma City, OK 73194, 405-521-3133.

**PURSUANT TO THE ACTIONS DESCRIBED HEREIN, THE FOLLOWING EMERGENCY RULES ARE CONSIDERED PROMULGATED AND EFFECTIVE UPON APPROVAL BY THE GOVERNOR, AS SET FORTH IN 75 O.S. SECTION 253(D):**

## SUBCHAPTER 15. OKLAHOMA TAXABLE INCOME

## PART 1. GENERAL PROVISIONS

**710:50-15-2. Application of the Oklahoma Individual Income Tax to Native Americans serving in the Armed Forces**

The income of an enrolled member of a federally recognized Indian tribe shall be exempt from Oklahoma individual income tax when the income is compensation paid to an active member of the Armed Forces of the United States, if the member was residing within his tribe's "Indian Country" at the time of entering the Armed Forces of the United States, and the member has not elected to abandon such residence.

*[OAR Docket #03-2098; filed 7-15-03]*

# Permanent Final Adoptions

An agency may promulgate rules on a permanent basis upon "final adoption" of the proposed new, amended, or revoked rules. "Final adoption" occurs upon approval by the Governor and the Legislature, or upon enactment of a joint resolution of approval by the Legislature. Before proposed permanent rules can be reviewed and approved/disapproved by the Governor and the Legislature, the agency must provide the public an opportunity for input by publishing a Notice of Rulemaking Intent in the *Register.*

Permanent rules are effective ten days after publication in the *Register*, or on a later date specified by the agency in the preamble of the permanent rule document.

Permanent rules are published in the *Oklahoma Administrative Code*, along with a source note entry that references the *Register* publication of the permanent action.

*For additional information on the permanent rulemaking process, see 75 O.S., Sections 303, 303.1, 303.2, 308 and 308.1.*

## TITLE 152. COMMUNITY HOSPITALS AUTHORITY
## CHAPTER 1. GENERAL AGENCY RULES

*[OAR Docket #03-2098A]*

**RULEMAKING ACTION:**
Permanent final adoption
**RULES:**
Subchapter 1. Purpose and Organization [NEW]
152:1-1-1 [NEW]
152:1-1-2 [RESERVED]
152:1-1-3 [RESERVED]
152:1-1-4 through 162:1-1-6 [NEW]
Subchapter 3. Meetings [NEW]
152:1-3-1 through 152:1-3-4 [NEW]
152:1-3-5 [RESERVED]
152:1-3-6 [NEW]
Subchapter 5. General Course and Method of Operations [NEW]
152:1-5-1 through 152:1-5-5 [NEW]
Subchapter 7. Rulemaking Procedures [NEW]
152:1-7-1 through 152:1-7-5 [NEW]
**AUTHORITY:**
Community Hospitals Authority; Title 63, Oklahoma Statutes, Section 3240.6
**DATES:**
**Comment period:**
March 3 to April 2, 2003
**Public hearing:**
April 17, 2003
**Adoption:**
May 12, 2003
**Submitted to Governor:**
May 16, 2003
**Submitted to House:**
May 16, 2003
**Submitted to Senate:**
May 16, 2003
**Gubernatorial approval:**
June 19, 2003
**Legislative approval:**
Approved May 28, 2003 by HCR 1036, waiving the Legislature's thirty legislative-day review period
**Final adoption:**
June 19. 2003
**Effective:**
August 25, 2003
**SUPERSEDED EMERGENCY ACTIONS:**
**Superseded rules:**
Subchapter 1. Purpose and Organization [NEW]
152:1-1-1 [NEW]
152:1-1-2 [RESERVED]
152:1-1-3 [RESERVED]
152:1-1-4 through 162:1-1-6 [NEW]
Subchapter 3. Meetings [NEW]
152:1-3-1 through 152:1-3-4 [NEW]
152:1-3-6 [NEW]
Subchapter 5. General Course and Method of Operations [NEW]
152:1-5-1 through 152:1-5-5 [NEW]
Subchapter 7. Rulemaking Procedures [NEW]
152:1-7-1 through 152:1-7-5 [NEW]
**Gubernatorial approval:**
December 17, 2002
**Register publication:**
20 Ok Reg 466
**Docket number:**
03-91
**INCORPORATIONS BY REFERENCE:**
n/a
**ANALYSIS:**
These are general agency rules that describe general operations and procedures and allow the agency to call and conduct meetings, elect officers, and other operational features.
**CONTACT PERSON:**
Russ Roach, c/o CHA at the above address or at (918) 640-8618 (cell) or (918) 743-1935

**PURSUANT TO THE ACTIONS DESCRIBED HEREIN, THE FOLLOWING RULES ARE CONSIDERED FINALLY ADOPTED AS SET FORTH IN 75 O.S., SECTION 308.1(A), WITH AN EFFECTIVE DATE OF AUGUST 25, 2003:**

### SUBCHAPTER 1. PURPOSE AND ORGANIZATION

**152:1-1-1. Purpose**

(a) The rules of this Chapter are adopted to simplify procedure, avoid unnecessary delays, save expenses, and facilitate the administration of the Community Hospital Authority (63 O.S. §§ 3240.1 *et seq* ). These rules also implement and are cumulative to the Administrative Procedures Act, 75 O.S. 1991, Section 250 et seq., as amended ("APA").

(b) This chapter shall be given a fair and impartial construction.

(c) Citations herein to laws and rules shall include laws and rules amendatory thereto.

**152:1-1-2. Definitions [RESERVED]**

**152:1-1-3. [RESERVED]**

**152:1-1-4. Commission officers**

(a) The Authority shall elect from its membership a Chairman and a Vice-Chairman.

(b) Officers of the Authority shall be elected annually, at the last meeting of each calendar year, In the event an officer's position becomes vacant, a replacement shall be elected to complete the unexpired term at the following meeting of the Authority.
(c) The Chairman shall preside over all Authority meetings and rule on all questions of procedure and order. He shall have the power, in the exercise of his discretion, to call special meetings of the Authority, and shall call a special meeting when requested by four members, in writing, to do so. The Chairman shall determine the agenda of each meeting.
(d) The Vice-Chairman shall assume the duties of the Chairman during the Chairman's absence or incapacity.
(e) The Executive Director shall be responsible for insuring the keeping of the minutes of Authority meetings, and have such other duties as the Authority may, from time to time, designate.

**152:1-1-5. Authority powers and duties**
The Authority shall exercise all powers expressly or impliedly granted to it by statute.

**152:1-1-6. Severability**
The provisions of this Chapter are severable and the repeal, amendment, or invalidity of any provision hereof shall not serve to repeal or invalidate the remaining provisions of these rules.

## SUBCHAPTER 3. MEETINGS

**152:1-3-1. Meetings**
The Authority shall hold such meetings, as it deems necessary, with a regular meeting once during each quarter of the calendar year. Special meetings may be called by the Chairman at his discretion, and shall be called when three (3) members of the Authority request of the Chairman, in writing, that such a meeting be called.

**152:1-3-2. Location**
The Authority may convene at any location within the state of Oklahoma as the Authority may specify; provided, that unless otherwise specified, meetings shall be conducted at a room provided for that purpose at the St. John's Medical Center offices at 1924 South Utica, Tulsa, Oklahoma.

**152:1-3-3. Opening Meeting Act**
All meetings of the Authority shall be conducted in compliance with the applicable provisions of the Oklahoma Open Meeting Act, 25 O.S. 1991, §301 et seq., and laws amendatory thereto.

**152:1-3-4. Agenda**
(a) The agenda of the Authority's meetings shall be determined by the Chairman, and a copy thereof sent to each member before the meeting.
(b) The agenda of the Authority's special meetings shall be determined by the Chairman, and copies thereof shall be sent to each member prior to the meeting. Only those items appearing on the agenda of such special meetings shall be considered by the Authority.

**152:1-3-5. [RESERVED]**

**152:1-3-6. Robert's Rules of Order**
All meetings of the Authority shall be conducted in accordance with Robert's Rules of Order except as modified herein or by statute.

## SUBCHAPTER 5. GENERAL COURSE AND METHOD OF OPERATIONS

**152:1-5-1. Principal office**
The principal office of the Community Hospitals Authority is at St. John's Medical Center, 1924 South Utica, Tulsa, Oklahoma, 74120.

**152:1-5-2. Office hours**
Office hours shall be from 8:00 a.m. to 4:30 p.m., unless otherwise designated by the Executive Director, Monday through Friday inclusive, excepting legal holidays established by statute or proclamation of the Governor.

**152:1-5-3. Exercise of powers**
The Authority may exercise its official powers at any location in the State of Oklahoma.

**152:1-5-4. Writing to the Authority**
Every communication in writing to the Authority shall be addressed to the Executive Director of the Authority at the principal office designated above.

**152:1-5-5. Records**
(a) **Rules and policy.** All rules shall ve available at the principal office during regular business hours.
(b) **Proceedings and forms.** All final orders, decisions, and opinions, and all forms, applications, and instructions which are required to be completed in applying for a license or permit, shall be available within the offices of the Authority during regular business hours.
(c) **Copies.** Copies of all official records of the Authority not privileged from disclosure by law shall be available for inspection at the principal office during regular office hours. Copies of such records, certified by the Executive Director or

his designee, may be made, and the expense of such copies shall be paid by the person requesting the same.

## SUBCHAPTER 7. RULEMAKING PROCEDURES

**152:1-7-1. Rulemaking**

The Authority may adopt, amend, or repeal a rule of its own initiative, at the request of the Executive Director, or upon a petition filed under the APA.

**152:1-7-2. Petitions for rule making**

(a) **Form.** Any interested person may request the Authority to adopt, amendment, or repeal a rule. A request shall be in the form of a letter.

(b) **Form and consent.** All such requests shall be in writing, and be filed with the Executive Director at the principal office. The requests shall state, clearly and concisely, all matters pertaining to the requested action and the reasons for the request.

(c) **Consideration of requests.** Requests concerning rules will be considered by the Authority at its next regularly scheduled meeting or at a special meeting. The Authority may, in its discretion, postpone the discussion and ruling on the request until the next regular or special meeting and shall notify all parties of such postponement. Upon hearing the requests, the Authority will notify the requester whether the Authority will consider rule-making action.

**152:1-7-3. Rulemaking hearings**

(a) The Executive Director may conduct hearings on proposed rules, amendments to or repeal of rule, and shall conduct such hearings when so directed by the Authority.

(b) **Location of hearings.** Unless otherwise specified, and stated in the notice of hearing, all hearings shall be conducted in the offices of the Authority.

(c) **Interested persons.** Any person who is interested or affected by a proposed action may appear at the hearing. An appearance may be made individually, or by an attorney.

**152:1-7-4. Opportunity to submit data, views and arguments**

Prior to the adoption, amendment, or repeal of a rule, the Authority shall afford any interested persona a reasonable opportunity to submit data, vies, and arguments, either oral or written, concerning such proposed action.

**152:1-7-5. Emergency rules**

The Authority may adopt an emergency rule without adherence to the above rules concerning notice and hearing. All emergency rules, however, must be adopted in accord with the Administrative Procedures Act, and shall be effective as specified in the Act.

*[OAR Docket #03-2098A; filed 7-16-03]*

# TITLE 460. DEPARTMENT OF MINES CHAPTER 2. RULES OF PRACTICE AND PROCEDURE FOR THE COAL RECLAMATION ACT OF 1979

*[OAR Docket #03-3019]*

**RULEMAKING ACTION:**
PERMANENT final adoption
**RULES:**
Subchapter 9. Review of Section 776 and 777 Notices of Violations and Orders of Cessation
460:2-9-4 [AMENDED]
**AUTHORITY:**
45 O.S. Section 1.5, and 45 O.S. Section 789, Oklahoma Mining Commission
**DATES:**
**Comment period:**
February 3, 2003 through March 5, 2003
**Public hearing:**
March 10, 2003 and March 11, 2003
**Adoption:**
March 20, 2003
**Submitted to Governor:**
March 31, 2003
**Submitted to House:**
March 31, 2003
**Submitted to Senate:**
March 31, 2003
**Gubernatorial approval:**
May 15, 2003
**Legislative approval:**
Failure of the Legislature to disapprove the rules resulted in final approval on May 22, 2003
**Final adoption:**
May 22, 2003
**Effective date:**
August 26, 2003
**SUPERSEDED EMERGENCY ACTIONS:**
N/A
**INCORPORATIONS BY REFERENCE:**
N/A
**ANALYSIS:**
For clarification purposes and as a result of previous litigation, the Department is adding language indicating that a Notice of Violation issued by the Department is a final agency action, decision or order, upon the recipient's failure to invoke administrative review of such Notice pursuant to Subchapter 7 or Subchapter 9.
**CONTACT PERSON:**
Cathy Frank, Legal Officer, Department Of Mines Wagoner Field Office, Rt, 4, Box 550, Wagoner, OK, 74467, (918)485-3999

**PURSUANT TO THE ACTIONS DESCRIBED HEREIN THE FOLLOWING RULES ARE CONSIDERED FINALLY ADOPTED AS SET FORTH IN 75 O.S., SECTION 308.1(A), WITH AN EFFECTIVE DATE OF AUGUST 26, 2003:**

## SUBCHAPTER 9. REVIEW OF SECTION 776 AND 777 NOTICES OF VIOLATIONS AND ORDERS OF CESSATION

**460:2-9-4. Effect of failure to file**

Failure to file an application for review of a notice of violation or order of cessation shall not preclude challenging the fact of the violation during a civil penalty proceeding. Failure to

file an application for review of a notice of violation pursuant to this Subchapter and failure to challenge the fact of the violation during a civil penalty proceeding shall result in the notice of violation becoming a final order of the Department.

*[OAR Docket #03-3019; filed 7-24-03]*

## TITLE 460. DEPARTMENT OF MINES CHAPTER 10. NON-COAL RULES AND REGULATIONS

*[OAR Docket #03-3020]*

**RULEMAKING ACTION:**
PERMANENT final adoption
**RULES:**
Subchapter 9. General Requirements For Permits And Applications
460:10-9-5 [AMENDED]
Subchapter 15. Non-Coal Mining Permit Applications Requirements For Reclamation And Operations Plan
460:10-15-3 [AMENDED]
**AUTHORITY:**
45 O.S. 1986, Section 1.5, 45 O.S. 1981, Section 732, Oklahoma Mining Commission
**DATES:**
**Comment period:**
February 3, 2003 through March 5, 2003
**Public hearing:**
March 11, 2003
**Adoption:**
March 20, 2003
**Submitted to Governor:**
March 31, 2003
**Submitted to House:**
March 31, 2003
**Submitted to Senate:**
March 31, 2003
**Gubernatorial approval:**
May 15, 2003
**Legislative approval:**
Failure of the Legislature to disapprove the rules resulted in final approval on May 22, 2003
**Final adoption:**
May 22, 2003
**Effective date:**
August 26, 2003
**SUPERSEDED EMERGENCY ACTIONS:**
N/A
**INCORPORATIONS BY REFERENCE:**
N/A
**ANALYSIS:**
Due to a previous administrative ruling the required 45 day advanced filing, before the expiration date, for permit renewals is being eliminated. This change to 460:10-9-5 allowing for the renewal application to be filed up to the expiration date. In 460:10-15-3 (a) and 460:10-15-3(b) the amendment is to add a s to tailing in (a) and to the word find in (b). The amendment to 460;10-5-3 is to add a (c) which required that all reclamation plans or plans amended after August 1, 2003, for placement of Coal Combustion By-Products (CCB) in active or inactive mines to meet the Coal Combustion By-Product Standards contained within OAC 460:30.
**CONTACT PERSON:**
Cathy Frank, Legal Officer, Department Of Mines Wagoner Field Office, Rt, 4, Box 550, Wagoner, OK, 74467, (918)485-3999

**PURSUANT TO THE ACTIONS DESCRIBED HEREIN THE FOLLOWING RULES ARE CONSIDERED FINALLY ADOPTED AS SET FORTH IN 75 O.S., SECTION 308.1 (A), WITH AN EFFECTIVE DATE OF AUGUST 26, 2003:**

### SUBCHAPTER 9. GENERAL REQUIREMENTS FOR PERMITS AND APPLICATIONS

**460:10-9-5. Permit application filing deadlines**

(a) **General.** Each person who conducts or expects to conduct new non-coa surface mining and reclamation operations shall file a complete application for a permit for those operations within a time established by the Department as sufficient to all for review of the application.

(b) **Renewal of valid permits.** An application for renewal of a permit shall be filed with the Department ~~at least 45 days~~ before the expiration of the permit involved.

(c) **Revision of permits.** Any application for revision of a permit shall be filed with the Department before the date on which the permittee expects to revise non-coal surface mining or reclamation operations. The Department shall determine the time required for review of the application and public participation in the process of review.

### SUBCHAPTER 15. NON-COAL MINING PERMIT APPLICATIONS REQUIREMENTS FOR RECLAMATION AND OPERATIONS PLAN

**460:10-15-3. Reclamation plan**

(a) The reclamation plan shall, to the extent applicable, include:

(1) The planned land use or uses to which the affected lands will be rehabilitated;

(2) The methods to prevent or eliminate conditions that will be hazardous to animal or fish life in or adjacent to the affected land;

(3) The methods for rehabilitating settling ponds;

(4) The method for the control of contaminants and disposal of the refuse including ~~tailing~~ tailings;

(5) The measure to provide safety to persons and adjoining property in all excavations;

(6) A plan for the permanent revegetation, reforestation or other surface treatment of the affected land using accepted and recommended practices. The revegetation plan shall include but not be limited to the following:

(A) Planned soil rests;

(B) Site preparation and fertilization;

(C) Seed or plant selection;

(D) Rate of seeding or amount of planting per acre.

(7) A time schedule of reclamation activities, particularly those relating to Best
Management Practices for the sediment and erosion control which shall be keyed to the maps required by this Chapter;

(8) In addition to the required Location Maps, a reclamation map shall be submitted with the mining permit

application which shall show, to the extent applicable, the following:

(A) The outline of the proposed final limits of the excavation, during the number of years for which the permit is requested;

(B) The outline of the tailing disposal area;

(C) The outline of the disposal area for the spoil and refuse area;

(D) The approximate location of any impoundment or water body which will remain upon final reclamation;

(E) The approximate locations of access roads, haul roads, or ramps which Will remain upon final reclamation;

(F) The proposed location of ditches to provide for drainage. The location of diversions, terraces, or other Best Management Practices to be used for preventing or controlling erosion and off-site siltation;

(G) The boundary of the permitted area;

(H) The boundaries of the affected area for the anticipated life of the mine;

(I) The boundaries of the 100-year floodplain, where appropriate.

(b) The Department shall be authorized to approve a reclamation plan despite the
fact that such plan does not provide for reclamation treatment for every portion of the affected land, where the Department ~~find~~ finds that because of special conditions such treatment would not be feasible for particular areas and that the plan takes all practical steps to minimize the extent of such areas.

(c) All reclamation plans, or amended existing plans submitted after August 1, 2003,
for the placement of Coal Combustion By-products (CCB) in active or inactive mines must meet the Coal Combustion By-product Standards contained within OAC 460:30.

*[OAR Docket #03-3020; filed 7-24-03]*

## TITLE 460. DEPARTMENT OF MINES CHAPTER 20. THE PERMANENT REGULATIONS GOVERNING THE COAL RECLAMATION ACT OF 1979

*[OAR Docket #03-3021]*

**RULEMAKING ACTION:**
PERMANENT final adoption
**RULES:**
Subchapter 33. Requirements for Permits for Special Categories of Mining
460:20-33-12. Lands eligible for remining [AMENDED]
**AUTHORITY:**
45 O.S. Section 1.5, and 45 O.S. Section 789, Oklahoma Mining Commission
**DATES:**
**Comment period:**
February 3, 2003 through March 5, 2003
**Public hearing:**
March 10, 2003 and March 11, 2003
**Adoption:**
March 20, 2003
**Submitted to Governor:**
March 31, 2003
**Submitted to House:**
March 31, 2003
**Submitted to Senate:**
March 31, 2003
**Gubernatorial approval:**
May 15, 2003
**Legislative approval:**
Failure of the Legislature to disapprove the rules resulted in final approval on May 22, 2003
**Final adoption:**
May 22, 2003
**Effective date:**
August 26, 2003
**SUPERSEDED EMERGENCY ACTIONS:**
N/A
**INCORPORATIONS BY REFERENCE:**
N/A
**ANALYSIS:**
This amendment consists of the correction of certain typographical and cross section reference errors that the Office of Surface Mining, the Department's Federal oversight body, is requiring the Department correct. This amendment is located within 460:20-33-12 and eliminates the wording "this Subchapter" and adds "Subchapters 13 through 33 that are". Therefore, the specific applicable Subchapters are listed as requested by the Office of Surface Mining.
**CONTACT PERSON:**
Cathy Frank, Legal Officer, Department Of Mines Wagoner Field Office, Rt, 4, Box 550, Wagoner, OK, 74467, (918)485-3999

**PURSUANT TO THE ACTIONS DESCRIBED HEREIN THE FOLLOWING RULES ARE CONSIDERED FINALLY ADOPTED AS SET FORTH IN 75 O.S., SECTION 308.1 (A), WITH AN EFFECTIVE DATE OF AUGUST 26, 2003:**

### SUBCHAPTER 33. REQUIREMENTS FOR PERMITS FOR SPECIAL CATEGORIES OF MINING

**460:20-33-12. Lands eligible for remining**

(a) This section contains permitting requirements to implement Section 460:20-15-6(b)(4). Any person who submits a permit application to conduct a surface coal mining operation on lands eligible for remining must comply with this Section.

(b) Any application for a permit under this Section shall be made according to all requirements of ~~this Subchapter~~ Subchapters 13 through 33 that are applicable to coal mining and reclamation operations. In addition, the application shall:

(1) To the extent not otherwise addressed in the permit application, identify potential environmental and safety problems related to prior mining activities at the site and that could be reasonably anticipated to occur. This identification shall be based on due diligence investigation which shall include visual observations at the site, a record review of past mining at the site, and environmental sampling tailored to current site conditions.

(2) With regard to potential environmental and safety problems referred to in paragraph (b)(1) of this Section, describe the mitigative measures that will be taken to ensure that the applicable reclamation requirements of the regulatory program can be met.

(c) The requirements of this Section shall not apply after September 30, 2004.

*[OAR Docket #03-3021; filed 7-24-03]*

## TITLE 460. DEPARTMENT OF MINES CHAPTER 25. OKLAHOMA EXPLOSIVES AND BLASTING REGULATIONS

*[OAR Docket #03-3022]*

**RULEMAKING ACTION:**
PERMANENT final adoption
**RULES:**
Subchapter 9. Permit Revisions and Renewals
460:25-9-5 [AMENDED]
Subchapter 10. Permit Exemptions
460:25-10-9 [AMENDED]
460:25-10-10 [AMENDED]
460:25-10-12 [AMENDED]
**AUTHORITY:**
63 O.S. Section 123.1 et seq., 45 O.S. Section 1.5, Oklahoma Mining Commission
**DATES:**
**Comment period:**
February 3, 2003 through March 5, 2003
**Public hearing:**
March 10, 2003 and March 11, 2003
**Adoption:**
March 20, 2003
**Submitted to Governor:**
March 31, 2003
**Submitted to House:**
March 31, 2003
**Submitted to Senate:**
March 31, 2003
**Gubernatorial approval:**
May 15, 2003
**Legislative approval:**
Failure of the Legislature to disapprove the rules resulted in final approval on May 22, 2003
**Final adoption:**
May 22, 2003
**Effective date:**
August 26, 2003
**SUPERSEDED EMERGENCY ACTIONS:**
N/A
**INCORPORATIONS BY REFERENCE:**
N/A
**ANALYSIS:**
In 460:25-9-5 (a) a s is being added to the word renewal and in (b) the requirement that a renewal application be filed a minimum of 45 days prior to the permits expiration date is being eliminated because it cuts into the actual term of the permit. It undercuts the term by 45 days. The amendment to 460:25-10-9 is the addition of the exact amount, twenty-five dollars, after stating that the Permit Exemption application must be accompanied by a fee. In 460:25-10-10, a (c) is being added stating that the Department will not issue a permit exemption to any persons convicted of a felony. In 460:25-10-12, the requirement that an average of one inspection per year on all affidavit for Permit Exemptions is being changed to "periodic inspections".
**CONTACT PERSON:**
Cathy Frank, Legal Officer, Department Of Mines Wagoner Field Office, Rt, 4, Box 550, Wagoner, OK, 74467, (918)485-3999

**PURSUANT TO THE ACTIONS DESCRIBED HEREIN THE FOLLOWING RULES ARE CONSIDERED FINALLY ADOPTED AS SET FORTH IN 75 O.S., SECTION 308.1 (A), WITH AN EFFECTIVE DATE OF AUGUST 26, 2003:**

### SUBCHAPTER 9. PERMIT REVISIONS AND RENEWALS

**460:25-9-5. Permit renewals**

(a) **General requirements.** Any valid, existing permit issued pursuant to a regulatory program shall carry with it the right of successive renewal(s) upon the expiration of the term of the permit, in accordance with Subchapter 3 of this Chapter. Successive renewal shall be available only for those areas which were specifically approved by the Department on the application for the existing permit and within the boundaries of the permit.

(b) **Completed applications.** Complete application for renewals of a permit shall be made ~~a minimum of 45 days~~ prior to the date of expiration. Renewal applications shall contain, at a minimum, information approved on the original permit with any changes.

(c) **Term.** Any permit renewal shall be for a term of the permit not to exceed one year from the date of issuance.

(d) **Approval ~~of~~ or denial.** The Department shall, upon the basis for a complete application for renewal and completion of all procedures required, either approve or deny said application.

### SUBCHAPTER 10. PERMIT EXEMPTIONS

**460:25-10-9. Permit Exemption Fees**

Each Permit Exemption Application for the use of explosives or blasting agent shall be accompanied by a fee in the amount of twenty five dollars.

**460:25-10-10. Permit Exemption approval or denial actions**

(a) The Department shall approve, require modifications of, or deny applications for permit exemptions on the basis of:

(1) Complete applications for permit exemption thereof; and

(2) Processing and review of applications as required by this Subchapter.

(b) The Department shall take action within 30 days after the receipt by the Department of
the complete application.

(c) The Department shall not issue an exemption to any persons convicted of a felony.

**460:25-10-12. Inspections for compliance**

The Department may conduct ~~on an average of at least one inspection a year~~ periodic inspections on all issued Affidavit for Permit Exemptions. Additional inspections may be ordered for just cause by the Director of the Department of Mines or his designees.

*[OAR Docket #03-3022; filed 7-24-03]*

# TITLE 460. DEPARTMENT OF MINES CHAPTER 30. COAL COMBUSTION BY-PRODUCT STANDARDS

*[OAR Docket #03-3023]*

**RULEMAKING ACTION:**
PERMANENT final adoption
**RULES:**
Chapter 30. Coal Combustion By-Products Standards [NEW]
**AUTHORITY:**
45 O.S. Sections 1.5, 732, and 940; Oklahoma Mining Commission
**DATES:**
**Comment period:**
February 3, 2003 through March 5, 2003
**Public hearing:**
March 11, 2003
**Adoption:**
March 20, 2003
**Submitted to Governor:**
March 31, 2003
**Submitted to House:**
March 31, 2003
**Submitted to Senate:**
March 31, 2003
**Gubernatorial approval:**
May 15, 2003
**Legislative approval:**
Failure of the Legislature to disapprove the rules resulted in final approval on May 22, 2003
**Final adoption:**
May 22, 2003
**Effective date:**
August 26, 2003
**SUPERSEDED EMERGENCY ACTIONS:**
N/A
**INCORPORATIONS BY REFERENCE:**
N/A
**ANALYSIS:**
Pursuant to the authority and requirements contained in 45 O.S. Sections 732 and 940, the Department is required to regulate the placement of coal combustion by-products in active or inactive coal or non-coal mines. This new Chapter establishes the procedures for performance, bonding, reclamation, and inspection and enforcement standards that must be complied in obtaining, maintaining, and receiving Departmental approval for by-product placement and eventual bond release bond.
**CONTACT PERSON:**
Cathy Frank, Legal Officer, Department of Mines Wagoner Field Office, Rt 4, Box 550,Wagoner, OK 74467; (918) 485 3999

**PURSUANT TO THE ACTIONS DESCRIBED HEREIN THE FOLLOWING RULES ARE CONSIDERED FINALLY ADOPTED AS SET FORTH IN 75 O.S., SECTION 308.1(A), WITH AN EFFECTIVE DATE OF AUGUST 26, 2003:**

## SUBCHAPTER 1. GENERAL REQUIREMENTS

### 460:30-1-1. Scope

This Subchapter sets forth the requirements for mining operations which include regulation of Coal Combustion By-products (CCB) placed in active or inactive coal or non-coal mines under 45 O.S. Sec. 940.

### 460:30-1-2. Responsibility

The Department shall be responsible for the regulation of placement of CCB in active or inactive mines. It is the responsibility of a permit applicant to provide the Department with all of the information required by this Chapter.

### 460:30-1-3. Definitions

All of the definitions contained within OAC 460:10 and OAC 460:20 shall be applicable to this Chapter. In addition, the following terms used in this Chapter shall have the following meanings, unless otherwise defined:

**"Artesian waters"** means ground water under sufficient pressure to force the water above surface level when a sufficient conduit is present.

**"Ash"** means the residue left over from the combustion of bituminous, anthracite, or lignite coal as part of the process used to generate electrical energy.

**"Cement Kiln Dust" (CKD)** means the residue recovered from the combustion of bituminous, anthracite, or lignite coal along with various alternate fuels as part of the process used to produce cement.

**"Coal Combustion By-products" (CCB)** means ash and cement kiln dust.

**"Cover"** means earthen materials used to temporarily or permanently cover CCB.

**"Intermediate cover"** means the application of earthen material, water, or other substance approved by the Department during active CCB placement operations to stabilize exposed CCB to arrest the formation of fugitive dust.

**"pH"** means the indication of the hydrogen ion concentration of a solution.

**"Placement"** means the propitious deposition of CCB in a location that at the time the application is submitted is not anticipated to be later reutilized, recycled, or otherwise incorporated into products or utilized to provide a service.

**"T.C.L.P"** means Toxicity Characteristic Leaching Procedure.

**"Total Dissolved Solids" (TDS)** means the solids in water that can pass through a filter and is a measure of the amount of material dissolved in water.

**"Total Suspended Solids" (TSS)** or nonfilterable residue, expressed as milligrams per liter, means organic or inorganic materials carried or held in suspension in water which are retained by a standard glass fiber filter in the procedure outlined by the Environmental Protection Agency's regulations for waste water and analyses (40 CFR 136).

**"Wetland"** means those lands subject to periodic or seasonal flooding by water as defined under Section 404 of the Clean Water Act and so designated by the State or Federal agency charged with making such determination.

### 460:30-1-4. Applicability

This Chapter applies to all mining operations which include CCB placement operations and which are exempt from the solid waste permitting requirements pursuant to Title 27A of the Oklahoma Statutes, provided such CCB is constructively reutilized or placed in any active or inactive coal or Non-coal

mining operation subject to the provisions contained in Title 45 of the Oklahoma Statutes.

## SUBCHAPTER 3. CCB PLACEMENT APPLICATIONS

**460:30-3-1. Insurance**

Each application shall contain a certificate of liability insurance with a minimum insurance coverage for bodily injury and property damage amount of $500,000 for each occurrence and $1,000,000 aggregate.

**460:30-3-2. Environmental resources information; Cultural**

(a) All permits shall comply with the requirements of OAC 460:10 or OAC 46:20 as appropriate as well as the following Subchapter:

(b) A description of the current and historic cultural resources within and adjacent to the proposed mining permit area. The following minimum requirements apply to this description.

(1) A description of the historic resources that would be affected by the proposed operation. This description shall include comments from the State Historic Preservation Officer.

(2) A description of the population in and adjacent to the proposed mining permit area, as well as distance to and description of the nearest community to the proposed operation.

(3) Additional site information may be required if needed by the Department or other State agencies charged with protection of historic and cultural resources.

**460:30-3-3. Environmental resources information: Hydrologic**

(a) Surface water information.

(1) Each application shall contain information on location, chemical composition, sources, and use of surface water resources within and adjacent to the proposed mining permit area, including, but not limited to ponds, impoundments, and open pits.

(2) Stream channels within the mining permit area shall be described according to classification, flow rate, source of discharge, and chemical analysis.

(3) The physical and chemical composition shall include the following information:

(A) Ash site surface water testing parameters: initial

(i) pH
(ii) TDS
(iii) TSS
(iv) Specific conductance
(v) Sulfates
(vi) Temperature
(vii) Total iron
(viii) Total manganese
(ix) Arsenic
(x) Barium
(xi) Cadmium
(xii) Chromium (total)
(xiii) Lead
(xiv) Fluoride
(xv) Selenium
(xvi) Flow in streams, flow rate of discharges of impoundments
(xvii) Impoundment freeboard
(xviii) Impoundment depth

(B) CKD site surface water testing parameters: initial

(i) Surface water elevation
(ii) Temperature
(iii) pH
(iv) Specific conductance
(v) TDS
(vi) Chloride
(vii) Sulfates
(viii) Potassium
(ix) Sodium
(x) Antimony
(xi) Arsenic
(xii) Barium
(xviii) Beryllium
(xiv) Cadmium
(xv) Chromium (total)
(xvi) Lead
(xvii) Mercury
(xviii) Nickel
(xix) Selenium
(xx) Silver
(xxi) Thallium

(b) Ground water information

(1) Each application shall contain information on the ground water resources within the permit area. Previously published data may be utilized to comply with this requirement.

(2) The physical and chemical composition shall include the following information:

(A) Ash site ground water testing parameters: initial

(i) pH
(ii) TDS
(iii) Specific conductance
(iv) Sulfates
(v) Temperature
(vi) Total iron
(vii) Total manganese
(viii) Arsenic
(ix) Barium
(x) Cadmium
(xi) Chromium (total)
(xii) Lead
(xiii) Fluoride
(xiv) Selenium
(xv) Depth to water

(B) CKD site ground water testing parameters: initial

(i) Depth to water
(ii) Temperature
(iii) pH
(iv) Specific conductance
(v) TDS
(vi) Chloride
(vii) Sulfates
(viii) Potassium
(ix) Sodium
(x) Antimony
(xi) Arsenic
(xii) Barium
(xiii) Beryllium
(xiv) Cadmium
(xv) Chromium (total)
(xvi) Lead
(xvii) Mercury
(xviii) Nickel
(xix) Selenium
(xx) Silver
(xxi) Thallium

(3) Monitoring wells shall be placed up-gradient and down-gradient of the placement area and noted accordingly in the mining permit application. The specific number of monitoring wells shall be site specific and determined by the Department on a case by case basis. However, the minium number of monitoring wells shall be one up-gradient and two down-gradient.

(4) Logs and cross sections of wells drilled for collection of ground water information and as monitoring wells shall be included in the application.

(5) An inventory of the chemical composition and completion data available from other reporting agencies or other sources for all ground water wells within one-half mile of the permit area boundary.

**460:30-3-4. Environmental resources information: Geologic**

(a) Each application shall contain a narrative description of the surficial and subsurface geology under and adjacent to the proposed mining permit area down to the first stratigraphic unit below the level where CCB would be placed. This description shall include structural geology of the mining permit and adjacent areas that would influence the movement of surface and ground water.

(b) The description shall include information on permeability of the sides and bottom of proposed CCB placement sites in the mining permit area, obtained from visual inspection and laboratory testing of rock strata or other earthen materials that would be in direct contact with placed CCB. The permeability of the *in situ* material, or any liner material approved by the Department, on the sides and bottom of the proposed CCB placement site must not exceed $10^{-5}$ cm/sec. If accessibility is prohibited to test the permeability of the sides and bottom of the proposed placement site, core samples may be taken contiguous to the pit or a representative area of the permit site which corresponds to the same geologic stratum. These testing sites must not exceed $10^{-5}$ cm/sec.

(c) Logs of holes drilled to obtain geologic information shall be provided.

(d) If required, the Department may require the collection of additional geologic information and analyses in addition to that required by this Paragraphs (a) and (b) of this Section.

**460:30-3-5. Environmental resources information: Soils**

(a) A description of the soil types under the proposed mining permit area from United States Department of Agriculture Natural Resource Conservation Service county soil surveys or equivalent permit area soil survey is required. Such description shall contain the following at a minimum; lateral extent of each soil type under the mining permit area, thickness, color, composition, slopes, land use suitability and engineering properties.

(b) Additional soils description, including, but not limited to, permeability tests as specified by the Department may be required.

**460:30-3-6. CCB placement: General**

The application shall contain a detailed narrative description of the CCB placement operations to be conducted, including, but not limited to the following:

(1) The method of CCB placement, including equipment dedicated to the operation.

(2) A description of the life expectancy of the operation, and the daily and annual quantities of CCB to be placed on the mining permit area, as well as the total quantity to be placed over the life of the operation.

(3) Sources of CCB to be placed on the mining permit area.

(4) A description of measures to be taken to ensure employee safety and the safety of the general public during CCB placement activities. This includes a plan to provide emergency services in case of injury or accident.

**460:30-3-7. CCB placement: Analysis**

Each application shall contain a complete analysis of the CCB to be placed in the mining permit area. An additional analysis of CCB placed in the mining permit area will be submitted to the Department bi-annually and annually. Specific parameters to be analyzed initially, bi-annually and annually thereafter shall be:

(1) Ash testing parameters: initial, bi-annually, annually and if the source ash changes.

(A) T.C.L.P. analysis (Conducted bi-annually and if the source of ash changes)

(i) Arsenic
(ii) Barium
(iii) Cadmium
(iv) Chromium (total)
(v) Lead
(vi) Selenium

(B) Chemical analysis of pH (Conducted annually and if the source of ash changes)

(2) CKD testing parameters: initial, bi-annually, annually and if manufacturing/production processes that effect CKD change;

(A) T.C.L.P. analysis (Conducted bi-annually and if manufacturing/production processes that effect CKD change.

(i) Antimony
(ii) Arsenic
(iii) Barium
(iv) Beryllium
(v) Cadmium
(vi) Chromium (total)
(vii) Lead
(viii) Mercury
(ix) Nickel
(x) Selenium
(xi) Silver
(xii) Thallium

(B) Chemical analysis of pH (Conducted annually and if manufacturing/production processes that effect CKD change.)

**460:30-3-8. CCB placement: Hydrologic balance protection**

(a) **General.** A general description of the surface drainage plan for the proposed operation shall be provided. This description shall include, but not be limited to, description of proposed handling of off-site drainage entering the mining permit area, mining permit area sediment control, measures to prevent CCB from entering water leaving the mining permit area, and general description of measures to prevent non-CCB contaminants from entering storm water leaving the mining permit area.

(b) **Surface water monitoring plan.** A plan for surface water monitoring shall include the following parameters to be analyzed annually and semi-annually:

(1) Ash site surface water testing parameters: annually

(A) pH
(B) TDS
(C) TSS
(D) Specific conductance
(E) Sulfates
(F) Temperature
(G) Total iron
(H) Total manganese
(I) Arsenic
(J) Barium
(K) Cadmium
(L) Chromium (total)
(M) Lead
(N) Fluoride
(O) Selenium
(P) Flow in streams, flow rate of discharges of impoundments
(Q) Impoundment freeboard
(R) Impoundment depth

(2) Ash site surface water testing parameters: (Semi-annually for active sites, inactive sites and sites in temporary cessation status as set forth in 30-5-22 complying with 30-5-11)

(A) pH
(B) TDS
(C) TSS
(D) Specific conductance
(E) Sulfates
(F) Temperature
(G) Flow in streams, flow rate of discharges of impoundments
(H) Impoundment freeboard
(I) Impoundment depth

(3) CKD site surface water testing parameters: annually;

(A) Surface water elevation
(B) Temperature
(C) pH
(D) Specific conductance
(E) TDS
(F) Chloride
(G) Sulfates
(H) Potassium
(I) Sodium
(J) Antimony
(K) Arsenic
(L) Barium
(M) Beryllium
(N) Cadmium
(O) Chromium (total)
(P) Lead
(Q) Mercury
(R) Nickel
(S) Selenium
(T) Silver
(U) Thallium

(4) CKD site surface water testing parameters: semi-annually

(A) Surface water elevation
(B) Temperature
(C) pH
(D) Specific conductance
(E) TDS
(F) Chloride
(G) Sulfates
(H) Potassium
(I) Sodium

(c) **Ground water monitoring plan.** A plan for ground water monitoring shall include the following parameters to be analyzed annually and semi-annually:

(1) Ash site ground water testing parameters: annually

(A) pH
(B) TDS
(C) Specific conductance
(D) Sulfates
(E) Temperature
(F) Total iron

(G) Total manganese
(H) Arsenic
(I) Barium
(J) Cadmium
(K) Chromium (total)
(L) Lead
(M) Fluoride
(N) Selenium
(O) Depth to water

(2) Ash site ground water testing parameters: (Semi-annually for active sites, inactive sites and sites in temporary cessation status as set forth in Section 30-5-22 complying with 30-5-11)

(A) pH
(B) TDS
(C) Specific conductance
(D) Sulfates
(E) Temperature
(F) Depth to water

(3) CKD site ground water testing parameters: annually

(A) Depth to water
(B) Temperature
(C) pH
(D) Specific conductance
(E) TDS
(F) Chloride
(G) Sulfates
(H) Potassium
(I) Sodium
(J) Antimony
(K) Arsenic
(L) Barium
(M) Beryllium
(N) Cadmium
(O) Chromium (total)
(P) Lead
(Q) Mercury
(R) Nickel
(S) Selenium
(T) Silver
(U) Thallium

(4) CKD site ground water testing parameters: semi-annually

(A) Depth to water
(B) Temperature
(C) pH
(D) Specific conductance
(E) TDS
(F) Chloride
(G) Sulfates
(H) Potassium
(I) Sodium

**460:30-3-9. Mining permit maps: General**

(a) Maps submitted with applications shall include all the types of information that are set forth on topographic maps of the U.S. Geological Survey of the 1:24,000 scale series. Maps of the mining permit area shall be on a scale of one inch equals 200 feet (1:2400). General location maps and maps of the adjacent area shall clearly show the land and waters within those areas and be on a scale to be determined by the Department, but in no case shall be smaller than 1:24,000.

(b) The mining permit application shall include maps showing the following:

(1) The boundaries of the proposed mining permit area.
(2) All boundaries of lands and names of present owners of record of the surface of those lands included in or contiguous to the proposed mining permit area.
(3) The location, ownership, and uses of all buildings inside and within 1000 feet of the proposed mining permit area.
(4) The location of surface and subsurface man made features within or passing through the proposed mining permit area, including, but not limited to electric transmission lines, pipelines, and telephone lines.
(5) Each public road easement located in or within 100 feet of the proposed mining permit area.
(6) Each cemetery that is located in or within 100 feet of the proposed mining permit area.
(7) The boundaries of any public park, wildlife refuge, or recreational area within or bordering the proposed mining permit area.
(8) Other relevant information required by the Department.

**460:30-3-10. Mining permit maps and cross sections: Environmental resources**

(a) The mining permit application that includes the placement of CCB as a part of
its reclamation plan shall contain the following environmental resources maps:

(1) Locations and elevations of drill holes used to obtain soil, hydrologic, or geologic information.
(2) Locations and elevations of monitoring points used to obtain surface and ground water information used to prepare the mining permit application.
(3) Location of active, inactive, reclaimed, or abandoned surface and underground mines.
(4) Location of surface water bodies such as streams, ponds, lakes, springs, and irrigation ditches within and adjacent to the proposed mining permit area.
(5) Location of existing areas of mine and non-mine wastes, including CCB.
(6) Location of water, oil and gas wells within the proposed mining permit area.
(7) Potentiometric map indicating ground water elevations and movement of ground water in the mining permit area. Previously published data and mapping representative of the area may be utilized to comply with this requirement.
(8) Cross sections passing through the proposed CCB placement area. Such cross sections shall show relevant geologic and hydrologic information, and other relevant information as specified by the Department. The number

of cross sections required is to be determined by the Department.

(9) Location of soil series units under the proposed mining permit area.

(10) A map showing the permit area in relation to 100-year flood plain areas as shown on maps published by the Untied States Geological Survey in cooperation with the United States Department of Housing and Urban Development.

(b) Other relevant environmental resources information may be required by the Department on maps as part of its review.

**460:30-3-11. Mining permit maps: Operations and reclamation plan**

Each application shall contain the following operations and reclamation plan maps:

(1) Buildings, roads, facilities, and utility lines to be used.

(2) The detailed operation, according to the sequence of CCB placement.

(3) Each topsoil, cover material, CCB, and non-CCB waste storage area.

(4) Each water storage, treatment, discharge, and diversion facility to be used.

(5) Each air pollution control facility.

(6) Location of each sedimentation pond and permanent impoundment.

(7) A contoured map showing the final surface configuration of the disturbed area.

## SUBCHAPTER 5. PERFORMANCE STANDARDS

**460:30-5-1. Scope**

This Subchapter sets forth the minimum environmental protection performance standards to be adopted and implemented under this Chapter for mining permits that include CCB placement as part of its reclamation plan.

**460:30-5-2. Objectives**

This Subchapter is intended to ensure that all CCB placement operations are conducted in a manner which preserves environmental and other values.

**460:30-5-3. Signs and markers**

(a) Signs and markers shall:

(1) Be posted and maintained by the person who conducts mining that includes CCB placement as part of its reclamation plan.

(2) Be made of durable materials.

(3) Be of a uniform design that can be easily seen and read.

(4) Be maintained during the life of the operations and until release of all performance bonds.

(b) Permit identification signs shall:

(1) Be posted at each point of access to the mining permit area from public roads.

(2) Show the name, business address, mining permit number, and telephone number of the person conducting CCB placement operations.

(c) Perimeter markers of the mining permit area shall be clearly marked before any disturbance takes place on the permitted mining area and during the life of the mining permit.

(d) Buffer zones, if required by this Chapter or other applicable regulations shall be maintained along their applicable boundaries.

**460:30-5-4. Management of drilled holes**

All holes drilled in conjunction with environmental resources data collection that are not being utilized as monitoring wells shall be adequately plugged to prevent surface contamination of or cross-communication between aquifers in a manner to be prescribed by the Department.

**460:30-5-5. Topsoil and subsoil**

(a) Topsoil encountered during CCB placement operations shall be salvaged and stored for reclamation of the CCB placement area prior to surface disturbance of the affected area.

(b) Where topsoil is unavailable or of poor quality, subsoil or other materials approved by the Department shall be segregated and stored for final closure of the mining permit, including CCB placement, area.

**460:30-5-6. Hydrologic balance protection: General**

(a) CCB placement and reclamation operations shall be conducted in a manner that minimizes diminution of quantity and quality of surface and ground water.

(b) CCB shall not be placed in artesian waters or over springs.

**460:30-5-7. Flood-prone areas**

CCB shall not be placed in areas identified within 100-year flood plain areas as described in maps published by the United States Geological Survey in cooperation with the U.S. Department of Housing and Urban Development unless engineered to allow for the area to be excluded from the 100-year flood plain area. These areas are subject to Departmental approval.

**460:30-5-8. Hydrologic balance: Effluent limitations**

Other provisions of these Regulations notwithstanding, the permittee shall conduct mining and CCB placement operations in a manner that complies with effluent discharge standards contained in the permittee's National Pollutant Discharge Elimination System permit, if required by the United States Environmental Protection Agency, or its equivalent State enforcement agency; and the discharge standards specified at 40 CFR Part 425-699.

**460:30-5-9. Hydrologic balance: Sediment control measures**

CCB placement and reclamation operations shall be conducted in a manner that minimizes erosion and retains sediment on the mining permit area, using the best available control technology. Sediment control measures may include, but not be limited to construction of diversions, sedimentation ponds, and vegetative buffer zones around affected areas.

**460:30-5-10. Hydrologic balance: Diversions**

Diversions shall be constructed in a workmanlike manner that minimizes contribution of suspended solids to surface water flow outside the mining permit area. Permanent diversions shall be constructed at a minimum with a permanent and stable vegetative cover. Alternative designs may be approved by the Department on a case-by-case basis.

**460:30-5-11. Hydrologic balance: Monitoring**

(a) **General.** The permittee shall maintain records of surface and ground water monitoring for inspection. Reports shall include the date and location of sample, depth, if applicable, and the analytical results of each sample taken during the reporting period. These reports shall be submitted to the Department within 28 days of the end of each reporting period as required throughout the life of the permit.

(1) Water monitoring on permitted areas that are permitted to accept the placement of CCB shall be conducted according to the following monitoring frequency schedule:

(A) All sites shall conduct water monitoring on an annual basis as prescribed by Section 30-3-8.

(B) All sites shall conduct water monitoring on a semi-annual basis as prescribed in Section 30-3-8 during active CCB placement.

(C) All sites that have never accepted CCB shall only conduct water monitoring on an annual basis as prescribed in Section 30-3-8.

(2) The Department may require additional monitoring when necessary.

(3) Monitoring shall be conducted until release of all performance bonds.

(4) The permittee may apply to the Department for a reduction of water monitoring requirements if the permittee can affirmatively demonstrate that CCB placement operations are not causing adverse impact on the quantity or quality of surface and ground water resources.

(b) **Surface water.** Surface water monitoring shall be conducted according to the surface water monitoring plan in the mining permit application approved at Section 30-3-8 of this Chapter.

(c) **Ground water.** Ground water monitoring shall be conducted according to the ground water monitoring plan in the mining permit application approved at Section 30-3-8 of this Chapter.

**460:30-5-12. Hydrologic balance: Wetlands**

All CCB placement operations shall be conducted in a manner that minimizes disturbance of wetlands existing prior to permit issuance. Operations shall comply with applicable requirements of Section 404 of the Clean Water Act (33 U.S.C. Sec. 1251 et. seq.) as prescribed by the State or Federal agency charged with the implementation of wetlands protection, and any wetlands protection permits required by that agency.

**460:30-5-13. Hydrologic balance: Impoundments**

Permanent impoundments may be left on mining permit areas provided the impoundment is not:

(1) In contact with CCB.

(2) Impounding water of such quality that it is incompatible with intended post-placement use.

(3) Constructed in a manner that causes erosion.

(4) Resulting in diminution in quantity or quality of water received downstream off the mining permit area.

**460:30-5-14. CCB placement: General requirements**

(a) CCB shall be placed in a manner that minimizes damage to air, water, soil, and biological resources as well as damage to human health and private property.

(b) CCB shall be placed below the surface elevation of pre-existing, undisturbed ground in excavations that are the result of coal or non-coal mining, or other such configurations as may be approved by the Department.

**460:30-5-15. CCB placement: Fugitive dust control**

(a) CCB placement shall be conducted in a manner that minimizes fugitive dust production, using the best available control technology. This may include, but not be limited to use of water sprays, limiting amount placed at any one time, limiting placing during windy conditions, and use of surfactant, if approved by the Department.

(b) The requirements of this Chapter notwithstanding, the permittee shall conduct CCB placement operations in a manner consistent with any air quality permit required under the Oklahoma Clean Air Act (63 O.S. Sec. 1-1801).

**460:30-5-16. CCB placement: Intermediate cover**

The exposed CCB surface on the mining permit area shall be stabilized during CCB placement operations to prevent wind and water erosion, and subsequent transport off the mining permit area. This may be accomplished through application of water or earthen materials. Chemical stabilizers or other substances may be used, if approved by the Department.

**460:30-5-17. Hazardous and solid wastes**

This Chapter notwithstanding, the permittee shall not dispose or place solid wastes nor hazardous wastes on the mining permit area without first complying with the requirements of the Resource Conservation and Recovery Act (42 U.S.C. 6901 et. Seq.) and any implementing regulations. Only the CCB, as

set forth in the mining permit issued by the Department, shall be placed on the permitted area.

**460:30-5-18. Reclamation: General requirements**

Reclamation shall be conducted contemporaneously with CCB placement when feasible to reduce the area of exposed CCB. When CCB placement is completed, reclamation shall commence at the earliest practicable time. Final grading and placement of final cover shall be completed within one year of completion of CCB placement.

**460:30-5-19. Reclamation: Final cover**

(a) Upon completion of CCB placement, a final capping of natural, non-toxic, and non-acidic earthen material shall be placed over the final graded CCB surface. The final capping shall be a minimum of one and one-half (1.5) feet thick, not including topsoil cover above the capping material. The Department may require a thicker final capping prior to distribution of topsoil or other suitable material as approved by the Department, depending upon its review of the mining permit application.

(b) A minimum of six (6) inches of topsoil or other suitable material as approved by the Department shall be placed over the final capping material to support a permanent vegetative cover over the area affected by CCB placement.

**460:30-5-20. Reclamation: Slope stability**

CCB placement areas shall be graded to slopes not exceeding twenty-five percent (4:1). Other slopes which demonstrate achievable slope stability through recognized and accepted engineering practices may be approved by the Department.

**460:30-5-21. Reclamation: Revegetation**

The permittee shall establish a permanent vegetative cover capable of resisting erosion without subsequent irrigation, fertilization, or other maintenance. Species planted shall be consistent with climatic, soil, and land uses in the general area of the mining permit area.

**460:30-5-22. Cessation of operations: Temporary**

If no CCB is placed on site for 180 consecutive days and the permittee decides to temporarily cease CCB placement operations, the permittee shall petition the Department for temporary cessation status. Permittees in temporary cessation status shall adhere to the semi-annual water monitoring plan as prescribed in Section 30-3-8.

**460:30-5-23. Roads**

Access roads utilized within the mining permit area shall be maintained in a manners that:

(1) Minimizes production of fugitive dust, and

(2) Minimizes contribution of suspended solids to surface water runoff.

**460:30-5-24. Utility installations**

CCB placement and reclamation operations shall be conducted in a manner that avoids disruption to utility services including, but not limited to telephone, water, sewer, electricity, and oil and gas pipelines.

*[OAR Docket #03-3023; filed 7-24-03]*

# Executive Orders

As required by 75 O.S., Sections 255 and 256, Executive Orders issued by the Governor of Oklahoma are published in both the *Oklahoma Register* and the *Oklahoma Administrative Code*. Executive Orders are codified in Title 1 of the *Oklahoma Administrative Code.*

Pursuant to 75 O.S., Section 256(B)(3), "Executive Orders of previous gubernatorial administrations shall terminate ninety (90) calendar days following the inauguration of the next Governor unless otherwise terminated or continued during that time by Executive Order."

## TITLE 1. EXECUTIVE ORDERS

**1:2003-9A.**

### AMENDED EXECUTIVE ORDER 2003-9 OF JULY 21, 2003

I, Brad Henry, Governor of the State of Oklahoma, by virtue of the power and authority vested in me by law, hereby amend Executive Order 2003-9, in which pursuant to the authority vested in me by Article VI of the Oklahoma Constitution I established the Governor's Committee on Homeland Security Funding.

The September 11, 2001 attacks on the United States of America raised concerns about the ability of our Nation to respond to acts of terrorism. This concern has resulted in an unprecedented amount of federal funding available to the states to prevent, reduce vulnerability, and prepare to respond and recover, from terrorist attacks. As a State which has been the target of domestic terrorism, Oklahoma recognizes the need to further assess its current security capabilities, develop the requisite level of preparedness, and plan a structured and swift response to terrorist threats. Such strategies must also encompass an approach to be prepared for all hazards whether they are manmade or come from natural disasters requiring similar responses.

In the State of Oklahoma all federal funding related to homeland security should be part of an overall strategy to increase the capability of the State for an all-hazards response. The Oklahoma Homeland Security Director must serve as the single point of contact in the development of this statewide strategy. As part of the statewide strategy, a First Responder Equipment Program has been developed using funding from the United States Department of Justice and United States Department of Homeland Security. The Governor has designated the Oklahoma Department of Public Safety as the State Administering Agency for first responder homeland security funding.

The Governor's Committee on Homeland Security Funding created by this Order shall review and make recommendations on the implementation of the statewide First Responder Equipment Program. The Committee shall consist of seven (7) members appointed by the Governor from the following areas:

Representative from the firefighting service

Representative from the law enforcement

Representative from the health sector

Representative from emergency management

Representative from the military

Representative from the Office of State Finance

Representative from the Department of Agriculture, Food and Forestry

All members shall serve on the Committee at the pleasure of the Governor. The representative from the firefighting service shall serve as the Chairperson of the Committee.

Staffing and support services shall be provided by the Oklahoma Department of Public Safety.

The Committee may meet at such times and places as they deem appropriate.

The Governor's Committee on Homeland Security Funding shall focus on:

1. Assessing the current level of preparedness of first responders and identifying the needs for additional capabilities;

2. Reviewing all federal funding available to state agencies and local jurisdictions to increase the capability of the state response community;

3. Consistent with the applications for federal funding, and the First Responder Equipment Program developed by the Oklahoma Homeland Security Director and approved by the Governor, the committee shall make recommendations for sub-grantees to receive funding; and,

4. Review sub-grant applications and agreements to ensure compliance with the statewide strategy and the principles of the First Responder Equipment Program.

The Committee shall submit a preliminary report to the Governor and the Oklahoma Homeland Security Director within thirty (30) days of the committee members' appointment.

This Executive Order shall be distributed to the Commissioner of Public Safety who shall cause the provisions of this order to be implemented.

IN WITNESS WHEREOF, I have hereunto set my hand and caused the Great Seal of the State of Oklahoma to be affixed at Oklahoma City, Oklahoma, this 21st day of July, 2003.

BY THE GOVERNOR OF THE STATE OF OKLAHOMA

Brad Henry

ATTEST:
M. Susan Savage
Secretary of State

*[OAR Docket #03-3018; filed 7-23-03]*

**1:2003-14.**

## EXECUTIVE ORDER 2003-14

I, Brad Henry, Governor of the State of Oklahoma, hereby direct the appropriate steps be taken to fly all American flags on State property at half-staff from 8:00 a.m. until 5:00 p.m. on Friday, July 18, 2003, to honor Judge Joe Burch, who died on Tuesday, July 15, 2003.

Judge Burch served as Associate District Judge for Washita County since January 9, 1995.

This executive order shall be forwarded to the Director of Central Services who shall cause the provisions of this order to be implemented by all appropriate agencies of state government.

IN WITNESS WHEREOF, I have hereunto set my hand and caused the Great Seal of the State of Oklahoma to be affixed at Oklahoma City, Oklahoma, this 17th day of July, 2003.

BY THE GOVERNOR OF THE STATE OF OKLAHOMA

Brad Henry

ATTEST:
Kathy Jekel
Acting Assistant Secretary of State

*[OAR Docket #03-3010; filed 7-21-03]*

**1:2003-15.**

## EXECUTIVE ORDER 2003-15

I, Brad Henry, Governor of the State of Oklahoma, hereby direct the appropriate steps be taken to fly all American flags on State property at half-staff from 8:00 a.m. until 5:00 p.m. on Tuesday, July 22, 2003, to honor Judge Luther Lee Bohanon, who died on Friday, July 18, 2003.

Judge Bohanon was born on August 9, 1902, in Ft. Smith, Arkansas. His family moved to Stigler, Oklahoma a few years later. He attended elementary school in Kinta, and graduated from high school in Muskogee. In 1922, he enrolled at the University of Oklahoma, and received his law degree there in 1927. After graduation, Bohanon served as the Assistant District Attorney in Seminole County before entering private practice. During World War II, he served in the Judge Advocate Department of the United States Army Air Corps.

On August 30, 1961, President John F. Kennedy appointed Bohanon to the federal bench. In 1963, Bohanon ordered the desegregation of Oklahoma City Public Schools. Judge Bohanon was a Mason, a Shriner, a member of the United Methodist Church, and received numerous citations and awards from the Oklahoma Senate and House, the Oklahoma County Bar, and the Journal Record. In 1991, the Luther Bohanon American Inn of Court was named in his honor.

This executive order shall be forwarded to the Director of Central Services who shall cause the provisions of this order to be implemented by all appropriate agencies of state government.

IN WITNESS WHEREOF, I have hereunto set my hand and caused the Great Seal of the State of Oklahoma to be affixed at Oklahoma City, Oklahoma, this 21st day of July, 2003.

BY THE GOVERNOR OF THE STATE OF OKLAHOMA

Brad Henry

ATTEST:
M. Susan Savage
Secretary of State

*[OAR Docket #03-3013; filed 7-22-03]*

**1:2003-16.**

## EXECUTIVE ORDER 2003-16

I, Brad Henry, Governor of the State of Oklahoma, pursuant to the power vested in me by Section 2 of Article VI of the Oklahoma Constitution hereby declare the following:

1. After the tragic events that occurred on September 11, 2001, state and local government officials have increased opportunities for citizens to become an integral part of protecting the homeland and supporting the local first responders. Officials agree that the formula for ensuring a more secure and safe homeland consists of preparedness, training, and citizen involvement in supporting first responders.

2. Citizen Corps, a vital component of USA Freedom Corps, was created to help coordinate volunteer activities that will make our communities safer, stronger, and better prepared to respond to any emergency situation. It provides opportunities for people to participate in a range of measures to make their families, their homes, and their communities safer from the threats of crime, terrorism, and disasters of all kinds.

3. The mission of Citizen Corps is to harness the power of every individual through education, training, and volunteer service to make communities safer, stronger, and better prepared to respond to the threats of terrorism, crime, public health issues, and disasters of all kinds.

4. The Oklahoma Department of Civil Emergency Management will encourage and fund, as appropriate, local Citizen Corps Councils that will bring together the leadership in a community to focus on engaging citizens in homeland security measures. Citizen Corps is based on local partnerships, and the success of those partnerships dictate how effective the Citizen Corps program will be in each community. The Citizen Corps program will focus on improving partnerships within each community to demonstrate that the entire community - the private sector as well as the public sector - has a responsibility for the well-being of the community; and, also ensuring that the private sector accepts the concept that much of what happens in a community sooner or later affects their business.

5. The Oklahoma Department of Civil Emergency Management will establish and chair a State Citizen Corps Council to offer guidance and leadership to the local Citizen Corps Councils. Representatives from the following agencies will serve on the State Citizen Corps Council:

The Oklahoma Department of Public Safety

The Oklahoma Office of Homeland Security

The Oklahoma Department of Military

The Oklahoma Department of Human Services

The Oklahoma Department of Health

The Oklahoma Department of Agriculture, Food, and Forestry

The Oklahoma Emergency Management Association

The Oklahoma Community Service Commission

Volunteer Action Centers

Voluntary Organizations Active in Disaster

Copies of this Executive Order shall be distributed to the Director of Civil Emergency Management who shall cause the provisions of this order to be implemented by all appropriate agencies of state government.

IN WITNESS WHEREOF, I have set my hand and caused the Seal of the Great State of Oklahoma to be affixed at Oklahoma City, this 25th day of July, 2003.

BY THE GOVERNOR OF THE STATE OF OKLAHOMA

Brad Henry

ATTEST:
M. Susan Savage
Secretary of State

*[OAR Docket #03-3027; filed 7-29-03]*

---

**1:2003-17.**

## EXECUTIVE ORDER 2003-17

I, Cal Hobson, Governor of the State of Oklahoma, hereby direct the appropriate steps be taken to fly all American flags on State property at half-staff from 8:00 a.m. until 5:00 p.m. on August 1, 2003, to honor Audre' L. Henry, who died on Sunday, July 27, 2003.

Audre' L. Henry, mother of Governor Brad Henry, influenced the lives of many young people in Oklahoma and California as a public educator. She taught in Oklahoma from 1977 until 1989 before moving to Modesto, California. In Modesto, she taught and was a school administrator. Audre' Henry had many wonderful friends in the Shawnee community and throughout Oklahoma.

This executive order shall be forwarded to the Director of Central Services who shall cause the provisions of this order to be implemented by all appropriate agencies of state government.

IN WITNESS WHEREOF, I have hereunto set my hand and caused the Great Seal of the State of Oklahoma to be affixed at Oklahoma City, Oklahoma, this 29th day of July, 2003.

BY THE GOVERNOR OF THE STATE OF OKLAHOMA

Cal Hobson

ATTEST:
Vickie L. Mitchell
Acting Assistant Secretary of State

*[OAR Docket #03-3028; filed 7-30-03]*

---

**1:2003-18.**

## EXECUTIVE ORDER 2003-18

I, Cal Hobson, Governor of the State of Oklahoma, in memory of Bob Hope and in conjunction with President George W. Bush's Proclamation dated July 28, 2003; hereby direct the appropriate steps be taken to fly all American Flags on State property at half-staff from 8:00 a.m. until 5:00 p.m. on the day of Bob Hope's interment.

IN WITNESS WHEREOF, I have hereunto set my hand and caused the Great Seal of the State of Oklahoma to be affixed at Oklahoma City, Oklahoma, this 29th day of July, 2003.

BY THE GOVERNOR OF THE STATE OF OKLAHOMA

Cal Hobson

ATTEST:
Vickie L. Mitchell
Acting Assistant Secretary of State

*[OAR Docket #03-3029; filed 7-30-03]*