

Volume 34
Number 8
January 3, 2017
Pages 177 - 232

The Oklahoma Register

Oklahoma
Secretary of State
Office of Administrative Rules



Mary Fallin, Governor
Mike Hunter,
Secretary of State
Peggy Coe, Editor-in-Chief

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 accepted 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
J.W. Martin Library

Bartlesville - Bartlesville Public Library

Claremore - Rogers State University, Stratton Taylor Library

Clinton - Clinton Public Library

Durant - Southeastern Oklahoma State University, H.G.
Bennett Memorial Library

Edmond - University of Central Oklahoma, Chambers Library

Enid - Enid Public Library

Goodwell - Oklahoma Panhandle State University, Marvin E.
McKee Library

Lawton - Lawton Public Library

McAlester - McAlester Public Library

Norman - University of Oklahoma, Bizzell Memorial
Library

Oklahoma City - Metropolitan Library System

Oklahoma City - Publications Clearinghouse,
Oklahoma Department of Libraries

Stillwater - Oklahoma State University, Edmon Low
Library

Tahlequah - Northeastern State University, John
Vaughan Library

Tulsa - Tulsa City-County Library

Weatherford - Southwestern Oklahoma State
University, Al Harris Library

CITE MATERIAL PUBLISHED IN THE OKLAHOMA REGISTER by the volume and the beginning page number of the document in the *Register*. For example: 34 Ok Reg 256.

SUBSCRIPTION RATES for the *Register* are \$500.00 per year for the printed issues and \$300.00 per year for the CD-ROM issues, 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, 421 NW 13th Street, Suite 220, Oklahoma City, OK 73103.

INFORMATION ABOUT THIS PUBLICATION may be obtained by contacting the OAR by mail at Oklahoma Secretary of State, Office of Administrative Rules, 421 NW 13th Street, Suite 220, Oklahoma City, OK 73103, by phone at (405) 521-4911, or by fax at (405) 522-3555. Information may also be obtained by visiting the OAR's office, located in Suite 220, Colcord Center, 421 NW 13th Street, Oklahoma City, between 8:00 a.m. and 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. 44 copies have been prepared and distributed at a cost of \$163.04. 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)	vi
Notices of Rulemaking Intent	
Fire Marshal Commission, State (Title 265)	177
Public Employees Retirement System, Oklahoma (Title 590)	177, 178, 179
Rehabilitation Services, State Department of (Title 612)	180, 181, 182, 183, 184
Virtual Charter School Board, Statewide (Title 777)	184, 185
Emergency Adoptions	
Health Care Authority, Oklahoma (Title 317)	187, 188, 192, 196
Human Services, Department of (Title 340)	197, 200, 226
Executive Orders (Title 1)	231

Agency/Action/Subject Index

FIRE Marshal Commission, State (Title 265)

Notices of Rulemaking Intent

Fire Extinguisher Industry (Chapter 50) 177

GOVERNOR

Executive Orders

Ordering flags at half-staff in recognition of Pearl Harbor
 Remembrance Day (16-38) 231
 Ordering formation of the Oklahoma Occupational Licensing
 Task Force (16-39) 231
 Ordering flags at half-staff to honor John Glenn
 (16-40) 232

HEALTH Care Authority, Oklahoma (Title 317)

Emergency Adoptions

Medical Providers-Fee for Service (Chapter 30) 187,
 188, 192
 Medical Assistance for Adults and Children-Eligibility
 (Chapter 35) 196

HUMAN Services, Department of (Title 340)

Emergency Adoptions

Licensing Services (Chapter 110) 197, 200, 226

PUBLIC Employees Retirement System, Oklahoma (Title 590)

Notices of Rulemaking Intent

Public Employees Retirement System (Chapter 10) 177

PUBLIC Employees Retirement System, Oklahoma – continued

Notices of Rulemaking Intent – continued

Uniform Retirement System for Justices and Judges
 (Chapter 15) 178
 Deferred Compensation (Chapter 25) 178
 Deferred Savings Incentive Plan (Chapter 35) 179
 Defined Contribution System (Chapter 40) 179

REHABILITATION Services, State Department of (Title 612)

Notices of Rulemaking Intent

Administrative Operations (Chapter 1) 180
 Vocational Rehabilitation and ~~Vocational Rehabilitation~~
~~for the Blind & Visually Impaired~~ Visual Services
 (Chapter 10) 181
 Oklahoma Library for the Blind and Physically Handicapped
 (Olbph) (Chapter 15) 182
 Special Schools (Chapter 20) 183
 Business Enterprise Program (Chapter 25) 184

VIRTUAL Charter School Board, Statewide (Title 777)

Notices of Rulemaking Intent

Administrative Operations (Chapter 1) 184
 Statewide Virtual Charter Schools (Chapter 10) 185
Oklahoma Supplemental Online Course Certification
 (Chapter 15) 185

Rules Affected Index

[(E) = Emergency action]

Rule	Register Page	Rule	Register Page
40:1-1-1.	[AMENDED] (E) 95	165:59-9-25.	[AMENDED] (E) 28
40:20-1-3.	[AMENDED] (E) 96	165:59-9-27.	[AMENDED] (E) 29
40:25-1-2.	[AMENDED] (E) 98	165:59-9-29.	[AMENDED] (E) 29
40:25-1-3.	[AMENDED] (E) 99	317:30-3-19.2.	[NEW] (E) 187
40:25-1-4.	[REVOKED] (E) 99	317:30-5-2.	[AMENDED] (E) 188
165:5-21-3.1.	[NEW] (E) 53	317:30-5-22.	[AMENDED] (E) 193
165:25-1-11.	[AMENDED] (E) 121	317:30-5-42.17.	[AMENDED] (E) 57
165:25-3-6.28.	[AMENDED] (E) 123	317:30-5-226.	[AMENDED] (E) 194
165:59-1-1.	[AMENDED] (E) 5	317:30-5-229.	[AMENDED] (E) 194
165:59-1-2.	[AMENDED] (E) 6	317:30-5-241.1.	[AMENDED] (E) 54
165:59-1-3.	[AMENDED] (E) 6	317:30-5-356.	[AMENDED] (E) 195
165:59-1-4.	[AMENDED] (E) 6	317:30-5-432.1.	[AMENDED] (E) 57
165:59-1-7.	[AMENDED] (E) 8	317:30-5-664.8.	[AMENDED] (E) 195
165:59-3-1.	[REVOKED] (E) 8	317:35-5-2.	[AMENDED] (E) 196
165:59-3-11.	[AMENDED] (E) 8	317:35-22-2.	[AMENDED] (E) 197
165:59-3-13.	[AMENDED] (E) 8	340:40-1-2.	[AMENDED] (E) 58
165:59-3-14.	[AMENDED] (E) 8	340:40-3-1.	[AMENDED] (E) 58
165:59-3-15.	[REVOKED] (E) 9	340:40-7-3.	[AMENDED] (E) 60
165:59-3-16.	[AMENDED] (E) 9	340:40-7-5.	[AMENDED] (E) 60
165:59-3-30.	[AMENDED] (E) 10	340:40-7-6.	[AMENDED] (E) 61
165:59-3-32.	[AMENDED] (E) 10	340:40-7-7.	[AMENDED] (E) 62
165:59-3-34.	[AMENDED] (E) 10	340:40-7-8.	[AMENDED] (E) 63
165:59-3-36.	[AMENDED] (E) 11	340:40-7-9.	[AMENDED] (E) 68
165:59-3-38.	[AMENDED] (E) 11	340:40-7-11.	[AMENDED] (E) 70
165:59-3-40.	[AMENDED] (E) 11	340:40-7-12.	[AMENDED] (E) 73
165:59-3-42.	[AMENDED] (E) 11	340:40-9-1.	[AMENDED] (E) 75
165:59-3-44.	[AMENDED] (E) 11	340:40-9-2.	[AMENDED] (E) 76
165:59-3-46.	[AMENDED] (E) 12	340:40-13-3.	[AMENDED] (E) 77
165:59-3-60.	[AMENDED] (E) 12	340:65-3-8.	[AMENDED] (E) 78
165:59-3-61.	[AMENDED] (E) 12	340:110-1-17.	[AMENDED] (E) 198
165:59-3-62.	[REVOKED] (E) 12	340:110-3-85.	[AMENDED] (E) 201
165:59-3-65.	[RESERVED] (E) 14	340:110-3-86.	[AMENDED] (E) 204
165:59-3-66.	[NEW] (E) 14	340:110-3-86.1.	[NEW] (E) 206
165:59-3-67.	[RESERVED] (E) 15	340:110-3-88.	[AMENDED] (E) 207
165:59-3-68.	[NEW] (E) 15	340:110-3-89.1.	[AMENDED] (E) 208
165:59-3-69.	[RESERVED] (E) 16	340:110-3-91.1.	[AMENDED] (E) 209
165:59-3-70.	[NEW] (E) 16	340:110-3-93.	[AMENDED] (E) 209
165:59-3-71.	[RESERVED] (E) 17	340:110-3-97.1.	[AMENDED] (E) 210
165:59-3-72.	[NEW] (E) 17	340:110-3-278.	[AMENDED] (E) 211
165:59-7-1.	[AMENDED] (E) 18	340:110-3-279.	[AMENDED] (E) 212
165:59-7-5.	[REVOKED] (E) 21	340:110-3-280.	[AMENDED] (E) 214
165:59-7-6.	[AMENDED] (E) 21	340:110-3-281.1.	[AMENDED] (E) 215
165:59-7-7.	[REVOKED] (E) 22	340:110-3-281.2.	[AMENDED] (E) 216
165:59-7-8.	[AMENDED] (E) 23	340:110-3-284.	[AMENDED] (E) 218
165:59-7-9.	[REVOKED] (E) 23	340:110-3-284.1.	[AMENDED] (E) 220
165:59-7-10.	[AMENDED] (E) 24	340:110-3-284.2.	[AMENDED] (E) 220
165:59-7-13.	[AMENDED] (E) 24	340:110-3-289.	[AMENDED] (E) 222
165:59-7-15.	[AMENDED] (E) 24	340:110-3-296.	[AMENDED] (E) 223
165:59-7-17.	[AMENDED] (E) 24	340:110-3-301.	[AMENDED] (E) 224
165:59-7-18.	[RESERVED] (E) 24	340:110, App. EE.	[REVOKED] (E) 227
165:59-7-19.	[NEW] (E) 24	340:110, App. EE.	[NEW] (E) 227
165:59-9-1.	[AMENDED] (E) 25	485:10-5-3.2.	[AMENDED] (E) 172
165:59-9-3.	[AMENDED] (E) 25	485:10-5-5.2.	[AMENDED] (E) 172
165:59-9-5.	[AMENDED] (E) 26	485:10-6-2.	[AMENDED] (E) 173
165:59-9-6.	[AMENDED] (E) 26	710:45-9-81.	[AMENDED] (E) 80
165:59-9-11.	[AMENDED] (E) 26	710:45-9-82.	[AMENDED] (E) 80
165:59-9-13.	[AMENDED] (E) 27	710:45-9-83.	[AMENDED] (E) 80
165:59-9-15.	[AMENDED] (E) 27	710:45-9-84.	[AMENDED] (E) 80
165:59-9-17.	[AMENDED] (E) 27	710:50-3-35.	[AMENDED] (E) 81
165:59-9-21.	[AMENDED] (E) 27	710:50-9-3.	[AMENDED] (E) 81
165:59-9-23.	[AMENDED] (E) 27	710:50-15-50.	[AMENDED] (E) 82

710:50-15-74. [AMENDED] (E)	82	800:25-37-12. [AMENDED] (E)	123
710:50-15-76. [AMENDED] (E)	84	800:25-37-13. [AMENDED] (E)	124
710:50-15-90. [AMENDED] (E)	85	800:25-37-14. [AMENDED] (E)	124
710:50-15-103. [AMENDED] (E)	85	800:25-37-16. [NEW] (E)	125
710:50-15-104. [AMENDED] (E)	86		

Agency/Title Index

[Assigned as of 1-3-17]

Agency	Title	Agency	Title
Oklahoma ABSTRACTORS Board	5	Office of DISABILITY Concerns (<i>Formerly:</i> Office of HANDICAPPED Concerns) - <i>See</i> Title 305	
Oklahoma ACCOUNTANCY Board	10	Board of Regents of EASTERN Oklahoma State College (<i>exempted</i> 11-1-98)	205
State ACCREDITING Agency	15	EDGE Fund Policy Board	208
AD Valorem Task Force (<i>abolished</i> 7-1-93)	20	State Department of EDUCATION	210
Oklahoma AERONAUTICS Commission	25	EDUCATION Oversight Board (<i>merged under</i> Office of Educational Quality and Accountability 7-1-14 - <i>See</i> Title 218)	215
Board of Regents for the Oklahoma AGRICULTURAL and Mechanical Colleges (<i>exempted</i> 11-1-98)	30	Office of EDUCATIONAL Quality and Accountability	218
Oklahoma Department of AGRICULTURE , Food, and Forestry	35	Oklahoma EDUCATIONAL Television Authority	220
Oklahoma Board of Licensed ALCOHOL and Drug Counselors	38	[RESERVED]	225
Board of Tests for ALCOHOL and Drug Influence	40	State ELECTION Board	230
ALCOHOLIC Beverage Laws Enforcement Commission	45	Oklahoma FUNERAL Board (<i>Formerly:</i> Oklahoma State Board of EMBALMERS and Funeral Directors)	235
ANATOMICAL Board of the State of Oklahoma	50	Oklahoma Department of EMERGENCY Management (<i>Formerly:</i> Department of CIVIL Emergency Management) - <i>See</i> Title 145	
Board of Governors of the Licensed ARCHITECTS , Landscape Architects and Registered Interior Designers of Oklahoma (<i>Formerly:</i> Board of Governors of the Licensed ARCHITECTS and Landscape Architects of Oklahoma; and Board of Governors of the Licensed ARCHITECTS , Landscape Architects and Interior Designers of Oklahoma)	55	Oklahoma EMPLOYMENT Security Commission	240
ARCHIVES and Records Commission	60	Oklahoma ENERGY Resources Board	243
Board of Trustees for the ARDMORE Higher Education Program (<i>exempted</i> 11-1-98)	65	State Board of Licensure for Professional ENGINEERS and Land Surveyors (<i>Formerly:</i> State Board of Registration for Professional ENGINEERS and Land Surveyors)	245
Oklahoma ARTS Council	70	Board of Trustees for the ENID Higher Education Program (<i>exempted</i> 11-1-98)	250
Oklahoma State ATHLETIC Commission (<i>Formerly:</i> Oklahoma Professional BOXING Commission) - <i>See</i> Title 92		Department of ENVIRONMENTAL Quality	252
ATTORNEY General	75	State Board of EQUALIZATION	255
State AUDITOR and Inspector	80	ETHICS Commission (<i>Title revoked</i>)	257
State BANKING Department	85	ETHICS Commission	258
Oklahoma State Employees BENEFITS Council (<i>consolidated under</i> Office of Management and Enterprise Services 8-26-11 - <i>See</i> Title 260)	86	Office of MANAGEMENT and Enterprise Services (<i>Formerly:</i> Office of State FINANCE)	260
Oklahoma State Employees BENEFITS Council	87	State FIRE Marshal Commission	265
Council of BOND Oversight	90	Oklahoma Council on FIREFIGHTER Training	268
Oklahoma State ATHLETIC Commission (<i>Formerly:</i> Oklahoma Professional BOXING Commission)	92	Oklahoma FIREFIGHTERS Pension and Retirement System	270
State BURIAL Board (<i>abolished</i> 7-1-92)	95	[RESERVED]	275
[RESERVED]	100	FORENSIC Review Board	277
Oklahoma CAPITAL Investment Board	105	State Board of Registration for FORESTERS	280
Oklahoma CAPITOL Improvement Authority	110	FOSTER Care Review Advisory Board	285
State CAPITOL Preservation Commission	115	Oklahoma FUNERAL Board (<i>Formerly:</i> Oklahoma State Board of Embalmers and Funeral Directors) - <i>See</i> Title 235	
CAPITOL-MEDICAL Center Improvement and Zoning Commission	120	Oklahoma FUTURES	290
Oklahoma Department of CAREER and Technology Education (<i>Formerly:</i> Oklahoma Department of VOCATIONAL and Technical Education) - <i>See</i> Title 780		GOVERNOR (<i>See also</i> Title 1, Executive Orders)	295
Board of Regents of CARL Albert State College (<i>exempted</i> 11-1-98)	125	GRAND River Dam Authority	300
Department of CENTRAL Services (<i>Formerly:</i> Office of PUBLIC Affairs) - <i>See</i> Title 580		Group Self-Insurance Association GUARANTY Fund Board	302
CEREBRAL Palsy Commission	130	Individual Self-Insured GUARANTY Fund Board	303
Commission on CHILDREN and Youth	135	STATE Use Committee (<i>Formerly:</i> Committee on Purchases of Products and Services of the Severely HANDICAPPED ; <i>consolidated under</i> Office of Management and Enterprise Services 8-26-11 - <i>See</i> Title 260)	304
Board of CHIROPRACTIC Examiners	140	Office of DISABILITY Concerns (<i>Formerly:</i> Office of HANDICAPPED Concerns)	305
Oklahoma Department of EMERGENCY Management (<i>Formerly:</i> Department of CIVIL Emergency Management)	145	Oklahoma State Department of HEALTH	310
Oklahoma Department of COMMERCE	150	Oklahoma Basic HEALTH Benefits Board (<i>abolished</i> 11-1-97)	315
COMMUNITY Hospitals Authority	152	Oklahoma HEALTH Care Authority	317
COMPSOURCE Oklahoma (<i>Formerly:</i> State INSURANCE Fund) - <i>See</i> Title 370		HIGHWAY Construction Materials Technician Certification Board	318
Oklahoma CONSERVATION Commission	155	Oklahoma HISTORICAL Society	320
CONSTRUCTION Industries Board	158	Oklahoma HORSE Racing Commission	325
Department of CONSUMER Credit	160	Oklahoma HOUSING Finance Agency	330
CORPORATION Commission	165	Oklahoma HUMAN Rights Commission	335
Department of CORRECTIONS	170	Department of HUMAN Services	340
State Board of COSMETOLOGY and Barbering	175	Committee for INCENTIVE Awards for State Employees	345
Oklahoma State CREDIT Union Board	180	Oklahoma INDIAN Affairs Commission	350
CRIME Victims Compensation Board	185	Oklahoma INDIGENT Defense System	352
Joint CRIMINAL Justice System Task Force Committee	190	Oklahoma INDUSTRIAL Finance Authority	355
Board of DENTISTRY	195	INJURY Review Board	357
Oklahoma DEVELOPMENT Finance Authority	200	Oklahoma State and Education Employees Group INSURANCE Board (<i>consolidated under</i> Office of Management and Enterprise Services 8-26-11 - <i>See</i> Title 260)	360
		INSURANCE Department	365

Agency	Title	Agency	Title
COMPSOURCE Oklahoma		PUBLIC Employees Relations Board	585
(Formerly: State INSURANCE Fund)	370	Oklahoma PUBLIC Employees Retirement System	590
Oklahoma State Bureau of INVESTIGATION	375	Department of PUBLIC Safety	595
Council on JUDICIAL Complaints	376	REAL Estate Appraiser Board	600
Office of JUVENILE Affairs	377	Oklahoma REAL Estate Commission	605
Department of LABOR	380	Board of Regents of REDLANDS Community College (<i>exempted</i>	
Department of the Commissioners of the LAND Office	385	11-1-98)	607
Council on LAW Enforcement Education and Training	390	State REGENTS for Higher Education	610
Oklahoma LAW Enforcement Retirement System	395	State Department of REHABILITATION Services	612
Board on LEGISLATIVE Compensation	400	Board of Regents of ROGERS State College (<i>exempted</i> 11-1-98)	615
Oklahoma Department of LIBRARIES	405	Board of Regents of ROSE State College (<i>exempted</i> 11-1-98)	620
LIEUTENANT Governor	410	Oklahoma SAVINGS and Loan Board (<i>abolished</i> 7-1-93)	625
Oklahoma LINKED Deposit Review Board	415	SCENIC Rivers Commission	630
Oklahoma LIQUEFIED Petroleum Gas Board	420	Oklahoma Commission on SCHOOL and County Funds	
Oklahoma LIQUEFIED Petroleum Gas Research, Marketing and Safety		Management	635
Commission	422	Advisory Task Force on the Sale of SCHOOL Lands (<i>functions</i>	
LITERACY Initiatives Commission	425	<i>concluded</i> 2-92)	640
LONG-RANGE Capital Planning Commission	428	The Oklahoma School of SCIENCE and Mathematics	645
Oklahoma State Board of Examiners for LONG-TERM Care		Oklahoma Center for the Advancement of SCIENCE and	
Administrators (Formerly: Oklahoma State Board of Examiners		Technology	650
for NURSING Home Administrators) - See Title 490		SECRETARY of State	655
LOTTERY Commission, Oklahoma	429	Department of SECURITIES	660
Board of Trustees for the MCCURTAIN County Higher Education		Board of Regents of SEMINOLE State College (<i>exempted</i>	
Program (<i>exempted</i> 11-1-98)	430	11-1-98)	665
Office of MANAGEMENT and Enterprise Services (Formerly: Office		SHEEP and Wool Commission	670
of State FINANCE) - See Title 260		State Board of Licensed SOCIAL Workers	675
Commission on MARGINALLY Producing Oil and Gas Wells	432	SOUTHERN Growth Policies Board	680
State Board of MEDICAL Licensure and Supervision	435	Oklahoma SOYBEAN Commission (<i>abolished</i> 7-1-97)	685
MEDICAL Technology and Research Authority of Oklahoma	440	Board of Examiners for SPEECH-LANGUAGE Pathology and	
Board of MEDICOLEGAL Investigations	445	Audiology (Formerly: Board of Examiners for SPEECH	
Department of MENTAL Health and Substance Abuse Services	450	Pathology and Audiology)	690
MERIT Protection Commission	455	STATE Employee Charitable Contributions, Oversight	
MILITARY Planning Commission, Oklahoma Strategic	457	Committee for (Formerly: STATE Agency	
Department of MINES	460	Review Committee)	695
Oklahoma MOTOR Vehicle Commission	465	STATE Use Committee (Formerly: Committee on Purchases of Products	
Board of Regents of MURRAY State College (<i>exempted</i> 11-1-98)	470	and Services of the Severely HANDICAPPED) - See Title 304	
Oklahoma State Bureau of NARCOTICS and Dangerous Drugs		Oklahoma STUDENT Loan Authority	700
Control	475	TASK Force 2000	705
Board of Regents of NORTHERN Oklahoma College (<i>exempted</i>		Oklahoma TAX Commission	710
11-1-98)	480	Oklahoma Commission for TEACHER Preparation (<i>merged under</i>	
Oklahoma Board of NURSING	485	<i>Office of Educational Quality and Accountability</i> 7-1-14 - See Title	
Oklahoma State Board of Examiners for LONG-TERM Care		218)	712
Administrators (Formerly: Oklahoma State Board of Examiners		TEACHERS' Retirement System	715
for NURSING Home Administrators)	490	State TEXTBOOK Committee	720
Board of Regents of OKLAHOMA City Community College (<i>exempted</i>		TOBACCO Settlement Endowment Trust Fund	723
11-1-98)	495	Oklahoma TOURISM and Recreation Department	725
Board of Regents of OKLAHOMA Colleges (<i>exempted</i> 11-1-98)	500	Department of TRANSPORTATION	730
Board of Examiners in OPTOMETRY	505	Oklahoma TRANSPORTATION Authority (<i>Name changed to</i>	
State Board of OSTEOPATHIC Examiners	510	Oklahoma TURNPIKE Authority 11-1-05) - See Title 731	
PARDON and Parole Board	515	Oklahoma TURNPIKE Authority (Formerly: Oklahoma	
Oklahoma PEANUT Commission	520	TRANSPORTATION Authority AND Oklahoma TURNPIKE	
Oklahoma State PENSION Commission	525	Authority) - See also Title 745	731
State Board of Examiners of PERFUSIONISTS	527	State TREASURER	735
Office of PERSONNEL Management (<i>consolidated under</i> Office		Board of Regents of TULSA Community College (<i>exempted</i>	
of Management and Enterprise Services 8-26-11 - See Title		11-1-98)	740
260)	530	Oklahoma TURNPIKE Authority (<i>Name changed to</i> Oklahoma	
Board of Commercial PET Breeders (<i>abolished</i> 7-1-12 - See Title		TRANSPORATION Authority 11-1-99 - no rules enacted in this	
35)	532	Title - See Title 731)	745
Oklahoma State Board of PHARMACY	535	Oklahoma UNIFORM Building Code Commission	748
PHYSICIAN Manpower Training Commission	540	Board of Trustees for the UNIVERSITY Center at Tulsa (<i>exempted</i>	
Board of PODIATRIC Medical Examiners	545	11-1-98)	750
Oklahoma POLICE Pension and Retirement System	550	UNIVERSITY Hospitals Authority	752
State Department of POLLUTION Control (<i>abolished</i> 1-1-93)	555	UNIVERSITY Hospitals Trust	753
POLYGRAPH Examiners Board	560	Board of Regents of the UNIVERSITY of Oklahoma (<i>exempted</i>	
Oklahoma Board of PRIVATE Vocational Schools	565	11-1-98)	755
State Board for PROPERTY and Casualty Rates		Board of Regents of the UNIVERSITY of Science and Arts	
(<i>abolished</i> 7-1-06; see also Title 365)	570	of Oklahoma (<i>exempted</i> 11-1-98)	760
State Board of Examiners of PSYCHOLOGISTS	575	Oklahoma USED Motor Vehicle and Parts Commission	765
Department of CENTRAL Services (Formerly: Office of PUBLIC		Oklahoma Department of VETERANS Affairs	770
Affairs; consolidated under Office of Management and Enterprise		Board of VETERINARY Medical Examiners	775
Services 8-26-11 - See Title 260)	580	Statewide VIRTUAL Charter School Board	777

Agency/Title Index – *continued*

Agency	Title	Agency	Title
Oklahoma Department of CAREER and Technology Education (Formerly: Oklahoma Department of VOCATIONAL and Technical Education)	780	Oklahoma WHEAT Commission	795
Oklahoma WATER Resources Board	785	Department of WILDLIFE Conservation	800
Board of Regents of WESTERN Oklahoma State College (<i>exempted</i> <i>11-1-98</i>)	790	WILL Rogers and J.M. Davis Memorials Commission	805
		Oklahoma WORKERS' Compensation Commission	810

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 265. STATE FIRE MARSHAL COMMISSION CHAPTER 50. FIRE EXTINGUISHER INDUSTRY

[OAR Docket #16-895]

RULEMAKING ACTION:

Notice of proposed PERMANENT rulemaking

PROPOSED RULES:

Subchapter 3. License Requirements
265:50-3-2 [AMENDED]

SUMMARY:

The proposed rules are to define changes to Examination and Re-examination procedures as set forth in 265:50-3-2(a)(1)(G) and 265:50-3-2(c).

AUTHORITY:

Title 59 O.S. Supp. 2007, §1820.1 et seq.; State Fire Marshal Commission

COMMENT PERIOD:

Persons may submit written comments up to 10:00 a.m. on February 3, 2017 to Sam Schafnitt, State Fire Marshal's Office, 2401 NW 23rd Street, Suite 4, Oklahoma City, OK 73107, or by email to Sam.Schafnitt@fire.ok.gov.

PUBLIC HEARING:

A public hearing will be held at 10:00 a.m. on Friday, February 3, 2017, at the State Fire Marshal's Office, 2401 NW 23rd Street, Suite 4, Oklahoma City, OK 73107. Anyone who wishes to speak must sign in at the front door by 10:05 a.m.

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 the 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 to Sam Schafnitt at the above address before the close of the comment period on February 3, 2017.

COPIES OF PROPOSED RULES:

Copies of the proposed rules may be obtained from the State Fire Marshal's Office, 2401 NW 23rd Street, Suite 4, Oklahoma City, OK 73107, or by email request to Susie.Cain@fire.ok.gov.

RULE IMPACT STATEMENT:

Pursuant to 75 O.S. §303(D), a rule impact statement will be prepared and available on or after the publication of this

notice on January 3, 2017 at the same location listed above for reviewing and obtaining copies of the proposed rules.

CONTACT PERSON:

Sam Schafnitt, Assistant State Fire Marshal, (405) 522.5014, Sam.Schafnitt@fire.ok.gov.

[OAR Docket #16-895; filed 12-8-16]

TITLE 590. OKLAHOMA PUBLIC EMPLOYEES RETIREMENT SYSTEM CHAPTER 10. PUBLIC EMPLOYEES RETIREMENT SYSTEM

[OAR Docket #16-887]

RULEMAKING ACTION:

Notice of proposed PERMANENT rulemaking

PROPOSED RULES:

Chapter 10. Public Employees Retirement System
[AMENDED]

SUMMARY:

Additions, revocations and amendments are proposed necessitating permanent rulemaking action. The agency is considering proposals which are designed to make the administration of the Oklahoma Public Employees Retirement System more efficient and member service oriented. The topics include the payment of benefits and unpaid contributions to unnamed beneficiaries and Step-Up for elected members.

AUTHORITY:

Oklahoma Public Employees Retirement System Board of Trustees, pursuant to 74 O.S. Section 909.

COMMENT PERIOD:

Persons wishing to present their views orally or in writing may do so before 4:30 p.m. on February 15, 2017, by mail or hand-delivery, to the offices of Oklahoma Public Employees Retirement System, 5801 N. Broadway Extension, Suite 200, Oklahoma City, Oklahoma 73118.

PUBLIC HEARING:

A Public Hearing will be held to provide an opportunity for persons to present their views orally at 1:30 p.m., Thursday, February 16, 2017, in the Board Room of the Oklahoma Public Employees Retirement System, 5801 N. Broadway Extension, Suite 200, Oklahoma City, Oklahoma 73118.

REQUESTS FOR COMMENTS FROM BUSINESS ENTITIES:

n/a

Notices of Rulemaking Intent

COPIES OF PROPOSED RULES:

Copies of the proposed rules may be obtained for review by the public between 8:00 a.m. and 4:30 p.m., Monday through Friday, (excluding legal holidays) from Dessa Baker-Inman, General Counsel, at the offices of the Oklahoma Public Employees Retirement System, 5801 N. Broadway Extension, Suite 200, Oklahoma City, Oklahoma 73118, or on the OPERS website at www.opers.ok.gov.

RULE IMPACT STATEMENT:

A rule impact statement will be prepared as required by 75 O.S. Section 303(D), and will be available on and after January 7, 2017, at the offices of the Oklahoma Public Employees Retirement System, 5801 N. Broadway Extension, Suite 200, Oklahoma City, Oklahoma 73118, or on the OPERS website at www.opers.ok.gov.

CONTACT PERSON:

Dessa Baker-Inman, General Counsel (405) 858-6737.

[OAR Docket #16-887; filed 12-5-16]

TITLE 590. OKLAHOMA PUBLIC EMPLOYEES RETIREMENT SYSTEM CHAPTER 15. UNIFORM RETIREMENT SYSTEM FOR JUSTICES AND JUDGES

[OAR Docket #16-888]

RULEMAKING ACTION:

Notice of proposed PERMANENT rulemaking

PROPOSED RULES:

Chapter 15. Uniform Retirement System for Justices and Judges [AMENDED]

SUMMARY:

Additions, revocations and amendments are proposed necessitating permanent rulemaking action. The agency is considering proposals which are designed to make the administration of the Uniform Retirement System for Justices and Judges more efficient and member service oriented. The topics include the addition of the new Defined Contribution System to the formula for the reimbursement of administrative expenses to OPERS.

AUTHORITY:

Oklahoma Public Employees Retirement System Board of Trustees, pursuant to 20 O.S. Section 1108.

COMMENT PERIOD:

Persons wishing to present their views orally or in writing may do so before 4:30 p.m. on February 15, 2017, by mail or hand-delivery, to the offices of Oklahoma Public Employees Retirement System, 5801 N. Broadway Extension, Suite 200, Oklahoma City, Oklahoma 73118.

PUBLIC HEARING:

A Public Hearing will be held to provide an opportunity for persons to present their views orally at 1:30 p.m., Thursday, February 16, 2017, in the Board Room of the Oklahoma Public Employees Retirement System, 5801 N. Broadway Extension, Suite 200, Oklahoma City, Oklahoma 73118.

REQUESTS FOR COMMENTS FROM BUSINESS ENTITIES:

n/a

COPIES OF PROPOSED RULES:

Copies of the proposed rules may be obtained for review by the public between 8:00 a.m. and 4:30 p.m., Monday through Friday, (excluding legal holidays) from Dessa Baker-Inman, General Counsel, at the offices of the Oklahoma Public Employees Retirement System, 5801 N. Broadway Extension, Suite 200, Oklahoma City, Oklahoma 73118, or on the OPERS website at www.opers.ok.gov.

RULE IMPACT STATEMENT:

A rule impact statement will be prepared as required by 75 O.S. Section 303(D), and will be available on and after January 7, 2017, at the offices of the Oklahoma Public Employees Retirement System, 5801 N. Broadway Extension, Suite 200, Oklahoma City, Oklahoma 73118, or on the OPERS website at www.opers.ok.gov.

CONTACT PERSON:

Dessa Baker-Inman, General Counsel (405) 858-6737.

[OAR Docket #16-888; filed 12-5-16]

TITLE 590. OKLAHOMA PUBLIC EMPLOYEES RETIREMENT SYSTEM CHAPTER 25. DEFERRED COMPENSATION

[OAR Docket #16-889]

RULEMAKING ACTION:

Notice of proposed PERMANENT rulemaking

PROPOSED RULES:

Chapter 25. Deferred Compensation [AMENDED]

SUMMARY:

Additions, revocations and amendments are proposed necessitating permanent rulemaking action. The agency is considering proposals which are designed to make the administration of the Deferred Compensation Plan more efficient and member service oriented. The topics include the addition of the new Defined Contribution System to the formula for the reimbursement of administrative expenses to OPERS.

AUTHORITY:

Oklahoma Public Employees Retirement System Board of Trustees, pursuant to 74 O.S. Section 1701.

COMMENT PERIOD:

Persons wishing to present their views orally or in writing may do so before 4:30 p.m. on February 15, 2017, by mail or hand-delivery, to the offices of Oklahoma Public Employees Retirement System, 5801 N. Broadway Extension, Suite 200, Oklahoma City, Oklahoma 73118.

PUBLIC HEARING:

A Public Hearing will be held to provide an opportunity for persons to present their views orally at 1:30 p.m., Thursday, February 16, 2017, in the Board Room of the Oklahoma Public

Employees Retirement System, 5801 N. Broadway Extension, Suite 200, Oklahoma City, Oklahoma 73118.

REQUESTS FOR COMMENTS FROM BUSINESS ENTITIES:

n/a

COPIES OF PROPOSED RULES:

Copies of the proposed rules may be obtained for review by the public between 8:00 a.m. and 4:30 p.m., Monday through Friday, (excluding legal holidays) from Dessa Baker-Inman, General Counsel, at the offices of the Oklahoma Public Employees Retirement System, 5801 N. Broadway Extension, Suite 200, Oklahoma City, Oklahoma 73118, or on the OPERS website at www.opers.ok.gov.

RULE IMPACT STATEMENT:

A rule impact statement will be prepared as required by 75 O.S. Section 303(D), and will be available on and after January 7, 2017, at the offices of the Oklahoma Public Employees Retirement System, 5801 N. Broadway Extension, Suite 200, Oklahoma City, Oklahoma 73118, or on the OPERS website at www.opers.ok.gov .

CONTACT PERSON:

Dessa Baker-Inman, General Counsel (405) 858-6737.

[OAR Docket #16-889; filed 12-5-16]

**TITLE 590. OKLAHOMA PUBLIC EMPLOYEES RETIREMENT SYSTEM
CHAPTER 35. DEFERRED SAVINGS INCENTIVE PLAN**

[OAR Docket #16-890]

RULEMAKING ACTION:

Notice of proposed PERMANENT rulemaking

PROPOSED RULES:

Chapter 35. Deferred Savings Incentive Plan [AMENDED]

SUMMARY:

Additions, revocations and amendments are proposed necessitating permanent rulemaking action. The agency is considering proposals which are designed to make the administration of the Deferred Savings Incentive Plan more efficient and member service oriented. The topics include the addition of the new Defined Contribution System to the formula for the reimbursement of administrative expenses to OPERS.

AUTHORITY:

Oklahoma Public Employees Retirement System Board of Trustees, pursuant to 74 O.S. Section 1707.

COMMENT PERIOD:

Persons wishing to present their views orally or in writing may do so before 4:30 p.m. on February 15, 2017, by mail or hand-delivery, to the offices of Oklahoma Public Employees Retirement System, 5801 N. Broadway Extension, Suite 200, Oklahoma City, Oklahoma 73118.

PUBLIC HEARING:

A Public Hearing will be held to provide an opportunity for persons to present their views orally at 1:30 p.m., Thursday, February 16, 2017, in the Board Room of the Oklahoma Public Employees Retirement System, 5801 N. Broadway Extension, Suite 200, Oklahoma City, Oklahoma 73118.

REQUESTS FOR COMMENTS FROM BUSINESS ENTITIES:

n/a

COPIES OF PROPOSED RULES:

Copies of the proposed rules may be obtained for review by the public between 8:00 a.m. and 4:30 p.m., Monday through Friday, (excluding legal holidays) from Dessa Baker-Inman, General Counsel, at the offices of the Oklahoma Public Employees Retirement System, 5801 N. Broadway Extension, Suite 200, Oklahoma City, Oklahoma 73118, or on the OPERS website at www.opers.ok.gov.

RULE IMPACT STATEMENT:

A rule impact statement will be prepared as required by 75 O.S. Section 303(D), and will be available on and after January 7, 2017, at the offices of the Oklahoma Public Employees Retirement System, 5801 N. Broadway Extension, Suite 200, Oklahoma City, Oklahoma 73118, or on the OPERS website at www.opers.ok.gov .

CONTACT PERSON:

Dessa Baker-Inman, General Counsel (405) 858-6737.

[OAR Docket #16-890; filed 12-5-16]

**TITLE 590. OKLAHOMA PUBLIC EMPLOYEES RETIREMENT SYSTEM
CHAPTER 40. DEFINED CONTRIBUTION SYSTEM**

[OAR Docket #16-891]

RULEMAKING ACTION:

Notice of proposed PERMANENT rulemaking

PROPOSED RULES:

Chapter 40. Defined Contribution System [AMENDED]

SUMMARY:

Additions, revocations and amendments are proposed necessitating permanent rulemaking action. The agency is considering proposals which are designed to make the administration of the Defined Contribution System more efficient and member service oriented. The topics include the clarification of the addition of the Defined Contribution System to the formula for the reimbursement of administrative expenses to OPERS and a change to the option period for voluntary deferral changes.

AUTHORITY:

Oklahoma Public Employees Retirement System Board of Trustees, pursuant to 74 O.S. Section 909.

Notices of Rulemaking Intent

COMMENT PERIOD:

Persons wishing to present their views orally or in writing may do so before 4:30 p.m. on February 15, 2017, by mail or hand-delivery, to the offices of Oklahoma Public Employees Retirement System, 5801 N. Broadway Extension, Suite 200, Oklahoma City, Oklahoma 73118.

PUBLIC HEARING:

A Public Hearing will be held to provide an opportunity for persons to present their views orally at 1:30 p.m., Thursday, February 16, 2017, in the Board Room of the Oklahoma Public Employees Retirement System, 5801 N. Broadway Extension, Suite 200, Oklahoma City, Oklahoma 73118.

REQUESTS FOR COMMENTS FROM BUSINESS ENTITIES:

n/a

COPIES OF PROPOSED RULES:

Copies of the proposed rules may be obtained for review by the public between 8:00 a.m. and 4:30 p.m., Monday through Friday, (excluding legal holidays) from Dessa Baker-Inman, General Counsel, at the offices of the Oklahoma Public Employees Retirement System, 5801 N. Broadway Extension, Suite 200, Oklahoma City, Oklahoma 73118, or on the OPERS website at www.opers.ok.gov.

RULE IMPACT STATEMENT:

A rule impact statement will be prepared as required by 75 O.S. Section 303(D), and will be available on and after January 7, 2017, at the offices of the Oklahoma Public Employees Retirement System, 5801 N. Broadway Extension, Suite 200, Oklahoma City, Oklahoma 73118, or on the OPERS website at www.opers.ok.gov.

CONTACT PERSON:

Dessa Baker-Inman, General Counsel (405) 858-6737.

[OAR Docket #16-891; filed 12-5-16]

TITLE 612. STATE DEPARTMENT OF REHABILITATION SERVICES CHAPTER 1. ADMINISTRATIVE OPERATIONS

[OAR Docket #16-871]

RULEMAKING ACTION:

Notice of proposed PERMANENT rulemaking

PROPOSED RULES:

Subchapter 1. General Provisions

612:1-1-6. Description of forms and instructions issued by the Department for public use [AMENDED]

Subchapter 3. Administrative Components of the Department

612:1-3-2.1. The Chief of Staff of Rehabilitation Services [AMENDED]

612:1-3-10. Final signature authority [AMENDED]

Subchapter 5. Program Divisions Within the Department

612:1-5-1. Overview of the department [AMENDED]

612:1-5-3. Division of ~~Vocational Rehabilitation for the Blind & Visually Impaired~~ Visual Services (~~DRBVIDVS~~) [AMENDED]

SUMMARY:

The majority of the changes throughout Chapter 1 consist of the division name change of Vocational Rehabilitation for the Blind & Visually Impaired (VRBVI) becoming Visual Services (VS). Additional changes include removing specific names of publications, forms and instructions and use general descriptive language.

AUTHORITY:

Commission for Rehabilitation Services; 74 O.S. § 166.1 et seq.; 74 O.S. § 166.2

COMMENT PERIOD:

Written and oral comments will be accepted December 5, 2016 through February 8, 2017 during regular business hours by contacting Tina Calloway, Department of Rehabilitation Services, 3535 NW 58th Suite 500, Oklahoma City, Oklahoma 73112, Telephone 405-951-3552.

PUBLIC HEARING:

Monday, February 6, 2017

4:00 P.M. - 6:00 P.M.

Department of Rehabilitation Services

2nd Floor Conference Room

3535 N.W. 58th Street

Oklahoma City, Oklahoma

Tuesday, February 7, 2017

1:00 P.M. - 3:00 P.M.

Total Source for Hearing-loss and Access

8740 E. 11th St., Conference Room

Tulsa, Oklahoma

Wednesday, February 8, 2017

1:00 P.M. - 3:00 P.M.

Great Plains Technology Center

4500 W. Lee Blvd., Bldg. 300, Room 301A

Worley Seminar Center

Lawton, Oklahoma

REQUEST FOR COMMENTS FROM BUSINESS ENTITIES:

The Department of Rehabilitation Services (DRS) requests that business entities affected by these rules provide the DRS, within the comment period, in dollar amounts, if possible, information on any increase in direct costs, such as fees, and indirect costs, such as those associated with reporting, recordkeeping, equipment, construction, labor, professional services, revenue loss, or other costs expected to be incurred by a particular entity **due to** compliance with the proposed rules.

COPIES OF PROPOSED RULES:

Copies of the proposed rules may be obtained from: the DRS Web Site www.okdrs.gov by e-mail policycomment@okdrs.gov by letter to the Policy Development Unit, attention Tina Calloway, Department of Rehabilitation Services, 3535 N.W. 58th, Suite 500, Oklahoma City, Oklahoma 73112 or by calling (405) 951-3552 - Toll free 1-800-845-8476.

RULE IMPACT STATEMENT:

Pursuant to 75 O.S., § 303 (D), a rule impact statement will be issued and made available after January 4, 2017, at the Department of Rehabilitation Services office at the above address.

CONTACT PERSON:

Tina Calloway, Rulemaking Liaison, (405) 951-3552

[OAR Docket #16-871; filed 11-29-16]

**TITLE 612. STATE DEPARTMENT OF REHABILITATION SERVICES
CHAPTER 10. VOCATIONAL REHABILITATION AND VOCATIONAL REHABILITATION FOR THE BLIND & VISUALLY IMPAIRED VISUAL SERVICES**

[OAR Docket #16-872]

RULEMAKING ACTION:

Notice of proposed PERMANENT rulemaking

PROPOSED RULES:

- Subchapter 1. General Provisions
 - 612:10-1-1. Purpose [AMENDED]
 - 612:10-1-2. Definitions [AMENDED]
 - 612:10-1-3. Basic philosophy of rehabilitation programs [AMENDED]
 - 612:10-1-3.1. Procedural exceptions [AMENDED]
 - 612:10-1-3.2. Pilot projects [AMENDED]
 - 612:10-1-5. Confidentiality [AMENDED]
 - 612:10-1-6. Due process [AMENDED]
 - 612:10-1-7. Purchase of services and goods for individuals with disabilities [AMENDED]
- Subchapter 3. Client Participation in Cost of Services
 - 612:10-3-2. Consideration of comparable services and benefits [AMENDED]
 - 612:10-3-3. Client participation in services cost and financial status determination [AMENDED]
 - 612:10-3-4. Services exempt from client participation in service costs [AMENDED]
- Subchapter 7. Vocational Rehabilitation and ~~Vocational Rehabilitation for the Blind & Visually Impaired~~ Visual Services
 - Part 1. Scope of Vocational Rehabilitation and ~~Vocational Rehabilitation for the Blind & Visually Impaired~~ Visual Services
 - 612:10-7-1. Overview of Vocational Rehabilitation and ~~Vocational Rehabilitation for the Blind & Visually Impaired~~ Visual Services [AMENDED]
 - 612:10-7-2. Field staff responsibilities [AMENDED]
 - 612:10-7-3. Client responsibilities [AMENDED]
 - Part 3. Case Processing Requirements
 - 612:10-7-21.1. Processing incoming referrals [AMENDED]
 - 612:10-7-21.2. Information and referral system [AMENDED]

- 612:10-7-24.2. Assessment for determining eligibility [AMENDED]
- 612:10-7-24.3 Trial Work Experience and Extended Evaluation [AMENDED]
- 612:10-7-25.1. Order of selection [AMENDED]
- 612:10-7-31. Transfer of cases [AMENDED]
- Part 5. Case Status and Classification System
- 612:10-7-50. Eligibility Status [AMENDED]
- 612:10-7-51. Individualized Plan for Employment [AMENDED]
- 612:10-7-56. Employment [AMENDED]
- Part 9. Actions Requiring Review and Approval
- 612:10-7-87. Actions requiring supervisor's approval [AMENDED]
- Part 11. Physical and Mental Restoration Services
- 612:10-7-98. General guidelines for physical and mental restoration services [AMENDED]
- Part 13. Supportive Services
- 612:10-7-130. Maintenance [AMENDED]
- Part 15. Training
- 612:10-7-142. General guidelines for training services [AMENDED]
- 612:10-7-149. College and university training [AMENDED]
- 612:10-7-150. Continued eligibility for college or university training [AMENDED]
- 612:10-7-152. Payment of tuition and fees at colleges and universities [AMENDED]
- 612:10-7-158. Training for individuals in custody of the Department of Corrections [AMENDED]
- 612:10-7-161. Public and Private vocational schools [AMENDED]
- 612:10-7-162. Textbooks, supplies, training tools and equipment [AMENDED]
- 612:10-7-170. Work experience, internship and apprenticeship [NEW]
- Part 17. Supportive Employment Services
- 612:10-7-183. Ongoing support services [AMENDED]
- 612:10-7-184. Extended services [AMENDED]
- Part 19. Special Services for Individuals who are Blind, Deaf, or have other Severe Disabilities
- 612:10-7-199. Reader/recording services [AMENDED]
- 612:10-7-201. Rehabilitation teaching services [AMENDED]
- 612:10-7-203. Orientation and Mobility (O & M) [AMENDED]
- 612:10-7-205. Services to persons who are deaf-blind [AMENDED]
- 612:10-7-206. Assistive technology services for individuals with visual impairments [AMENDED]
- Part 21. Purchase of Equipment, Occupational Licenses and Certifications
- 612:10-7-216. Tools, occupational equipment, initial stocks and supplies [AMENDED]
- Part 25. Transition from School to Work Program
- 612:10-7-245. Definitions [AMENDED]

Notices of Rulemaking Intent

Subchapter 9. Rehabilitation Teaching Services
Part 3. Case Processing and Recording
612:10-9-17. Application Status [AMENDED]
Subchapter 11. Independent Living Services for Older and
Individuals who are Blind
Part 1. Scope of Services
612:10-11-7. Administrative review [AMENDED]

SUMMARY:

The majority of changes throughout Chapter 10 consist of the division name change of Vocational Rehabilitation for the Blind & Visually Impaired (VRBVI) becoming Visual Services (VS). Additional changes consist of clarifying terms and updating language to reflect current use of terms and removal of antiquated language. The addition of a new policy to authorize DRS to assist clients to participate in work experiences, internships and apprenticeships which are training options encouraged under WIOA.

AUTHORITY:

Commission for Rehabilitation Services; 74 O.S. § 166.1 et seq.; 74 O.S. § 166.2; 34 CFR 361; 34 CFR 361.5(c); 34 CFR 361.5(19)(v); 34 CFR 361.13(c); 34 CFR 361.74; 29 USC 701 et seq.; 29 USC 705; 29 USC 705(13); 29 USC 721(a)(2);

COMMENT PERIOD:

Written and oral comments will be accepted December 5, 2016 through February 8, 2017 during regular business hours by contacting Tina Calloway, Department of Rehabilitation Services, 3535 NW 58th Suite 500, Oklahoma City, Oklahoma 73112, Telephone 405-951-3552.

PUBLIC HEARING:

Monday, February 6, 2017
4:00 P.M. - 6:00 P.M.
Department of Rehabilitation Services
2nd Floor Conference Room
3535 N.W. 58th Street
Oklahoma City, Oklahoma
Tuesday, February 7, 2017
1:00 P.M. - 3:00 P.M.
Total Source for Hearing-loss and Access
8740 E. 11th St., Conference Room
Tulsa, Oklahoma
Wednesday, February 8, 2017
1:00 P.M. - 3:00 P.M.
Great Plains Technology Center
4500 W. Lee Blvd., Bldg. 300, Room 301A
Worley Seminar Center
Lawton, Oklahoma

REQUEST FOR COMMENTS FROM BUSINESS ENTITIES:

The Department of Rehabilitation Services (DRS) requests that business entities affected by these rules provide the DRS, within the comment period, in dollar amounts, if possible, information on any increase in direct costs, such as fees, and indirect costs, such as those associated with reporting, recordkeeping, equipment, construction, labor, professional services, revenue loss, or other costs expected to be incurred by a particular entity **due to** compliance with the proposed rules.

COPIES OF PROPOSED RULES:

Copies of the proposed rules may be obtained from: the DRS Web Site www.okdrs.gov by e-mail policycomment@okdrs.gov by letter to the Policy Development Unit, attention Tina Calloway, Department of Rehabilitation Services, 3535 N.W. 58th, Suite 500, Oklahoma City, Oklahoma 73112 or by calling (405) 951-3552 - Toll free 1-800-845-8476.

RULE IMPACT STATEMENT:

Pursuant to 75 O.S., § 303 (D), a rule impact statement will be issued and made available after January 4, 2017, at the Department of Rehabilitation Services office at the above address.

CONTACT PERSON:

Tina Calloway, Rulemaking Liaison, (405) 951-3552

[OAR Docket #16-872; filed 11-29-16]

TITLE 612. STATE DEPARTMENT OF REHABILITATION SERVICES CHAPTER 15. OKLAHOMA LIBRARY FOR THE BLIND AND PHYSICALLY HANDICAPPED (OLBPH)

[OAR Docket #16-873]

RULEMAKING ACTION:

Notice of proposed PERMANENT rulemaking

PROPOSED RULES:

Subchapter 1. General Provisions
612:15-1-3. Library functions and legal basis
[AMENDED]
Subchapter 5. Library Loan Policy
612:15-5-2. Suspension procedures [AMENDED]

SUMMARY:

Changes to Chapter 15 consist of the division name change of Vocational Rehabilitation for the Blind & Visually Impaired (VRBVI) becoming Visual Services (VS).

AUTHORITY:

Commission for Rehabilitation Services; 74 O.S. § 166.2

COMMENT PERIOD:

Written and oral comments will be accepted December 5, 2016 through February 8, 2017 during regular business hours by contacting Tina Calloway, Department of Rehabilitation Services, 3535 NW 58th Suite 500, Oklahoma City, Oklahoma 73112, Telephone 405-951-3552.

PUBLIC HEARING:

Monday, February 6, 2017
4:00 P.M. - 6:00 P.M.
Department of Rehabilitation Services
2nd Floor Conference Room
3535 N.W. 58th Street
Oklahoma City, Oklahoma
Tuesday, February 7, 2017
1:00 P.M. - 3:00 P.M.
Total Source for Hearing-loss and Access

8740 E. 11th St., Conference Room
Tulsa, Oklahoma
Wednesday, February 8, 2017
1:00 P.M. - 3:00 P.M.
Great Plains Technology Center
4500 W. Lee Blvd., Bldg. 300, Room 301A
Worley Seminar Center
Lawton, Oklahoma

REQUEST FOR COMMENTS FROM BUSINESS ENTITIES:

The Department of Rehabilitation Services (DRS) requests that business entities affected by these rules provide the DRS, within the comment period, in dollar amounts, if possible, information on any increase in direct costs, such as fees, and indirect costs, such as those associated with reporting, recordkeeping, equipment, construction, labor, professional services, revenue loss, or other costs expected to be incurred by a particular entity **due to** compliance with the proposed rules.

COPIES OF PROPOSED RULES:

Copies of the proposed rules may be obtained from: the DRS Web Site www.okdrs.gov by e-mail policycomment@okdrs.gov by letter to the Policy Development Unit, attention Tina Calloway, Department of Rehabilitation Services, 3535 N.W. 58th, Suite 500, Oklahoma City, Oklahoma 73112 or by calling (405) 951-3552 - Toll free 1-800-845-8476.

RULE IMPACT STATEMENT:

Pursuant to 75 O.S., § 303 (D), a rule impact statement will be issued and made available after January 4, 2017, at the Department of Rehabilitation Services office at the above address.

CONTACT PERSON:

Tina Calloway, Rulemaking Liaison, (405) 951-3552

[OAR Docket #16-873; filed 11-29-16]

**TITLE 612. STATE DEPARTMENT OF REHABILITATION SERVICES
CHAPTER 20. SPECIAL SCHOOLS**

[OAR Docket #16-874]

RULEMAKING ACTION:

Notice of proposed PERMANENT rulemaking

PROPOSED RULES:

Subchapter 3. General Operating Procedures for the Schools

Part 1. General Educational Policies

612:20-3-5. Departmental resources [AMENDED]

SUMMARY:

Changes to Chapter 20 consist of the division name change of Vocational Rehabilitation for the Blind & Visually Impaired (VRBVI) becoming Visual Services (VS).

AUTHORITY:

Commission for Rehabilitation Services; 74 O.S. § 166.2

COMMENT PERIOD:

Written and oral comments will be accepted December 5, 2016 through February 8, 2017 during regular business hours by contacting Tina Calloway, Department of Rehabilitation Services, 3535 NW 58th Suite 500, Oklahoma City, Oklahoma 73112, Telephone 405-951-3552.

PUBLIC HEARING:

Monday, February 6, 2017

4:00 P.M. - 6:00 P.M.

Department of Rehabilitation Services

2nd Floor Conference Room

3535 N.W. 58th Street

Oklahoma City, Oklahoma

Tuesday, February 7, 2017

1:00 P.M. - 3:00 P.M.

Total Source for Hearing-loss and Access

8740 E. 11th St., Conference Room

Tulsa, Oklahoma

Wednesday, February 8, 2017

1:00 P.M. - 3:00 P.M.

Great Plains Technology Center

4500 W. Lee Blvd., Bldg. 300, Room 301A

Worley Seminar Center

Lawton, Oklahoma

REQUEST FOR COMMENTS FROM BUSINESS ENTITIES:

The Department of Rehabilitation Services (DRS) requests that business entities affected by these rules provide the DRS, within the comment period, in dollar amounts, if possible, information on any increase in direct costs, such as fees, and indirect costs, such as those associated with reporting, recordkeeping, equipment, construction, labor, professional services, revenue loss, or other costs expected to be incurred by a particular entity **due to** compliance with the proposed rules.

COPIES OF PROPOSED RULES:

Copies of the proposed rules may be obtained from: the DRS Web Site www.okdrs.gov by e-mail policycomment@okdrs.gov by letter to the Policy Development Unit, attention Tina Calloway, Department of Rehabilitation Services, 3535 N.W. 58th, Suite 500, Oklahoma City, Oklahoma 73112 or by calling (405) 951-3552 - Toll free 1-800-845-8476.

RULE IMPACT STATEMENT:

Pursuant to 75 O.S., § 303 (D), a rule impact statement will be issued and made available after January 4, 2017, at the Department of Rehabilitation Services office at the above address.

CONTACT PERSON:

Tina Calloway, Rulemaking Liaison, (405) 951-3552

[OAR Docket #16-874; filed 11-29-16]

Notices of Rulemaking Intent

TITLE 612. STATE DEPARTMENT OF REHABILITATION SERVICES CHAPTER 25. BUSINESS ENTERPRISE PROGRAM

[OAR Docket #16-875]

RULEMAKING ACTION:

Notice of proposed PERMANENT rulemaking

PROPOSED RULES:

Subchapter 2. General Provisions

612:25-2-5. Definitions [AMENDED]

Subchapter 4. The State Licensing Agency

Part 1. Organization and General Operation Standards

612:25-4-1. Organization of the State Licensing Agency
[AMENDED]

Part 3. Business Enterprise Program Training

612:25-4-14. Training for new or potential licensed
managers [AMENDED]

Part 11. Business Enterprise Program Auditing and Due
Process [AMENDED]

612:25-4-73. Due Process [AMENDED]

SUMMARY:

Changes to Chapter 25 consist of the division name change of Vocational Rehabilitation for the Blind & Visually Impaired (VRBVI) becoming Visual Services (VS).

AUTHORITY:

Commission for Rehabilitation Services; 74 O.S. § 166.2

COMMENT PERIOD:

Written and oral comments will be accepted December 5, 2016 through February 8, 2017 during regular business hours by contacting Tina Calloway, Department of Rehabilitation Services, 3535 NW 58th Suite 500, Oklahoma City, Oklahoma 73112, Telephone 405-951-3552.

PUBLIC HEARING:

Monday, February 6, 2017

4:00 P.M. - 6:00 P.M.

Department of Rehabilitation Services

2nd Floor Conference Room

3535 N.W. 58th Street

Oklahoma City, Oklahoma

Tuesday, February 7, 2017

1:00 P.M. - 3:00 P.M.

Total Source for Hearing-loss and Access

8740 E. 11th St., Conference Room

Tulsa, Oklahoma

Wednesday, February 8, 2017

1:00 P.M. - 3:00 P.M.

Great Plains Technology Center

4500 W. Lee Blvd., Bldg. 300, Room 301A

Worley Seminar Center

Lawton, Oklahoma

REQUEST FOR COMMENTS FROM BUSINESS ENTITIES:

The Department of Rehabilitation Services (DRS) requests that business entities affected by these rules provide the DRS,

within the comment period, in dollar amounts, if possible, information on any increase in direct costs, such as fees, and indirect costs, such as those associated with reporting, recordkeeping, equipment, construction, labor, professional services, revenue loss, or other costs expected to be incurred by a particular entity **due to** compliance with the proposed rules.

COPIES OF PROPOSED RULES:

Copies of the proposed rules may be obtained from: the DRS Web Site www.okdrs.gov by e-mail policycomment@okdrs.gov by letter to the Policy Development Unit, attention Tina Calloway, Department of Rehabilitation Services, 3535 N.W. 58th, Suite 500, Oklahoma City, Oklahoma 73112 or by calling (405) 951-3552 - Toll free 1-800-845-8476.

RULE IMPACT STATEMENT:

Pursuant to 75 O.S., § 303 (D), a rule impact statement will be issued and made available after January 4, 2017, at the Department of Rehabilitation Services office at the above address.

CONTACT PERSON:

Tina Calloway, Rulemaking Liaison, (405) 951-3552

[OAR Docket #16-875; filed 11-29-16]

TITLE 777. STATEWIDE VIRTUAL CHARTER SCHOOL BOARD CHAPTER 1. ADMINISTRATIVE OPERATIONS

[OAR Docket #16-884]

RULEMAKING ACTION:

Notice of proposed PERMANENT rulemaking

PROPOSED RULES:

Subchapter 1. General Provisions

777:1-1-5. [AMENDED]

777:1-1-9. [AMENDED]

SUMMARY:

These proposed rule changes are to clean-up the grammar errors in the current rules and to clarify the appeals process.

AUTHORITY:

Oklahoma Charter Schools Act; 70 O.S., §3-145.3; Statewide Virtual Charter School Board

COMMENT PERIOD:

Persons wishing to present their views in writing may do so before 5:00 p.m. on February 3, 2017 at the following address: Statewide Virtual Charter School Board, 2500 North Lincoln Boulevard, Suite 4-37, Oklahoma City, OK 73105.

PUBLIC HEARING:

A public hearing will be held to provide an opportunity for persons to orally present their views. Each person will be allowed a maximum of 5 minutes to speak and must sign in at the door by 12:45 p.m. The public hearing will be held at 1:00 p.m. on Tuesday, February 14, 2017 at 2500 North Lincoln Boulevard, Oklahoma City, OK, 73105.

REQUESTS FOR COMMENTS FROM BUSINESS ENTITIES:

Business entities affected by these proposed rules are requested to provide the agency, within the comment period, in dollar amounts if possible, the increase in the 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 by the conclusion of the comment period on February 3, 2017, at the Statewide Virtual Charter School Board, 2500 North Lincoln Boulevard, Suite 4-37, Oklahoma City, OK 73105.

COPIES OF PROPOSED RULES:

Copies of the proposed rules may be obtained from the Statewide Virtual Charter School Board, 2500 North Lincoln Boulevard, Suite 4-37, Oklahoma City, OK 73105. The proposed rules are also available on the Board's website at <https://svcsb.ok.gov>.

RULE IMPACT STATEMENT:

Pursuant to 75 O.S., §303(D), a rule impact statement will be prepared and may be obtained from the Statewide Virtual Charter School Board at the above address beginning January 3, 2017.

CONTACT PERSON:

Dr. Rebecca Wilkinson, Executive Director, (405) 522-0717, Rebecca.Wilkinson@svcsb.ok.gov

[OAR Docket #16-884; filed 12-5-16]

**TITLE 777. STATEWIDE VIRTUAL CHARTER SCHOOL BOARD
CHAPTER 10. STATEWIDE VIRTUAL CHARTER SCHOOLS**

[OAR Docket #16-885]

RULEMAKING ACTION:

Notice of proposed PERMANENT rulemaking

PROPOSED RULES:

- Subchapter 1. General Provisions
 - 777:10-1-2. [AMENDED]
 - 777:10-1-3. [NEW]
- Subchapter 3. Statewide Virtual Charter School Sponsorship
 - 777:10-3-3. [AMENDED]
 - 777:10-3-4. [NEW]
 - 777:10-3-5. [AMENDED]
- Subchapter 5. Statewide Virtual Charter School Facilities
 - 777:10-5-3. [AMENDED]

SUMMARY:

These proposed rule changes are to clean-up grammar errors in the current rules; to propose a new rule for school establishment requirements; to set forth the application timeline; to clarify application requirements; to add required contract terms; to update renewal application requirements; to implement the performance framework; to set forth the school data submission requirements; to set forth the process for

school closure; to clarify the school site approval requirements; and to remove unnecessary language.

AUTHORITY:

Oklahoma Charter Schools Act; 70 O.S., §3-145.3; Statewide Virtual Charter School Board

COMMENT PERIOD:

Persons wishing to present their views in writing may do so before 5:00 p.m. on February 3, 2017 at the following address: Statewide Virtual Charter School Board, 2500 North Lincoln Boulevard, Suite 4-37, Oklahoma City, OK 73105.

PUBLIC HEARING:

A public hearing will be held to provide an opportunity for persons to orally present their views. Each person will be allowed a maximum of 5 minutes to speak and must sign in at the door by 12:45 p.m. The public hearing will be held at 1:00 p.m. on Tuesday, February 14, 2017 at 2500 North Lincoln Boulevard, Oklahoma City, OK, 73105.

REQUESTS FOR COMMENTS FROM BUSINESS ENTITIES:

Business entities affected by these proposed rules are requested to provide the agency, within the comment period, in dollar amounts if possible, the increase in the 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 by the conclusion of the comment period on February 3, 2017, at the Statewide Virtual Charter School Board, 2500 North Lincoln Boulevard, Suite 4-37, Oklahoma City, OK 73105.

COPIES OF PROPOSED RULES:

Copies of the proposed rules may be obtained from the Statewide Virtual Charter School Board, 2500 North Lincoln Boulevard, Suite 4-37, Oklahoma City, OK 73105. The proposed rules are also available on the Board's website at <https://svcsb.ok.gov>.

RULE IMPACT STATEMENT:

Pursuant to 75 O.S., §303(D), a rule impact statement will be prepared and may be obtained from the Statewide Virtual Charter School Board at the above address beginning January 3, 2017.

CONTACT PERSON:

Dr. Rebecca Wilkinson, Executive Director, (405) 522-0717, Rebecca.Wilkinson@svcsb.ok.gov

[OAR Docket #16-885; filed 12-5-16]

**TITLE 777. STATEWIDE VIRTUAL CHARTER SCHOOL BOARD
CHAPTER 15. OKLAHOMA SUPPLEMENTAL ONLINE COURSE CERTIFICATION**

[OAR Docket #16-886]

RULEMAKING ACTION:

Notice of proposed PERMANENT rulemaking

Notices of Rulemaking Intent

PROPOSED RULES:

- 777:15-1-1. [NEW]
- 777:15-1-2. [NEW]
- 777:15-1-3. [NEW]
- 777:15-1-4. [NEW]
- 777:15-1-5. [NEW]
- 777:15-1-6. [NEW]
- 777:15-1-7. [NEW]
- 777:15-1-8. [NEW]
- 777:15-1-9. [NEW]

SUMMARY:

These rules are being proposed for the purpose of implementing policy and procedures pursuant to Oklahoma Statute Title 70, Section 3-145.3, which directed the Statewide Virtual Charter School Board (SVCSB) to make publicly available a list of supplemental online courses which it has reviewed and certified to ensure that the courses are high quality options and are aligned with the subject matter standards adopted by the State of Oklahoma. In conjunction with the Office of Management and Enterprise Services (OMES), the SVCSB negotiates with online course providers to offer a state rate price to school districts for supplemental online courses.

AUTHORITY:

Oklahoma Charter Schools Act; 70 O.S., §3-145.3; Statewide Virtual Charter School Board

COMMENT PERIOD:

Persons wishing to present their views in writing may do so before 5:00 p.m. on February 3, 2017 at the following address: Statewide Virtual Charter School Board, 2500 North Lincoln Boulevard, Suite 4-37, Oklahoma City, OK 73105.

PUBLIC HEARING:

A public hearing will be held to provide an opportunity for persons to orally present their views. Each person will be

allowed a maximum of 5 minutes to speak and must sign in at the door by 12:45 p.m. The public hearing will be held at 1:00 p.m. on Tuesday, February 14, 2017 at 2500 North Lincoln Boulevard, Oklahoma City, OK, 73105.

REQUESTS FOR COMMENTS FROM BUSINESS ENTITIES:

Business entities affected by these proposed rules are requested to provide the agency, within the comment period, in dollar amounts if possible, the increase in the 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 by the conclusion of the comment period on February 3, 2017, at the Statewide Virtual Charter School Board, 2500 North Lincoln Boulevard, Suite 4-37, Oklahoma City, OK 73105.

COPIES OF PROPOSED RULES:

Copies of the proposed rules may be obtained from the Statewide Virtual Charter School Board, 2500 North Lincoln Boulevard, Suite 4-37, Oklahoma City, OK 73105. The proposed rules are also available on the Board's website at <https://svcsb.ok.gov>.

RULE IMPACT STATEMENT:

Pursuant to 75 O.S., §303(D), a rule impact statement will be prepared and may be obtained from the Statewide Virtual Charter School Board at the above address beginning January 3, 2017.

CONTACT PERSON:

Dr. Rebecca Wilkinson, Executive Director, (405) 522-0717, Rebecca.Wilkinson@svcsb.ok.gov

[OAR Docket #16-886; filed 12-5-16]

Emergency Adoptions

"If an agency finds that a rule is necessary as an emergency measure, the rule may be promulgated" if the Governor approves the rules after determining "that the rule is necessary as an emergency measure to do any of the following:

- a. protect the public health, safety or welfare,
- b. comply with deadlines in amendments to an agency's governing law or federal programs,
- c. avoid violation of federal law or regulation or other state law,
- d. avoid imminent reduction to the agency's budget, or
- e. avoid serious prejudice to the public interest." [75 O.S., Section 253(A)]

An emergency rule is considered promulgated immediately upon approval by the Governor, and effective immediately upon the Governor's approval or a later date specified by the agency in the emergency rule document. An emergency rule expires on September 15 following the next regular legislative session after its 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 cites to 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 317. OKLAHOMA HEALTH CARE AUTHORITY CHAPTER 30. MEDICAL PROVIDERS-FEE FOR SERVICE

[OAR Docket #16-876]

RULEMAKING ACTION:

EMERGENCY adoption

RULES:

Subchapter 3. General Provider Policies
Part 1. General Scope and Administration
317:30-3-19.2 [NEW]

(Reference APA WF # 16-08)

AUTHORITY:

The Oklahoma Health Care Authority Board; The Oklahoma Health Care Authority Act, Section 5003 through 5016 of Title 63 of Oklahoma Statutes; Section 6401(a) and (b) of the Affordable Care Act; 42 CFR 455.405 - 455.470 and 42 CFR 457.990

ADOPTION:

October 13, 2016

APPROVED BY GOVERNOR:

November 22, 2016

EFFECTIVE:

Immediately upon Governor's approval

EXPIRATION:

Effective through September 14, 2017, 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 and finds that an imminent peril exists to the preservation of the public health, safety, or welfare which necessitates promulgation of emergency rules. The agency requests emergency approval of rule revisions to general provider policies in order to comply with the Affordable Care Act. Revisions implement screening procedures for provider applicants determined at increased categorical risk for fraud, waste and abuse, including defining which applicants to be screened, defining the Credentialing Advisory Group which will review the applications and specifying the types of criminal convictions which will result in the applicant being denied enrollment.

ANALYSIS:

These emergency revisions are necessary in order to comply with enhanced enrollment screening provisions for providers with various risk levels who pose an increased financial risk of fraud, waste or abuse to the SoonerCare program. Rules add information regarding applicants subject to review as being applicants identified on a state or federal sanction database and/or applicants identified through a fingerprint based criminal background check. Rules also add information about the Credentialing Advisory Group who are

responsible for reviewing an application from the aforementioned applicants and rules also specify types of criminal convictions for which an applicant shall (regarding felonies) or may (regarding misdemeanors) be denied enrollment.

CONTACT PERSON:

Tywanda Cox at (405)522-7153

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(F):

SUBCHAPTER 3. GENERAL PROVIDER POLICIES

PART 1. GENERAL SCOPE AND ADMINISTRATION

317:30-3-19.2. Denial of application for new or renewed provider enrollment contract based on criminal history

(a) **Definitions.** The following words and terms, when used in this section, shall have the following meaning:

(1) **"Applicant"** means providers, persons with a five percent or more direct or indirect ownership interest therein, as well as providers' officers, directors, and managing employees.

(2) **"Criminal conviction"** means an individual or entity has been convicted of a criminal offense pursuant to 42 U.S.C. § 1320a-7(i).

(b) **High risk applicants.** Applicants designated as "high risk in accordance with Federal law, including, but not limited to, 42 C.F.R. § 424.518 and 42 C.F.R. Part 455, Subpart E, or if otherwise required by State and/or Federal law, shall be subject to a fingerprint-based criminal background check as a condition of new or renewed contract enrollment.

(c) **Reasons for enrollment denial.** Any applicant subject to a fingerprint-based criminal background check as provided in subsection (b) of this Section, shall be denied enrollment if he/she has a felonious criminal conviction and may be denied

Emergency Adoptions

enrollment for a misdemeanor criminal conviction relating, but not limited, to:

- (1) The provision of services under Medicare, Medicaid, or any other Federal or State health care program;
 - (2) Homicide, murder, or non-negligent manslaughter;
 - (3) Aggravated assault;
 - (4) Kidnapping;
 - (5) Robbery;
 - (6) Abandonment, abuse, or negligence of a child;
 - (7) Human trafficking;
 - (8) Negligence and/or abuse of a patient;
 - (9) Forcible rape and/or sexual assault;
 - (10) Terrorism;
 - (11) Embezzlement, fraud, theft, breach of fiduciary duty, or other financial misconduct; and/or
 - (12) Controlled Substances.
- (d) Appeal rights. There is no right to appeal any OHCA decision denying an application for contract enrollment based on the applicant's criminal history. However, nothing in this section shall preclude an applicant whose criminal conviction has been overturned on final appeal, and for whom no other appeals are pending or may be brought, from reapplying for enrollment.

[OAR Docket #16-876; filed 11-30-16]

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

[OAR Docket #16-877]

RULEMAKING ACTION:

EMERGENCY adoption

RULES:

Subchapter 5. Individual Providers And Specialties

Part 1. Physicians

317:30-5-2 [AMENDED]

(Reference APA WF # 16-12)

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 455.410; OAC 435:10-11-3.1

ADOPTION:

October 13, 2016

APPROVED BY GOVERNOR:

November 22, 2016

EFFECTIVE:

Immediately upon Governor's approval

EXPIRATION:

Effective through September 14, 2017, 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 and finds that an imminent peril exists to the preservation of the public health, safety, or welfare which necessitates promulgation of emergency rules. The revisions for medical licensure requirements are necessary to comply with federal regulations that require all ordering or referring physicians be enrolled as participating providers. Further revisions are requested to comply with current

Waiver authority authorizing SoonerCare Choice members' additional primary care visits, ensuring access to necessary primary care services are not impacted. The Agency also request emergency approval of rule revisions to obstetrical reimbursement. The unbundled billing method may be different from billing practices utilized for private payers, resulting in several methods of billing for administrative staff. This would create an unintended administrative burden to providers billing obstetrical services. Without the revisions, providers have threatened to discontinue services to our SoonerCare members which would result in a threat to the public health, safety and welfare of our women and the unborn child.

ANALYSIS:

These emergency revisions are necessary in order to clarify licensing provisions and contracting requirements for medical residents, to reinstate the bundled reimbursement structure for obstetrical care, and to clarify direct physician care visit limits. Proposed revisions remove language specific to non-licensed physicians in a training program. The revisions for medical licensure requirements are necessary to comply with federal regulations that require all ordering or referring physicians be enrolled as participating providers. Rules regarding reimbursement for obstetrical care are amended to reinstate the use of the global CPT codes for routine obstetrical care billing. The reinstatement of the global reimbursement is necessary to prevent an unintended administrative burden to providers. Finally, the proposed revisions regarding direct physician care visit limits clarify that SoonerCare Choice members are exempt from primary care office visits limits. The proposed revision is necessary to comply with current Waiver parameters and to ensure the access to care for Choice members is not impacted.

CONTACT PERSON:

Tywanda Cox at (405)522-7153

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(F):

SUBCHAPTER 5. INDIVIDUAL PROVIDERS AND SPECIALTIES

PART 1. PHYSICIANS

317:30-5-2. General coverage by category

(a) **Adults.** Payment for adults is made to physicians for medical and surgical services within the scope of the Oklahoma Health Care Authority's (OHCA) SoonerCare program, provided the services are reasonable and necessary for the diagnosis and treatment of illness or injury, or to improve the functioning of a malformed body member. Coverage of certain services must be based on a determination made by the OHCA's medical consultant in individual circumstances.

(1) Coverage includes the following medically necessary services:

- (A) Inpatient hospital visits for all SoonerCare covered stays. All inpatient services are subject to post-payment review by the OHCA, or its designated agent.
- (B) Inpatient psychotherapy by a physician.
- (C) Inpatient psychological testing by a physician.
- (D) One inpatient visit per day, per physician.
- (E) Certain surgical procedures performed in a Medicare certified free-standing ambulatory surgery center (ASC) or a Medicare certified hospital that offers outpatient surgical services.

(F) Therapeutic radiology or chemotherapy on an outpatient basis without limitation to the number of treatments per month for members with proven malignancies.

~~(G) Direct physician services on an outpatient basis. A maximum of four visits are allowed per month per member in office or home regardless of the number of physicians providing treatment. Additional visits per month are allowed for those services related to emergency medical conditions and for services in connection with Family Planning. Sooner-Care Choice members are exempt from the four visits per month limitation.~~

(G) Physician services on an outpatient basis include:

(i) A maximum of four primary care visits per member per month, with the exception of Sooner-Care Choice members, or

(ii) A maximum of four specialty visits per member per month.

(iii) Additional visits are allowed per month for treatment related to emergency medical conditions and Family Planning services.

(H) Direct physician services in a nursing facility for those members residing in a long-term care facility. A maximum of two nursing facility visits per month are allowed. To receive payment for a second nursing facility visit in a month denied by Medicare for a Medicare/SoonerCare member, attach the EOMB from Medicare showing denial and mark "carrier denied coverage".

(I) Diagnostic x-ray and laboratory services.

(J) Mammography screening and additional follow-up mammograms as per current guidelines.

(K) Obstetrical care.

(L) Pacemakers and prostheses inserted during the course of a surgical procedure.

(M) Prior authorized examinations for the purpose of determining medical eligibility for programs administered by OHCA. A copy of the authorization, OKDHS form 08MA016E, Authorization for Examination and Billing, must accompany the claim.

(N) If a physician renders direct care to a member on the same day as a dialysis treatment, payment is allowed for a separately identifiable service unrelated to the dialysis.

(O) Family planning includes sterilization procedures for legally competent members 21 years of age and over who voluntarily request such a procedure and execute the federally mandated consent form with his/her physician. A copy of the consent form must be attached to the claim form. Separate payment is allowed for the insertion and/or implantation of contraceptive devices during an office visit. Certain family planning products may be obtained through the Vendor Drug Program. Reversal of sterilization procedures for the purposes of conception is not allowed. Reversal of sterilization procedures are

allowed when medically indicated and substantiating documentation is attached to the claim.

(P) Genetic counseling.

(Q) Laboratory testing.

(R) Payment for ultrasounds for pregnant women as specified in OAC 317:30-5-22.

(S) Payment to the attending physician in a teaching medical facility for compensable services when the physician signs as claimant and renders personal and identifiable services to the member in conformity with federal regulations.

(T) Payment to the attending physician for the services of a currently Oklahoma licensed physician in training when the following conditions are met:

(i) Attending physician performs chart review and signs off on the billed encounter;

(ii) Attending physician is present in the clinic/or hospital setting and available for consultation; and

(iii) Documentation of written policy and applicable training of physicians in the training program regarding when to seek the consultation of the attending physician.

~~(U) Payment to the attending physician for the outpatient services of an unlicensed physician in a training program when the following conditions are met:~~

~~(i) The member must be at least minimally examined by the attending physician or a licensed physician under the supervision of the attending physician;~~

~~(ii) The contact must be documented in the medical record.~~

(U) Payment for services rendered by medical residents in an outpatient academic setting when the following conditions are met:

(i) the resident has obtained a medical license or a special license for training from the appropriate regulatory state medical board; and

(ii) has the appropriate contract on file with the OHCA to render services within the scope of their license.

(V) The payment to a physician for medically directing the services of a CRNA or for the direct supervision of the services of an Anesthesiologist Assistant (AA) is limited. The maximum allowable fee for the services of both providers combined is limited to the maximum allowable had the service been performed solely by the anesthesiologist.

(W) Screening and follow up Pap Smears as per current guidelines.

(X) Medically necessary solid organ and bone marrow/stem cell transplantation services for children and adults are covered services based upon the conditions listed in (i)-(iv) of this subparagraph:

(i) Transplant procedures, except kidney and cornea, must be prior authorized to be compensable.

Emergency Adoptions

- (ii) To be prior authorized all procedures are reviewed based on appropriate medical criteria.
 - (iii) To be compensable under the SoonerCare program, all organ transplants must be performed at a facility which meets the requirements contained in Section 1138 of the Social Security Act.
 - (iv) Procedures considered experimental or investigational are not covered.
- (Y) Donor search and procurement services are covered for transplants consistent with the methods used by the Medicare program for organ acquisition costs.
- (Z) Donor expenses incurred for complications are covered only if they are directly and immediately attributable to the donation procedure. Donor expenses that occur after the 90 day global reimbursement period must be submitted to the OHCA for review.
- (AA) Total parenteral nutritional therapy (TPN) for identified diagnoses and when prior authorized.
- (BB) Ventilator equipment.
- (CC) Home dialysis equipment and supplies.
- (DD) Ambulatory services for treatment of members with tuberculosis (TB). This includes, but is not limited to, physician visits, outpatient hospital services, rural health clinic visits and prescriptions. Drugs prescribed for the treatment of TB beyond the prescriptions covered under SoonerCare require prior authorization by the University of Oklahoma College of Pharmacy Help Desk using form "Petition for TB Related Therapy". Ambulatory services to members infected with TB are not limited to the scope of the SoonerCare program, but require prior authorization when the scope is exceeded.
- (EE) Smoking and Tobacco Use Cessation Counseling for treatment of members using tobacco.
- (i) Smoking and Tobacco Use Cessation Counseling consists of the 5As:
 - (I) Asking the member to describe their smoking use;
 - (II) Advising the member to quit;
 - (III) Assessing the willingness of the member to quit;
 - (IV) Assisting the member with referrals and plans to quit; and
 - (V) Arranging for follow-up.
 - (ii) Up to eight sessions are covered per year per individual.
 - (iii) Smoking and Tobacco Use Cessation Counseling is a covered service when performed by physicians, physician assistants, advanced registered nurse practitioners, certified nurse midwives, dentists, Oklahoma State Health Department and FQHC nursing staff, and Maternal/Child Health Licensed Clinical Social Workers with a certification as a Tobacco Treatment Specialist Certification (CTTS). It is reimbursed in addition to any other appropriate ~~claims~~ global payments

for obstetrical care, PCP care coordination payments, evaluation and management codes, or other appropriate services rendered. It must be a significant, separately identifiable service, unique from any other service provided on the same day.

(iv) Chart documentation must include a separate note that addresses the 5A's and office note signature along with the member specific information addressed in the five steps and the time spent by the practitioner performing the counseling. Anything under three minutes is considered part of a routine visit and not separately billable.

(FF) Immunizations as specified by the Advisory Committee on Immunization Practices (ACIP) guidelines.

(GG) Genetic testing is covered when medically necessary. Genetic testing may be considered medically necessary when the following conditions are met:

- (i) The member displays clinical features of a suspected genetic condition or is at direct risk of inheriting the genetic condition in question (e.g., a causative familial variant has been identified); and

- (ii) Clinical studies published in peer-reviewed literature have established strong evidence that the result of the test will positively impact the clinical decision-making or clinical outcome for the member; and

- (iii) The testing method is proven to be scientifically valid for the identification of a specific genetically-linked inheritable disease or clinically important molecular marker; and

- (iv) A medical geneticist physician or licensed genetic counselor provides documentation that supports the recommendation for testing based on a review of risk factors, clinical scenario, and family history.

(2) General coverage exclusions include the following:

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

- (B) Services or any expense incurred for cosmetic surgery.

- (C) Services of two physicians for the same type of service to the same member on the same day, except when supplemental skills are required and different specialties are involved.

- (D) Routine eye examinations for the sole purpose of prescribing glasses or visual aids, determination of refractive state, treatment of refractive errors or purchase of lenses, frames or visual aids.

- (E) Pre-operative care within 24 hours of the day of admission for surgery and routine post-operative care as defined under the global surgery guidelines promulgated by Current Procedural Terminology (CPT) and the Centers for Medicare and Medicaid Services (CMS).

- (F) Payment to the same physician for both an outpatient visit and admission to hospital on the same date.
- (G) Sterilization of members who are under 21 years of age, mentally incompetent, or institutionalized or reversal of sterilization procedures for the purposes of conception.
- (H) Non-therapeutic hysterectomies.
- (I) Medical services considered experimental or investigational.
- (J) Payment for more than four outpatient visits per ~~month~~member (home or office) per ~~member~~month, except ~~those~~—visits in connection with family planning ~~or~~ services related to emergency medical conditions; or primary care services provided to SoonerCare Choice members.
- (K) Payment for more than two nursing facility visits per month.
- (L) More than one inpatient visit per day per physician.
- (M) Physician services which are administrative in nature and not a direct service to the member including such items as quality assurance, utilization review, treatment staffing, tumor board review or multidisciplinary opinion, dictation, and similar functions.
- (N) Charges for completion of insurance forms, abstracts, narrative reports or telephone calls.
- (O) Payment for the services of social workers, licensed family counselors, registered nurses or other ancillary staff, except as specifically set out in OHCA rules.
- (P) Induced abortions, except when certified in writing by a physician that the abortion was necessary due to a physical disorder, injury or illness, including a life-endangering physical condition caused by or arising from the pregnancy itself, that would place the woman in danger of death unless an abortion is performed, or that the pregnancy is the result of an act of rape or incest. (Refer to OAC 317:30-5-6 or 317:30-5-50.)
- (Q) Speech and Hearing services.
- (R) Mileage.
- (S) A routine hospital visit on the date of discharge unless the member expired.
- (T) Direct payment to perfusionist as this is considered part of the hospital reimbursement.
- (U) Inpatient chemical dependency treatment.
- (V) Fertility treatment.
- (W) Payment for removal of benign skin lesions.
- (X) Sleep studies.

(b) **Children.** Payment is made to physicians for medical and surgical services for members under the age of 21 within the scope of the Authority's SoonerCare program, provided the services are medically necessary for the diagnosis and treatment of illness or injury, or to improve the functioning of a malformed body member. Medical and surgical services for children are comparable to those listed for adults. For services rendered to a minor child, the child's parent or court-appointed

legal guardian must provide written authorization prior to the service being rendered, unless there is an explicit state or federal exception to this requirement. In addition to those services listed for adults, the following services are covered for children.

(1) **Pre-authorization of inpatient psychiatric services.** All inpatient psychiatric services for members under 21 years of age must be prior authorized by an agency designated by the Oklahoma Health Care Authority. All psychiatric services are prior authorized for an approved length of stay. Non-authorized inpatient psychiatric services are not SoonerCare compensable.

(A) All residential and acute psychiatric services are authorized based on the medical necessity criteria as described in OAC 317:30-5-95.25,317:30-5-95.27 and 317:30-5-95.29.

(B) Out of state placements are not authorized unless it is determined that the needed medical services are more readily available in another state or it is a general practice for members in a particular border locality to use resources in another state. If a medical emergency occurs while a member is out of the State, treatment for medical services is covered as if provided within the State. A prime consideration for placements is proximity to the family or guardian in order to involve the family or guardian in discharge and reintegration planning.

(2) **General acute care inpatient service limitations.** All general acute care inpatient hospital services for members under the age of 21 are not limited. All inpatient care must be medically necessary.

(3) **Procedures for requesting extensions for inpatient services.** The physician and/or facility must provide necessary justification to enable OHCA, or its designated agent, to make a determination of medical necessity and appropriateness of treatment options. Extension requests for psychiatric admissions must be submitted to the OHCA or its designated agent. Extension requests must contain the appropriate documentation validating the need for continued treatment in accordance with the medical necessity criteria described in OAC 317:30-5-95.26, 317:30-5-95.28 and 317:30-5-95.30. Requests must be made prior to the expiration of the approved inpatient stay. All decisions of OHCA or its designated agent are final.

(4) **Utilization control requirements for psychiatric beds.** Utilization control requirements for inpatient psychiatric services for members under 21 years of age apply to all hospitals and residential psychiatric treatment facilities.

(5) **Early and periodic screening diagnosis and treatment program.** Payment is made to eligible providers for Early and Periodic Screening, Diagnosis, and Treatment (EPSDT) of members under age 21. These services include medical, dental, vision, hearing and other necessary health care. Refer to OAC 317:30-3-65.2 through 317:30-3-65.11 for specific guidelines.

(6) **Child abuse/neglect findings.** Instances of child abuse and/or neglect discovered through screenings and

Emergency Adoptions

regular exams are to be reported in accordance with State Law. Section 7103 of Title 10 of the Oklahoma Statutes mandates reporting suspected abuse or neglect to the Oklahoma Department of Human Services. Section 7104 of Title 10 of the Oklahoma Statutes further requires reporting of criminally injurious conduct to the nearest law enforcement agency.

(7) **General exclusions.** The following are excluded from coverage for members under the age of 21:

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

(B) Services or any expense incurred for cosmetic surgery unless the physician certifies the procedure emotionally necessary.

(C) Services of two physicians for the same type of service to the same member on the same day, except when supplemental skills are required and different specialties are involved.

(D) Pre-operative care within 24 hours of the day of admission for surgery and routine post-operative care as defined under the global surgery guidelines promulgated by Current Procedural Terminology (CPT) and the Centers for Medicare and Medicaid Services (CMS).

(E) Payment to the same physician for both an outpatient visit and admission to hospital on the same date.

(F) Sterilization of members who are under 21 years of age, mentally incompetent, or institutionalized or reversal of sterilization procedures for the purposes of conception.

(G) Non-therapeutic hysterectomies.

(H) Medical Services considered experimental or investigational.

(I) More than one inpatient visit per day per physician.

(J) Induced abortions, except when certified in writing by a physician that the abortion was necessary due to a physical disorder, injury or illness, including a life-endangering physical condition caused by or arising from the pregnancy itself, that would place the woman in danger of death unless an abortion is performed, or that the pregnancy is the result of an act of rape or incest. (Refer to OAC 317:30-5-6 or 317:30-5-50.)

(K) Physician services which are administrative in nature and not a direct service to the member including such items as quality assurance, utilization review, treatment staffing, tumor board review or multidisciplinary opinion, dictation, and similar functions.

(L) Payment for the services of social workers, licensed family counselors, registered nurses or other ancillary staff, except as specifically set out in OHCA rules.

(M) Direct payment to perfusionist as this is considered part of the hospital reimbursement.

(N) Charges for completion of insurance forms, abstracts, narrative reports or telephone calls.

(O) Mileage.

(P) A routine hospital visit on date of discharge unless the member expired.

(c) **Individuals eligible for Part B of Medicare.** Payment is made utilizing the OHCA allowable for comparable services. Claims filed with Medicare Part B should automatically cross over to OHCA. The explanation of Medicare Benefits (EOMB) reflects a message that the claim was referred to SoonerCare. If such a message is not present, a claim for coinsurance and deductible must be filed with the OHCA within 90 days of the date of Medicare payment and within one year of the date of service in order to be considered timely filed.

(1) In certain circumstances, some claims do not automatically "cross over". Providers must file a claim for coinsurance and/or deductible to SoonerCare within 90 days of the Medicare payment and within one year from the date of service.

(2) If payment was denied by Medicare Part B and the service is a SoonerCare covered service, mark the claim "denied by Medicare" and attach the Medicare EOMB showing the reason for the denial.

[OAR Docket #16-877; filed 11-30-16]

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

[OAR Docket #16-878]

RULEMAKING ACTION:

EMERGENCY adoption

RULES:

Subchapter 5. Individual Providers and Specialties

Part 1. Physicians

317:30-5-22 [AMENDED]

Part 19. Certified Nurse Midwives

317:30-5-226 [AMENDED]

317:30-5-229 [AMENDED]

Part 35. Rural Health Clinics

317:30-5-356 [AMENDED]

Part 75. Federally Qualified Health Centers

317:30-5-664.8 [AMENDED]

(Reference APA WF # 16-15A)

AUTHORITY:

The Oklahoma Health Care Authority Board; The Oklahoma Health Care Authority Act, Section 5003 through 5016 of Title 63 of Oklahoma Statutes; Section 1902 of Social Security Act; 42 CFR 435.116

ADOPTION:

October 13, 2016

APPROVED BY GOVERNOR:

November 22, 2016

EFFECTIVE:

Immediately upon Governor's approval

EXPIRATION:

Effective through September 14, 2017, 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 and finds that an imminent peril exists to the preservation of the public health, safety, or welfare

which necessitates promulgation of emergency rules. After meeting with stakeholders, it was determined that this change would create an unintended administrative burden to the providers billing obstetrical services. Obstetrical providers would be required to change billing practices from bundled billing to individual visit billing. The unbundled billing method may be different from billing practices utilized for private payers, resulting in several methods of billing for administrative staff. This may result in access issues or cause delays for reimbursement. In addition, training would need to be provided to new staff as this billing concept is not the standard utilized for obstetrical providers today. As a result of this change providers have threatened to discontinue services to our SoonerCare members, resulting in a threat to the public health, safety and welfare of our women and the unborn child.

ANALYSIS:

These emergency revisions are necessary in order to reinstate the use of the global care CPT codes for routine obstetrical care billing, which can be used if the provider had provided care for a member for greater than one trimester. The reinstatement of the global reimbursement is necessary to prevent an unintended administrative burden to providers.

CONTACT PERSON:

Tywanda Cox at (405)522-7153

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(F):

SUBCHAPTER 5. INDIVIDUAL PROVIDERS AND SPECIALTIES

PART 1. PHYSICIANS

317:30-5-22. Obstetrical care

~~(a) Providers of obstetrical services must bill each antepartum visit separately, utilizing the appropriate evaluation and management service code. The OHCA does not recognize the codes for "global obstetrical care" which bundle these services under a single procedure code. Delivery only and postpartum care services are also billed separately by the rendering provider.~~

~~(b) The following routine obstetrical services are covered as detailed below:~~

(a) Obstetrical (OB) care is billed using the appropriate CPT codes for Maternity Care and Delivery. The date of delivery is used as the date of service for charges for total obstetrical care. Inclusive dates of care should be indicated on the claim form as part of the description. Payment for total obstetrical care includes all routine care, and any ultrasounds performed by the attending physician provided during the maternity cycle unless otherwise specified in this Section. For payment of total OB care, a physician must have provided care for more than one trimester. To bill for prenatal care only, the claim is filed after the member leaves the provider's care. Payment for routine or minor medical problems will not be made separately to the OB physician outside of the ante partum visits. The ante partum care during the prenatal care period includes all care by the OB attending physician except major illness distinctly unrelated to the pregnancy.

(b) Procedures paid separately from total obstetrical care are listed in (1) - (8) of this subsection.

(1) The completion of an American College of Obstetricians and Gynecologist (ACOG) assessment form or form covering same elements as ACOG and the most recent version of the Oklahoma Health Care Authority's Prenatal Psychosocial Assessment are reimbursable when both documents are included in the prenatal record. SoonerCare allows one assessment per provider and no more than two per pregnancy.

(2) Medically necessary real time antepartum diagnostic ultrasounds will be paid in addition to antepartum care, delivery and postpartum obstetrical care under defined circumstances. To be eligible for payment, all ultrasound reports must meet the guideline standards published by the American Institute of Ultrasound Medicine (AIUM).

(A) One abdominal or vaginal ultrasound will be covered in the first trimester of pregnancy. The ultrasound must be performed by a Board Eligible/Board Certified Obstetrician-Gynecologist (OB-GYN), Radiologist, or a Board Eligible/Board Certified Maternal-Fetal Medicine specialist. In addition, this ultrasound may be performed by a Nurse Midwife, Family Practice Physician or Advance Practice Nurse Practitioner in Obstetrics with a certification in obstetrical ultrasonography.

(B) One ultrasound after the first trimester will be covered. This ultrasound must be performed by a Board Eligible/Board Certified Obstetrician-Gynecologist (OB-GYN), Radiologist, or a Board Eligible/Board Certified Maternal-Fetal Medicine specialist. In addition, this ultrasound may be performed by a Nurse Midwife, Family Practice Physician or Advance Practice Nurse Practitioner in Obstetrics with certification in obstetrical ultrasonography.

(C) One additional detailed ultrasound is allowed by a Board Eligible/Board Certified Maternal Fetal Specialist or general obstetrician with documented specialty training in performing detailed ultrasounds. This additional ultrasound is allowed to identify or confirm a suspected fetal/maternal anomaly. This additional ultrasound does not require prior authorization. Any subsequent ultrasounds will require prior authorization.

(3) Standby attendance at Cesarean Section (C-Section), for the purpose of attending the baby, is compensable when billed by a physician or qualified health care provider not participating in the delivery.

(4) Anesthesia administered by the attending physician is a compensable service and may be billed separately from the delivery.

(5) Amniocentesis is not included in routine obstetrical care and is billed separately. Payment may be made for an evaluation and management service and a medically indicated amniocentesis on the same date of service. This is an exception to general information regarding surgery found at OAC 317:30-5-8.

(6) Additional payment is not made for the delivery of multiple gestations. If one fetus is delivered vaginally and additional fetus(es) are delivered by C-section by the same

Emergency Adoptions

physician, the higher level procedure is paid. If one fetus is delivered vaginally and additional fetus(es) are delivered by C-Section, by different physicians, each should bill the appropriate procedure codes without a modifier. Payment is not made to the same physician for both standby and assistant at C-Section.

(7) Reimbursement is allowed for nutritional counseling in a group setting for members with gestational diabetes. Refer to OAC 317:30-5-1076(5).

(c) Assistant surgeons are paid for C-Sections which include only in-hospital post-operative care. Family practitioners who provide prenatal care and assist at C-Section ~~may~~ bill separately for the ~~antenatal~~ prenatal and the six weeks postpartum office ~~visits~~ visit.

(d) Procedures listed in (1) - (5) of this subsection are not ~~separately reimbursable~~ paid or not covered separately from total obstetrical care.

(1) Non stress test, unless the pregnancy is determined medically high risk. See OAC 317:30-5-22.1.

(2) Standby at C-Section is not compensable when billed by a physician participating in delivery.

(3) Payment is not made for an assistant surgeon for obstetrical procedures that include prenatal or postpartum care.

~~(34)~~ An additional allowance is not made for induction of labor, double set-up examinations, fetal stress tests, or pudendal anesthetic. Providers must not bill separately for these procedures.

~~(45)~~ Fetal scalp blood sampling is considered part of ~~DRG reimbursement~~ the total OB care.

(e) Obstetrical coverage for children is the same as for adults. Additional procedures may be covered under EPSDT provisions if determined to be medically necessary.

(1) Services deemed medically necessary and allowable under federal Medicaid regulations are covered by the EPSDT/OHCA Child Health Program even though those services may not be part of the Oklahoma Health Care Authority SoonerCare program. Such services must be prior authorized.

(2) Federal Medicaid regulations also require the State to make the determination as to whether the service is medically necessary and do not require the provision of any items or services that the State determines are not safe and effective or which are considered experimental.

PART 19. CERTIFIED NURSE MIDWIVES

317:30-5-226. Coverage by category

(a) ~~Adults and children 21 and under.~~ Payment is made for certified nurse midwife services within the scope of practice as defined by state law including obstetrical care such as antepartum care, delivery, postpartum care, and care of the normal newborn during the first 28 days of life. ~~Obstetrical care should be billed using the appropriate evaluation and management codes for antepartum care, as well as the appropriate delivery only and postpartum care services when~~

~~rendered. Ultrasounds and other procedures for obstetrical care are paid in accordance with OAC 317:30-5-22(b).~~

(1) Obstetrical care should be billed using the appropriate CPT codes for Maternity Care and Delivery. The date of delivery should be used as the date of service for charges for total obstetrical care. Inclusive dates of care should be indicated on the claim form as part of the description. The date the patient was first seen must be on the claim form. Payment for total obstetrical care includes all routine care. Ultrasounds and other procedures reimbursed separately from total obstetrical care are paid in accordance with provisions found at OAC 317:30-5-22(b).

(2) For payment of total OB care, the provider must have provided care for more than one trimester. To bill for prenatal care only, the claim is filed after the member leaves the provider's care. Payment for routine or minor medical problems will not be made separately to the OB provider outside of antepartum visits. The antepartum care during the prenatal care period includes all care by the OB provider except major illness distinctly unrelated to the pregnancy.

(b) **Newborn.** Payment to nurse midwives for services to newborn is the same as for adults ~~and children under 21~~. A newborn is an infant during the first 28 days following birth.

(1) Providers must use OKDHS Form FSS-NB-1, or the eNB1 application on the Secure Website to notify the county DHS office of the child's birth. A claim may then be filed for charges for the baby under the case number and the baby's name and assigned person code.

(2) Charges billed on the mother's person code for services rendered to the child will be denied.

(c) **Individuals eligible for Part B of Medicare.** Payment is made utilizing the Medicaid allowable for comparable services.

317:30-5-229. Reimbursement

In accordance with the Omnibus Budget Reconciliation Act of 1993, effective October 1, 1993, certified nurse midwife services include maternity services, as well as services outside the maternity cycle within the scope of their practice under state law.

(1) Medical verification of pregnancy is required. A written statement from the physician or certified nurse midwife verifying the applicant is pregnant and the expected date of delivery is acceptable. Pregnancy may also be verified by submission of a copy of a laboratory report indicating the individual is pregnant.

(2) Newborn charges billed on the mother's person code will be denied.

(3) Providers must use OKDHS Form FSS-NB-1 to notify the county DHS office of the child's birth.

(4) ~~Obstetrical care should be billed using the appropriate evaluation and management codes for antepartum care, as well as the appropriate delivery only and postpartum care services when rendered.~~ Obstetrical care should be billed using the appropriate CPT codes for Maternity Care and Delivery. The date of delivery should be used as

the date of service for charges for total obstetrical care. Inclusive dates of care should be indicated on the claim form as part of the description. The date the patient was first seen must be on the claim form. Payment for total obstetrical care includes all routine care performed by the attending provider. For payment of total OB care, the provider must have provided care for more than one trimester. To bill for prenatal care only, the claim is filed after the member leaves the provider's care. Payment for routine or minor medical problems will not be made separately to the OB provider outside of antepartum visits. The antepartum care during the prenatal care period includes all care by the OB provider except major illness distinctly unrelated to the pregnancy.

physician assistants, and advanced practice nurses (refer to OAC 317:30-5-22).

(iii) Under both billing methods, payment for prenatal care includes all routine or minor medical problems. No additional payment is made to the prenatal provider except in the case of a major illness distinctly unrelated to pregnancy.

(B) **Family planning services.** Family planning services are available only to members with reproductive capability. Family planning visits do not count as one of the four RHC visits per month.

(2) **Other ambulatory services.** Services defined as "other ambulatory" services are not considered a part of a RHC visit and are therefore billable to the SoonerCare program by the RHC or provider of service on the appropriate claim forms. Other ambulatory services are subject to the same scope of coverage as other SoonerCare services billed to the program, i.e., limited adult services and some services for under 21 subject to same prior authorization process. Refer to OAC 317:30-1, General Provisions, and OAC 317:30-3-57, 317:30-5-59, and 317:30-3-60 for general coverage and exclusions under the SoonerCare program. Some specific limitations are applicable to other ambulatory services as set forth in specific provider rules and excerpted as follows: Coverage under optometrists for adults is limited to treatment of eye disease not related to refractive errors. There is no coverage for eye exams for the purpose of prescribing eyeglasses, contact lenses or other visual aids. (See OAC 317:30-5-431.)

PART 35. RURAL HEALTH CLINICS

317:30-5-356. Coverage for adults

Payment is made to rural health clinics for adult services as set forth in this Section.

(1) **RHC services.** Payment is made for one encounter per member per day. Payment is also limited to four visits per member per month. Refer to OAC 317:30-1, General Provisions, and OAC 317:30-3-65.2 for exceptions to the four visit limit for children under the Early and Periodic Screening, Diagnosis and Treatment Program (EPSDT). Additional preventive service exceptions include:

(A) **Obstetrical care.** A Rural Health Clinic should have a written contract with its physician, nurse midwife, advanced practice nurse, or physician assistant that specifically identifies how obstetrical care will be billed to SoonerCare, in order to avoid duplicative billing situations. The agreement should also specifically identify the physician's compensation for rural health and non-rural health clinic (other ambulatory) services.

(i) If the clinic compensates the physician, nurse midwife or advanced practice nurse to provide obstetrical care, then the clinic must bill the SoonerCare program for each prenatal visit using the appropriate CPT evaluation and management codes.

~~(ii) If the clinic does not compensate its practitioners to provide obstetrical care, then the independent practitioner must bill the SoonerCare program for each prenatal visit using the appropriate CPT code described in the SoonerCare provider specific rules for physicians, certified nurse midwives, physician assistants, and advanced practice nurses (refer to OAC 317:30-5-22).~~ If the clinic does not compensate its practitioners to provide obstetrical care, then the independent practitioner must bill the OHCA for prenatal care according to the global method described in the SoonerCare provider specific rules for physicians, certified nurse midwives,

PART 75. FEDERALLY QUALIFIED HEALTH CENTERS

317:30-5-664.8. Obstetrical care provided by Health Centers

(a) **Billing written agreement.** In order to avoid duplicative billing situations, a Health Center must have a written agreement with its physician, certified nurse midwife, advanced practice nurse, or physician assistant that specifically identifies how obstetrical care will be billed. The agreement must specifically identify the service provider's compensation for Health Center core services and other health services that may be provided by the Center.

(b) **Prenatal or postpartum services.**

(1) If the Health Center compensates the physician, certified nurse midwife or advanced practice nurse for the provision of obstetrical care, then the Health Center bills the OHCA for each prenatal and postpartum visit separately using the appropriate CPT evaluation and management code(s) as provided in the Health Center billing manual.

~~(2) If the clinic does not compensate its practitioners to provide obstetrical care, then the independent practitioner must bill the SoonerCare program for each prenatal visit using the appropriate CPT code described in the SoonerCare provider specific rules for physicians, certified nurse midwives, physician assistants, and advanced~~

Emergency Adoptions

practice nurses (refer to OAC 317:30-5-22). If the clinic does not compensate the provider for the provision of obstetrical care, then the provider must bill the OHCA for prenatal care according to the global method described in the SoonerCare Traditional provider specific rules for physicians, certified nurse midwives, physician assistants, and advanced practice nurses (refer to OAC 317:30-5-22).
(3) Under both billing methods, payment for prenatal care includes all routine or minor medical problems. No additional payment is made to the prenatal provider except in the case of a major illness distinctly unrelated to pregnancy.

(c) **Delivery services.** Delivery services are billed using the appropriate CPT codes for delivery. If the clinic does not compensate the provider for the provision of obstetrical care, then the provider must be individually enrolled and bill for those services using his or her assigned provider number. The costs associated with the delivery must be excluded from the cost settlement/encounter rate setting process (see OAC 317:300-5-664.11).

[OAR Docket #16-878; filed 11-30-16]

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

[OAR Docket #16-879]

RULEMAKING ACTION:

EMERGENCY adoption

RULES:

Subchapter 5. Eligibility And Countable Income

Part 1. Determination Of Qualifying Categorical Relationships

317:35-5-2 [AMENDED]

Subchapter 22. Pregnancy Related Benefits Covered Under Title XXI

317:35-22-2 [AMENDED]

(Reference APA WF # 16-15B)

AUTHORITY:

The Oklahoma Health Care Authority Board; The Oklahoma Health Care Authority Act, Section 5003 through 5016 of Title 63 of Oklahoma Statutes; Section 1902 of Social Security Act; 42 CFR 435.116

ADOPTION:

October 13, 2016

APPROVED BY GOVERNOR:

November 22, 2016

EFFECTIVE:

Immediately upon Governor's approval

EXPIRATION:

Effective through September 14, 2017, 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 and finds that an imminent peril exists to the preservation of the public health, safety, or welfare which necessitates promulgation of emergency rules. After meeting with stakeholders, it was determined that this change would create an unintended administrative burden to the providers billing obstetrical services. Obstetrical providers would be required to change billing practices from bundled billing to individual visit billing. The unbundled billing method may be different from billing practices utilized for private payers, resulting in several methods of

billing for administrative staff. This may result in access issues or cause delays for reimbursement. In addition, training would need to be provided to new staff as this billing concept is not the standard utilized for obstetrical providers today. As a result of this change providers have threatened to discontinue services to our SoonerCare members, resulting in a threat to the public health, safety and welfare of our women and the unborn child.

ANALYSIS:

These emergency revisions are necessary in order to reinstate the use of the global care CPT codes for routine obstetrical care billing, which can be used if the provider had provided care for a member for greater than one trimester. The reinstatement of the global reimbursement is necessary to prevent an unintended administrative burden to providers.

CONTACT PERSON:

Tywanda Cox at (405)522-7153

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(F):

SUBCHAPTER 5. ELIGIBILITY AND COUNTABLE INCOME

PART 1. DETERMINATION OF QUALIFYING CATEGORICAL RELATIONSHIPS

317:35-5-2. Categorically related programs

(a) In order to be eligible for SoonerCare, an individual must first meet the description of a member eligibility group. For individuals related to the aged, blind, or disabled groups, categorical relationship is established using the same definitions of age, disability and blindness as used by the Social Security Administration (SSA) in determining eligibility for Supplemental Security Income (SSI) or SSA benefits. If the individual is a SSA/SSI recipient in current payment status (including presumptive eligibility), a TANF recipient, an adoption assistance or kinship guardianship assistance recipient, or is under age 19, categorical relationship is automatically established. Categorical relationship to the pregnancy group is established when the determination is made by medical evidence that the individual is or has been pregnant. Effective January 1, 2014, verification of pregnancy is only required if the individual's declaration that she is pregnant is not reasonably compatible with other information available to the agency. Pregnancy-related services include all medical services provided within the scope of the program during the prenatal, delivery and postpartum periods for women in this pregnancy group; see Subchapter 22 of this Chapter for services for unborn children covered under Title XXI. For an individual age 19 or over to be related to the parent and caretaker relative group, the individual must have a minor dependent child. For an individual to be related to the former foster care children group, the individual must not be eligible for the Title XIX pregnancy or parent or caretaker relative groups, must be aged 19-26, and must have been receiving SoonerCare as a foster care child when he/she aged out of foster care in Oklahoma. There is no income or resource test for the former foster care children group. Categorical relationship to Refugee services is established in accordance with OAC

317:35-5-25. Categorical relationship for the Breast and Cervical Cancer Treatment program is established in accordance with OAC 317:35-21. Categorical relationship for the SoonerPlan Family Planning Program is established in accordance with OAC 317:35-5-8. Categorical relationship for pregnancy related benefits covered under Title XXI is established in accordance with OAC 317:35-22. ~~Benefits for pregnancies covered under Title XXI medical services are provided within the limited scope of this particular program for antenatal care and delivery only. Each service must be billed using the appropriate CPT codes. To be eligible for SoonerCare benefits, an individual must be related to one of the following eligibility groups:~~ Benefits for pregnancies covered under Title XXI medical services are provided within the scope of the program during the prenatal, delivery and postpartum care when included in the global delivery payment. To be eligible for SoonerCare benefits, an individual must be related to one of the following eligibility groups:

- (1) Aged
 - (2) Disabled
 - (3) Blind
 - (4) Pregnancy
 - (5) Children, also including
 - (A) Newborns deemed eligible, and
 - (B) Grandfathered CHIP children
 - (6) Parents and Caretaker Relatives
 - (7) Refugee
 - (8) Breast and Cervical Cancer Treatment program
 - (9) SoonerPlan Family Planning Program
 - (10) Benefits for pregnancies covered under Title XXI
 - (11) Former foster care children.
- (b) The Authority may provide SoonerCare to reasonable categories of individuals under age 21.
- (1) Individuals eligible for SoonerCare benefits include individuals between the ages of 19 and 21:
 - (A) for whom a public agency is assuming full or partial financial responsibility who are in custody as reported by the Oklahoma Department of Human Services (OKDHS) and in foster homes, private institutions or public facilities; or
 - (B) in adoptions subsidized in full or in part by a public agency; or
 - (C) individuals under age 21 receiving active treatment as inpatients in public psychiatric facilities or programs if inpatient psychiatric services for individuals under age 21 are provided under the State Plan and the individuals are supported in full or in part by a public agency; or
 - (2) Individuals eligible for SoonerCare benefits include individuals between the ages of 18 and 21 if they are in custody as reported by OKDHS on their 18th birthday and living in an out of home placement.

SUBCHAPTER 22. PREGNANCY RELATED BENEFITS COVERED UNDER TITLE XXI

317:35-22-2. Scope of coverage for Title XXI Pregnancy

- (a) ~~Pregnancy related services provided are for antepartum and delivery only.~~ Pregnancy related services provided are prenatal, delivery, postnatal care when included in the global delivery fee, and other related services that are medically necessary to optimize pregnancy outcomes within the defined program benefits.
- (b) ~~Only two additional visits per month to other medical consultants, such as a dietitian or licensed genetic counselor for related services to evaluate and/or treat conditions that may adversely impact the fetus are covered.~~ Only two visits per month for other related services to evaluate and/or treat conditions that may adversely impact the pregnancy are covered.

[OAR Docket #16-879; filed 11-30-16]

**TITLE 340. DEPARTMENT OF HUMAN SERVICES
CHAPTER 110. LICENSING SERVICES**

[OAR Docket #16-882]

RULEMAKING ACTION:
EMERGENCY adoption

RULES:
Subchapter 1. General Provisions
Part 1. Licensing Services - Child Care
340:110-1-17 [AMENDED]
(Reference WF 16-07)

AUTHORITY:
Director of Human Services; Section 162 of Title 56 of the Oklahoma Statutes (O.S. 56 § 162) and 10 O.S. § 404.

ADOPTION:
October 25, 2016

APPROVED BY GOVERNOR:
November 22, 2016

EFFECTIVE:
Immediately upon Governor's approval or November 2, 2016, whichever is later.

EXPIRATION:
Effective through September 14, 2017, unless superseded by another rule or disapproved by the Legislature.

SUPERSEDED EMERGENCY ACTIONS:
n/a

INCORPORATIONS BY REFERENCE:
n/a

FINDING OF EMERGENCY:
Emergency rulemaking is requested to comply with Senate Bill 1211 changes with an effective date of November 2, 2016 for the rules.

ANALYSIS:
The proposed revisions to Chapter 110, Subchapter 1, Part 1, amend Child Care Advisory (CCAC) by-laws. The passage of Senate Bill 1211 during the 2016 legislative session amended Section 404 of Title 10 of the Oklahoma Statutes (10 O.S. § 404), Oklahoma Child Care Facilities Licensing Act. Statutory amendments include: (1) revising the responsibilities of CCAC members; (2) revising the process of the development of minimum licensing requirements; (3) identifying agencies that Oklahoma Department of Human Services (DHS) consults with prior to promulgating child care licensing rules; (3) expanding the role of the Oklahoma Commission on Children and Youth (OCCY) representative; (4) expanding membership of the standing subcommittees; and (5) clarifying Peer Review Board representation.

CONTACT PERSON:
Dena Thayer at 405-521-4326

Emergency Adoptions

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(F), AND EFFECTIVE UPON APPROVAL BY THE GOVERNOR OR NOVEMBER 2, 2016, WHICHEVER IS LATER:

SUBCHAPTER 1. GENERAL PROVISIONS

PART 1. LICENSING SERVICES - CHILD CARE

340:110-1-17. Child Care Advisory Committee bylaws

(a) **Purpose.** The purpose of the Child Care Advisory Committee (CCAC) is to:

(1) carry out the provisions of the Oklahoma Child Care Facilities Licensing Act (Licensing Act), Section 404 of Title 10 of the Oklahoma Statutes to:

(A) ensure maintenance of minimum standards for the care and protection of children away from their homes, including:

- (i) constructive programs and services to meet the needs of each child and family;
- (ii) personnel of good moral character and ability to care for children;
- (iii) adequate and safe housing, sanitation, and equipment;
- (iv) good health care;
- (v) full educational and religious opportunities;
- (vi) good community relationships;
- (vii) essential records and administrative methods; and
- (viii) sufficient funds for sound operation;

(B) encourage and assist child care facilities toward maximum standards; and

(C) work for the development of sufficient and adequate services for child care through joint work with public and private agencies;

(2) ~~prepare and~~ recommend minimum requirements and standards for child care programs for promulgation by the Oklahoma Department of Human Services (DHS); Rules are promulgated after consultation with:

(A) the Oklahoma State Department of Health (OSDH);

(B) the Oklahoma State Department of Education (OSDE);

(C) the Oklahoma State Bureau of Investigation (OSBI);

(D) the Office of the Oklahoma State Fire Marshal (OSFM);

(E) the Oklahoma Commission on Children and Youth (OCCY);

(F) the Oklahoma Department of Mental Health and Substance Abuse Services (ODMHSAS); and

(G) other agencies deemed necessary by DHS;

(3) serve in an advisory capacity to DHS for developing quality child care programs and services; and

(4) educate the public and consumers regarding quality child care.

(b) **Function.** The CCAC function is to:

(1) become informed on DHS programs and policies regarding children;

(2) express the needs and concerns of the community and the State of Oklahoma as they relate to the care and treatment of children; and

(3) express recommendations for change, including ~~the approval of revisions~~ to minimum requirements and encouraging maximum standards for child care.

(c) **Membership.**

(1) **Representation.** CCAC provides names for consideration of new appointments and reappointments of members to the Child Care Services (CCS) director. The CCS director in consultation with the OCCY representative makes recommendations for membership to the DHS Director. Members are appointed to serve at the pleasure of the DHS Director, based on expertise, experience, and leadership in the field of child care.

(A) CCAC, at a minimum, consists of 18 members.

(B) The majority are representatives of programs licensed by DHS to care for children.

(C) Other members include at least one representative from ~~the Oklahoma State Department of Health (OSDH); the Oklahoma State Department of Education (OSDE); the Office of the State Fire Marshal (OSFM);~~ tribal agencies; and CCS. These representatives are exempt from term limits.

(D) Other members include associations and agencies as recommended to the DHS Director, such as the Oklahoma Child Care Association, Oklahoma Children's Agencies and Residential Enterprises Incorporated (OK-CARE), ~~Oklahoma Department of Mental Health and Substance Abuse Services (ODMHSAS), OSBI,~~ Oklahoma Association of Youth Services, Office of Juvenile Affairs, Early Childhood Association of Oklahoma, and Head Start.

(E) A representative from ~~the Oklahoma Commission on Children and Youth (OCCY)~~ serves as an ex-officio member.

(2) **Terms of office.**

(A) The terms of CCAC members are for three years with a two-consecutive-term limit.

(B) Members may be recommended for reappointment after completing the first term of office.

(3) **Officers.** The officers of CCAC are chairperson, vice-chairperson, and secretary.

(A) **Chairperson.** The chairperson is responsible for:

(i) presiding over all meetings;

(ii) planning the meeting agenda, at least 14-calendar days in advance, in coordination with CCS;

- (iii) appointing members of subcommittees, in consultation with the CCS director and OCCY representative; and
 - (iv) ~~moderating public hearings; and~~
 - (v) ~~serving as CCAC spokesperson.~~
- (B) **Vice-Chairperson.** The vice-chairperson works closely with the chairperson, assumes the responsibilities of the chairperson in his or her absence, and attends public hearings.
- (C) **Secretary.** The position of secretary is held by the CCS representative. The secretary is responsible for accurately recording the minutes of each meeting and making them available to the members prior to the next meeting. A permanent copy of the minutes is maintained by CCS.
- (4) **Election of officers and terms of office.**
- (A) Upon vacancy of office, the chairperson and vice-chairperson are elected by a majority vote of members present during the next quarterly meeting following the office vacancy. Officers assume duties during the meeting in which the election is held.
- (B) Terms of office are for one year. Officers may be elected to serve in one office for a maximum of three terms.
- (5) **Standing Subcommittees.**
- (A) ~~Subcommittees are appointed by the chairperson with consultation from CCS and are designated to:~~
- (i) ~~draft licensing requirements for child care programs and services;~~
 - (ii) ~~study CCAC concerns; and~~
 - (iii) ~~address special issues of CCAC.~~
- (B) ~~The chairperson of the subcommittee is a CCAC member.~~
- (C) ~~Subcommittee members include representatives of child care programs and services with experience and expertise in the field of child care and children's services.~~
- (D) ~~Subcommittees appointed to draft licensing requirements for child care programs:~~
- (i) ~~present recommendations to CCAC for approval prior to being approved by the DHS Director and the Governor;~~
 - (ii) ~~have a majority of members who represent private child care programs affected by the requirements; and~~
 - (iii) ~~include representatives from licensing, including supervisory and field staff.~~
- (E) ~~Standing subcommittees expand the opportunity for child care program operators to identify quality improvement resources, express concerns facing the industry, and recommend issues for CCAC consideration by CCAC.~~
- (i) The chairpersons of four standing subcommittees are CCAC members and appointed by CCAC chairperson. Standing subcommittees represent:
 - (I) family child care homes;
 - (II) child care centers, day camp, drop-in, out-of-school time, and part-day programs, and programs caring for sick children;
 - (III) residential and child-placing agencies; and
 - (IV) the quality rating and improvement system (QRIS) program.
 - (ii) Standing subcommittee members are identified and recruited by the standing subcommittee chairpersons with CCS and OCCY consultation. Membership meets representation per 10 O.S. § 404.
 - (iii) Standing subcommittees meet a minimum of twice a year.
 - (iv) The standing subcommittee chairperson provides a written report to CCAC, at least twice a year.
 - (v) CCS state office staff attends standing subcommittee meetings and serves as a resource.
- (F) ~~A standing membership subcommittee helps to insure a broad representation of licensed programs are included within CCAC. The OCCY representative serves on the standing membership subcommittee and consults with the CCS director to identify appropriate CCAC members.~~
- (i) ~~The chairperson of the standing membership subcommittee works closely with other CCAC officers and provides oversight to the standing membership subcommittee.~~
 - (ii) ~~The membership subcommittee meetings are held at least quarterly, prior to CCAC meetings.~~
 - (iii) ~~The membership subcommittee chairperson provides a written quarterly report to CCAC.~~
 - (iv) ~~The membership subcommittee recommends to CCAC:~~
 - (I) the names of individuals for new appointments;
 - (II) the re-appointment of existing members based upon attendance and participation on CCAC subcommittees; and
 - (III) a slate of officers.
- (6) **Peer Review Board.** CCAC identifies members to serve on the Peer Review Board and participate in the DHS grievance process per Oklahoma Administrative Code (OAC) 340:110-1-15 and 340:110-1-54. A majority of the Peer Review Board are representatives of licensed child care facilities.
- (d) **Meetings.**
- (1) **Frequency.** CCAC meets quarterly. Additional meetings may be called or regular meetings cancelled at the discretion of the chairperson and CCS representative.
 - (2) **Quorum.** A minimum of one third plus one member or designee must be present for a quorum.
 - (3) **Voting.** All members or designees must receive orientation on the goals and practices of CCAC prior to voting.
 - (4) **Attendance.** Committee members or designees must attend at least two CCAC meetings a year or may

Emergency Adoptions

be removed from the committee at the discretion of the CCAC or DHS Director.

(5) **Active participation.** CCAC members or designees are required to serve on subcommittees annually.

(6) **Guidelines.** The practices of the CCAC are compatible with the Licensing Act.

(7) **Rules of order.** *Robert's Rules of Order*, as amended, are used to govern the meetings.

(e) **Change of bylaws.** ~~Bylaws may be altered, amended, or repealed only by a majority vote of the CCAC, provided written notice of the proposed action is given in the call to the meeting and a quorum is present.~~ CCS prepares bylaw revisions based on CCS and CCAC input and recommendations. Proposed rulemaking is presented to CCAC for comment and submitted for approval through the Administrative Procedures Act rulemaking process.

[OAR Docket #16-882; filed 12-1-16]

TITLE 340. DEPARTMENT OF HUMAN SERVICES CHAPTER 110. LICENSING SERVICES

[OAR Docket #16-880]

RULEMAKING ACTION:

EMERGENCY adoption

RULES:

Subchapter 3. Licensing Standards for Child Care Facilities

Part 5. Requirements for Family Child Care Homes and Large Family Child Care Homes

340:110-3-85 through 340:110-3-86 [AMENDED]

340:110-3-86.1 [NEW]

340:110-3-88 [AMENDED]

340:110-3-89.1 [AMENDED]

340:110-3-91.1 [AMENDED]

340:110-3-93 [AMENDED]

340:110-3-97.1 [AMENDED]

Part 15. Requirements for Child Care Centers, Day Camps, Drop-In Programs, Out-of-School Time Programs, Part-Day Programs and Programs for Sick Children

340:110-3-278 through 340:110-3-280 [AMENDED]

340:110-3-281.1 through 340:110-3-281.2 [AMENDED]

340:110-3-284 [AMENDED]

340:110-3-284.1 [AMENDED]

340:110-3-284.2 [AMENDED]

340:110-3-289 [AMENDED]

340:110-3-296 [AMENDED]

340:110-3-301 [AMENDED]

(Reference WF 16-02)

AUTHORITY:

Director of Human Services; Section 162 of Title 56 of the Oklahoma Statutes (O.S. 56 § 162); Child Care Development Block Grant (CCDBG) Act of 2014 (Pub. L. No. 113-186); 10 O.S. § 404; 10 O.S. § 404.3; and 21 O.S. § 870.

ADOPTION:

October 11, 2016

APPROVED BY GOVERNOR:

November 22, 2016

EFFECTIVE:

Immediately upon Governor's approval or November 1, 2016, whichever is later.

EXPIRATION:

Effective through September 14, 2017, unless superseded by another rule or disapproved by the Legislature.

SUPERSEDED EMERGENCY ACTIONS:

n/a

INCORPORATIONS BY REFERENCE:

n/a

FINDING OF EMERGENCY:

Emergency rulemaking is requested to comply with state and federal statute changes with an effective date of November 1, 2016 for the rules.

ANALYSIS:

The proposed revisions to Chapter 110 Subchapter 3 Part 5 and 15 amend minimum licensing requirements affecting family child care homes, child care centers, day-camps, drop-in, out-of-school time programs, part-day, and programs for sick children to comply with federal and state statutory changes.

On November 19, 2014, President Barack Obama signed the Child Care Development Block Grant (CCDBG) Act of 2014 (Pub. L. No. 113-186) into law following its passage in the 113th Congress. The CCDBG Act authorizes the Child Care and Development Fund (CCDF) that is the primary federal funding source devoted to providing low-income families who are working or participating in education or training activities with help paying for child care and improving the quality of child care for all children. CCDBG criteria was revised to provide further protection to the health and safety of children in child care and enhances the overall quality of child care and the early childhood workforce. Revisions to CCDBG criteria required Child Care Services to revise child care licensing requirements to meet the new criteria. Revisions include health and safety orientation topics for child care programs in areas of: (1) immunizations; (2) physical premise safety; (3) handling and storage of hazardous materials and disposal of bio-contaminants; (4) emergency preparedness; (5) administration of medication; and (6) prevention of and responses to food and allergic reactions. Revisions to minimum licensing requirements included: (1) expulsion program policies; (2) emergency preparedness and emergency drills; (3) cardio-pulmonary resuscitation (CPR) and first aid certification for all caregivers; and (4) requirements addressing any orientation topic not currently addressed by requirement language.

An interim study was conducted on infant safe sleep environments in licensed family child care homes and child care center based programs. This study resulted in Senate Bill (SB) 1273 during the 2016 legislative session amending Section 404 of Title 10 of the Oklahoma Statutes (10 O.S. § 404), Oklahoma Child Care Facilities Licensing Act to improve infant sleep environments. Amendments included restricting items and bedding within rest equipment and requiring infants to sleep in approved rest equipment. An agreement between legislators leading the interim study and Oklahoma Department of Human Services (DHS) also resulted in request for requirement revisions in lieu of statutory revisions. These requirement revisions included: (1) restrictions of infant swaddling; (2) restriction of infants in car seats; (3) observation of infants; and (4) required safe sleep training.

SB 1274 approved during the 2016 legislative session amends 10 O.S. § 404.3 of the Oklahoma Child Care Facilities Licensing Act to require parental notification of the program's compliance file and liability insurance. An agreement between authors of SB 1274 and DHS also resulted in request for requirement revisions in lieu of statutory revisions. These requirement revisions impacted further rule language development regarding parental notifications.

SB 1554 approved during the 2016 legislative session amends previous requirement language for child care center based programs regarding infant room square footage.

Amendments also reflect compliance with 21 O.S. § 870 requiring reporting of human trafficking.

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(F), AND EFFECTIVE UPON APPROVAL BY THE GOVERNOR OR NOVEMBER 1, 2016, WHICHEVER IS LATER:

SUBCHAPTER 3. LICENSING STANDARDS FOR CHILD CARE FACILITIES

PART 5. REQUIREMENTS FOR FAMILY CHILD CARE HOMES AND LARGE FAMILY CHILD CARE HOMES

340:110-3-85. Requirements for caregivers

(a) **Responsibilities of caregivers.** Responsibilities of caregivers are specified in this subsection.

(1) **Primary caregiver.** The primary caregiver is present in the home at least 80 percent of weekly operating hours and is responsible for the day-to-day operation of the program. The sole proprietor must be the primary caregiver.

(2) **Care and supervision.** The caregiver provides care and supervision of children at all times, both indoors and outdoors.

(A) Caregivers prevent and respond to allergies and life-threatening conditions by:

(i) being aware of children's known food and life-threatening allergies;

(ii) knowing the location of any life-threatening condition medications; and

(iii) ensuring life-threatening condition medications, such as epinephrine pens and rescue inhalers are in close proximity to the child for immediate administration when needed, including outdoors when the child is outside, during transportation, or on field trips. However, medications are inaccessible to children.

(B) Supervision of children means observing, overseeing, and guiding a child or group of children including:

(i) awareness of and responsibility for the ongoing activity of each child and being near enough to intervene when needed; and

(ii) observation of infants at least every 15 minutes while awake or sleeping; and

(iii) frequent observation of children 1-year-olds and older at least every 15 minutes while in cribs and playpens.

(3) **Supervision of outdoor play.** In addition to the requirements in (2) of this subsection, the caregiver remains outdoors with children at all times to ensure safety when:

(A) there is a potentially hazardous situation, such as a pool on the premises or a trampoline in the outdoor play area;

(B) there is access to a dog(s) outdoors;

(C) there are children 3 years of age or younger present; or

(D) the outdoor area is not completely fenced.

(4) **Supervision of overnight care.** When children are in care overnight and more than one caregiver is required due to the ages and number of children present, at least one caregiver must be awake at all times.

(5) **Assistant and substitute caregivers.** When the primary caregiver employs a person an individual to assist with the care of children or to provide care and supervision in the primary caregiver's absence, the primary caregiver

ensures that the assistant or substitute caregiver is qualified, and understands and complies with requirements, and has documentation of current cardio-pulmonary resuscitation (CPR) and first aid certification per Oklahoma Administrative Code (OAC) 340:110-3-85(h).

(A) **Required records.** Prior to employment, a staff information form provided by Oklahoma Department of Human Services (DHS) is completed and three references are verified. References from relatives are not accepted. Personnel records on all assistant and substitute caregivers are maintained at the home and made available to ~~licensing staff~~ licensing upon request.

(B) **Assistant caregiver.** When an assistant caregiver is employed to meet the required staff to child ratio, the assistant caregiver must be a responsible, mature, and healthy person individual at least 16 years of age. The caregiver is prohibited from leaving children alone in the care of any person individual younger than 18 years of age.

(C) **Substitute caregiver.** A substitute caregiver, at least 18 years of age, is available to provide care for short periods of time in the absence of the caregiver.

(i) The substitute caregiver may be used in emergency situations and occasionally in non-emergency situations. In non-emergency situations, the caregiver must notify parents in advance that the substitute will be caring for the child at these times.

(ii) The name, address, and telephone number of the substitute is provided to ~~DHS~~ licensing and is posted with the other required emergency numbers in the family child care home.

(6) **Verification of criminal history investigations.**

The family child care owner or primary caregiver is responsible for submitting to the Licensing Records Office (LRO), criminal history investigations and obtaining dispositions on any charges shown on the report ~~that~~ lacking dispositions.

(7) **Realistic expectations.** The caregiver demonstrates a capacity for setting realistic expectations for behavior and performance based on the age, abilities, and special needs of the children.

(8) **Constructive influence.** The caregiver's family members and others living in the home accept the children in care and provide constructive influence. There must be indication of a stable and harmonious home life.

(9) **Hazards.** The caregiver recognizes and acts to correct hazards to children's safety, both indoors and outdoors.

(10) **Child abuse and human trafficking reporting.** ~~The primary caregiver, assistant caregiver, and substitute caregiver immediately report any suspicion of child abuse or neglect to the Statewide Child Abuse and Neglect Hotline, 1 800 522 3511. Failure to report is a misdemeanor offense and upon conviction is punishable by law. Reporting requirements listed in (A) and (B) of this paragraph are met.~~

Emergency Adoptions

- (A) Any person who has reason to believe a child has been abused or neglected per 10 O.S. § 1-1-105 is required to report the matter promptly to the DHS Child Abuse and Neglect Hotline at 1-800-522-3511 per Section 1-2-101 of Title 10A of the Oklahoma Statutes (10A O.S. § 1-2-101). Failure to report is a misdemeanor offense and upon conviction is punishable by law. Failure to report with prolonged knowledge, six months or more, of ongoing abuse or neglect is a felony offense.
- (B) Per 21 O.S. § 870, every person having reason to believe that a person or child-placing agency is engaging in the crime of human trafficking in children, as described in 21 O.S. § 866 of the Oklahoma Statutes, reports the matter promptly to the Oklahoma Bureau of Narcotics and Dangerous Drugs Control.
- (11) **Notification of Licensing.** The primary caregiver notifies Licensing:
- (A) within 24-hours of the death of a child in care;
 - (B) within 24-hours of any accident involving transportation unless there were no injuries and only minor damage to the vehicles;
 - (C) within 24-hours of any changes in liability insurance coverage;
 - (D) within 24-hours of any injury to a child requiring emergency medical attention;
 - (E) within 24-hours of any remodeling, changes, or damage to the physical facility ~~that affect~~affecting compliance with any requirement;
 - (F) within 24-hours of any known arrests, criminal investigations, criminal charges, or child abuse investigations involving persons who live in the home, provide care, or assist with the care of children;
 - (G) within 24-hours of any legal action against a caregiver ~~that involves~~involving or ~~affects~~affecting a child in care or the operation of the family child care home;
 - (H) within 24-hours when an animal bites a child and the skin is broken;
 - (I) within five calendar days when ~~a person~~an individual moves into the home; and
 - (J) at least 30 calendar days in advance of a move from one residence to another unless an emergency exists. The new home must comply with minimum licensing requirements.
- (12) **Posting of license.** The permit or license is displayed in the home.
- (13) **Other employment.** The caregiver is prohibited from conducting business in the home during the hours children are in care. The primary caregiver is not employed outside the home during the hours of child care.
- (14) **Foster care.** The caregiver may not provide therapeutic foster care. The caregiver may provide foster care only with prior written approval from ~~DHS~~ Licensing for each child placement.
- (A) The written approval includes the number and ages of foster children.
 - (B) Foster children 12 years of age and younger are counted in the capacity of the family child care home.
- (15) **Inactive care.** A primary caregiver is determined to be in inactive status when care has not been provided for more than 90 consecutive calendar days.
- (A) Prior to resuming care, the caregiver must notify Licensing to verify compliance with family child care home requirements.
 - (B) When care has not been provided for more than 12 consecutive months, the family child care home is closed and must reapply and be approved for a license prior to resuming care.
- (b) **Qualifications of caregivers.** Qualifications of caregivers are described in this subsection.
- (1) **General.** The caregiver is a responsible, mature, healthy adult who is capable of understanding and complying with minimum licensing requirements and meeting the needs of the children in care. The caregiver demonstrates good judgment, as evidenced by prudent and responsible behavior that reasonably ensures the health, safety, and well-being of children in care.
 - (A) Primary caregivers applying for a license after October 1, 2007, are at least 21 years of age.
 - (B) Primary caregivers applying for a license after October 1, 2007, have obtained a high school diploma or General Educational Development credential (GED).
 - (C) All caregivers left alone with children have the ability to read and write for keeping required records, reading the licensing requirements, and administering medication.
 - (D) All caregivers cooperate with licensing staff during monitoring visits and DHS investigations.
 - (2) **Health.** The requirements relating to the health of the caregiver, assistant caregiver, and members of the household are specified in (A) - (C) of this paragraph.
 - (A) **General health.** All caregivers and all members of the household where licensed care is provided must be in good physical, mental, and emotional health. When it is reported or observed that a caregiver or household member has a physical, mental, or emotional condition that could negatively impact the care of children, a physician's statement is requested.
 - (B) **Tuberculosis testing.** The need for employee tuberculin skin testing is based upon a local identified tuberculosis exposure, the degree of risk of transmission of latent tuberculosis infection, the impact to public health and safety, and Oklahoma State Department of Health specific recommendations.
 - (C) **Immunizations.** There is documentation verifying all children living in the home have or are in the process of obtaining the required immunizations at the medically appropriate time. The schedule for required immunizations is found in Supplement IX of ~~OKDHS~~DHS Publication No. 86-104, Licensing Requirements for Family Child Care Homes and Large Child Care Homes.

(3) **References.** The primary caregiver submits to Licensing the names of three references other than relatives that may include a personal or family physician.

(c) **Background investigations - general.**

(1) **Required individuals.** Background investigations are required per ~~Section 401 et seq. of Title 10 of the Oklahoma Statutes~~ (10 O.S. § 401 et seq.), Oklahoma Child Care Facilities Licensing Act (Licensing Act), unless an exception per (2) or (3) of this subsection applies for:

- (A) owners, prior to authorization to operate;
- (B) responsible entities, prior to authorization to operate and when there is a change in a responsible entity;
- (C) personnel applicants, prior to hire. However:
 - (i) the program may hire individuals who are only awaiting the national criminal history records search, based upon the submission of fingerprints, provided the:
 - (I) preliminary criminal history review results from LRO are received by the program. However, until complete results are received, the individual does not have unsupervised access to children; and
 - (II) completed criminal history review results from LRO are received by the program within 30 calendar days from submission of the fingerprints for employment to continue; and
 - (ii) personnel who come from another licensed program owned by the same business entity are not required to repeat the background investigation process, with the exception of criminal history restriction waivers, provided there is no break in employment from the business entity;
- (D) individuals with unsupervised access to children, prior to having access to children, unless an exception per (3) of this subsection applies;
- (E) adults living in the facility, prior to authorization to operate or moving into the facility of an existing program. This includes children who turn 18 years of age while living in the facility; and
- (F) individuals who have access to or review of the fingerprint results, prior to access to or review of the results.

(2) **Existing required individuals as of November 1, 2013.** On or before November 1, 2016, the fingerprinting and criminal history review process of this Section is completed for existing required individuals, with the exception of individuals who have access to or review of the fingerprint results. These individuals complete the process prior to having access to or review of the results.

(3) **Non-required individuals.** Background investigations are not required for:

- (A) specialized service professionals who are not program personnel, provided parent releases are obtained per OAC 340:110-3-88(c);

(B) volunteer drivers who transport children on an irregular basis and do not fill another position, provided parent releases are obtained per OAC 340:110-3-88(c);

(C) contracted drivers who do not fill another position or have unsupervised access to children; and

(D) contracted non-personnel who do not have unsupervised access to children, such as when the program contracts for special activities or facility repair.

(d) **Background investigations - Restricted Registry.** The program conducts a search of the online Child Care Restricted Registry or Restricted Registry, also named Joshua's List, when required per (c) of this Section.

(1) **Non-registrants.** Non-registrants are individuals who are not recorded on the Restricted Registry.

(2) **Registrants.** Registrants are individuals who are recorded on the Restricted Registry, prohibited from licensure, ownership, employment, unsupervised access to children, or residence in the facility and are prohibited individuals per (e) of this Section.

(e) **Background investigations - criminal history.** The program and required individuals complete the criminal history review process. The program receives the completed criminal history review results from LRO when required per (c) of this Section.

(1) **Criminal history prohibitions.** Individuals with criminal history prohibitions are prohibited per (f) of this Section. Criminal history prohibitions include required registration under the:

- (A) Sex Offenders Registration Act; or
- (B) Mary Rippy Violent Crime Offenders Registration Act.

(2) **Criminal history restrictions.** Individuals with criminal history restrictions are prohibited per (f) of this Section, unless a criminal history restriction waiver is granted. Criminal history restrictions include pending charges, pleas of guilty or nolo contendere (no contest), or convictions of any criminal activity involving:

- (A) gross irresponsibility or disregard for the safety of others;
- (B) violence against an individual;
- (C) sexual misconduct;
- (D) child abuse or neglect;
- (E) animal cruelty;
- (F) possession, sale, or distribution of illegal drugs; or
- (G) a pattern of criminal activity.

(3) **Criminal history restriction waivers.** Restriction waivers are specified in this subsection.

(A) Restriction waivers may be requested for individuals who have criminal history restrictions. The owner, responsible entity, or primary caregiver completes requests on a DHS form.

(B) Restriction waivers are not requested or granted for:

- (i) Restricted Registry registrants;

Emergency Adoptions

- (ii) individuals with criminal history prohibitions; or
- (iii) individuals whose sentence has not expired for any of the criminal history restrictions per (2) of this subsection.
- (C) Individuals identified in pending or denied restriction waiver requests are prohibited per (f) of this Section.
- (f) **Prohibited individuals.**
 - (1) **Background investigation of required individuals.** The program does not allow a required individual to be the owner or responsible entity, to be employed, to live in the facility, or have:
 - (A) access to children, such as being present at the facility during the hours of operation or present with the children in care while off-site, when the individual has criminal history:
 - (i) prohibitions; or
 - (ii) restrictions, unless a criminal history restriction waiver is granted. Individuals identified in a pending or denied restriction waiver request are prohibited; or
 - (B) unsupervised access to children, when the individual is a Restricted Registry registrant.
 - (2) **Endangerment of children.** ~~A person~~An individual whose health or behavior would endanger the health, safety, or well-being of children is not permitted to live in the home or be on the premises when children are in care.
 - (3) **Alcohol, drugs, medication.** When children are in care, no caregiver is under the influence of:
 - (A) alcohol or illegal drugs; or
 - (B) medication ~~that impairs~~impairing functioning.
- (g) **Child Abuse Registry check.** A Child Abuse Registry check is conducted on all persons who sign the license application. A confirmed or substantiated allegation of child abuse or neglect is considered when evaluating the qualifications of the applicant and the safety and well-being of the children in care.
- (h) **TrainingProfessional development requirements.** ~~Training~~Professional development requirements for caregivers are specified in (1) - ~~(3)~~(4) of this subsection. ~~The training specified in paragraphs (2) through (3) of this subsection is required prior to issuance of the initial permit.~~
- (1) **General.** The primary caregiver is required to complete ~~12 clock hours~~clock-hours of ~~training~~professional development annually through workshops, formal training, videos, or individual position-related readings. Annually, no more than ~~six hours~~clock-hours of videos or individual position-related readings is counted toward the required ~~12 hours~~clock-hours.
- (2) **CPR and first aid certification.** ~~Prior to permission to operate or issuance of the initial permit, the primary caregiver and any person who cares for children alone, on or off the premises, including during transportation, must have documentation that is maintained by the caregiver at the facility, of current completed certification in age appropriate first aid and cardio pulmonary resuscitation (CPR), as approved by CCS licensing. CPR~~

~~and first aid certification must be kept current with documentation maintained by the program. CPR and first aid requirements listed in (A) through (B) of this subsection are met.~~

(A) Current CPR and first aid certification is required for:

(i) the primary caregiver, prior to permission to operate or issuance of the initial permit;

(ii) any person who cares for children alone, on or off the premises, including during transportation; and

(iii) other caregivers, included in the caregiver to child ratio. Caregivers employed:

(I) prior to November 1, 2016, obtain CPR and first aid certification by November 1, 2017;

or

(II) on or after November 1, 2016, obtain CPR and first aid certification within three months of caring for children.

(B) CPR and first aid certification is kept current, approved by Licensing, and maintained at the facility.

(3) **Health and safety training.** ~~Prior to issuance of the initial permit the primary caregiver obtains~~caring for children, all caregivers obtain training in:

(A) prevention and control of infectious disease and injury prevention measures;

(B) use of a fire extinguisher; and

(C) ~~health and safety issues, including:~~

(i) prevention of shaken baby syndrome and abusive head trauma;

(ii) prevention of sudden infant death syndrome (SIDS);

(iii) infant safe sleep practices;

(iv) car seat and transportation safety;

(v) safeguarding the homephysical premise safety including identification of and protection from hazards that can cause bodily injury such as, electrical hazards, bodies of water, or vehicular traffic;

(vi) handling and storage of hazardous materials and appropriate disposal of bio-contaminants;

(vii) emergency preparedness and response planning for emergencies resulting from a natural disaster or human-caused event;

(viii) immunizations;

(ix) administration of medication;

(x) prevention of and response to emergencies due to food and allergic reactions;

(xi) the definition, identification, and mandatory reporting of child abuse and neglect; and

(xii) behavior and guidance methods.

(4) **Safe sleep training.** Prior to caring for infants, the primary caregiver and any individual caring for infants alone, obtains two or more clock-hours of training in safe sleep practices from an Oklahoma Professional Development Registry (OPDR) approved training organization.

340:110-3-86. Home environment

(a) Physical conditions.

- (1) **Accessibility to licensing staff.** All areas of the home are accessible to licensing staff.
 - (2) **Indoor space.** There is minimum indoor space available for routine use by children in child care of not less than 35 square feet per child exclusive of hallways, bathrooms, kitchen, and space not intended for children's use. Rooms used exclusively for napping are not counted toward the capacity.
 - (3) **Maintenance.** The home is in a good state of repair and maintained in a clean and sanitary condition, with operable utilities.
 - (4) **Toilet facilities.** The home has:
 - (A) a sink with comfortably warm or tempered running water with the temperature not to exceed 120 degrees Fahrenheit;
 - (B) an operable toilet available for children's use;
 - (C) soap for hand-washing and individual use towels; and
 - (D) toilet paper within easy reach of children.
 - (5) **Hazards.** The premises are free of hazards, indoor and out.
 - (A) All medicines, cleaning products, hazardous items, and smoking materials are inaccessible to children.
 - (B) The premises are free of illegal drugs and paraphernalia.
 - (C) Clear glass doors are plainly marked at the child's eye level to avoid accidental impact.
 - (D) All stairways with four or more steps have a railing. Indoor stairways are made inaccessible when infants and toddlers are in care.
 - (6) **Weapons.** All weapons are stored unloaded in a locked container, cabinet, or closet. Ammunition is stored in a locked area separate from weapons.
 - (7) **Trampolines.** The use of trampolines by children in care is prohibited.
 - (8) **Lighting and ventilation.** Rooms used by children are lighted enough to accommodate activities with comfort and allow the caregiver to see children's facial features at all times. Rooms used by children are ventilated.
 - (9) **Tobacco products.** When children are in care, smoking is prohibited inside the home and in the presence of children. Other tobacco products are not used in the presence of children or in areas designated for children's use. Parents are informed upon enrollment of the presence of smokers in the home.
 - (10) **Indoor temperature.** The indoor temperature is maintained between 65 and 80 degrees Fahrenheit.
 - (11) **Screens.** When windows or doors are kept open, screens are maintained to minimize the entry of insects.
 - (12) **Outdoor play safety.** There is an outdoor play area on the premises of not less than 75 square feet per child.
 - (A) This area must be hazard free, away from traffic, water, and other dangers.
 - (B) A fence beginning at ground level ~~that~~ and is in good repair is required. OKDHS Licensing may grant an exception when the safety of children can be ensured.
 - (13) **Outdoor play.** Children play outdoors daily when weather conditions do not pose a significant health risk.
 - (14) **Fire safety.** The home complies with all fire safety requirements, per ~~OAC~~ Oklahoma Administrative Code (OAC) 340:110-3-97.
 - (15) **Water supply and waste disposal.** Water supply, sewage disposal, and solid waste disposal meet local city ordinances and Oklahoma Department of Environmental Quality regulations.
 - (16) **Water testing.** When not on a public water supply, water is tested initially and annually for lead, bacteria, and nitrates.
 - (17) **Questionable conditions.** If the fire, safety, or health conditions are questionable, the appropriate state or local agency is requested to inspect the home.
- (b) **Water safety.**
- (1) **Supervision.** Any play activity ~~that~~ involves ~~involving~~ water is supervised constantly.
 - (2) **Accessibility of ponds, pools, and hot tubs.** No ponds, pools, or hot tubs are left accessible to children.
 - (3) **Fencing.** Pools are fenced to prevent unsupervised access. All doors and gates leading to the pool are locked. There is:
 - (A) a sturdy fence at least four feet high ~~that~~ and cannot be easily climbed; or
 - (B) a fence ~~that connects~~ connecting to the top of an above-ground pool and ~~extends~~ extending two feet above the pool.
 - (4) **Wading pools.** The use of portable wading pools is prohibited.
 - (5) **Swimming.** In accordance with Oklahoma law, swimming pools used by the child care home are considered public bathing places and must be in compliance with the water quality, occupancy, and fencing standards in Design Standards and Operational Criteria for Public Bathing Places, Oklahoma State Department of Health Engineering Bulletin. This includes wading pools, water parks, in-ground pools, and above-ground pools. When children swim in a pool:
 - (A) the caregiver is at or in the water and is appropriately dressed to enter the water at any time;
 - (B) ~~a person~~ an individual with a Community Water Safety Certificate or a comparable certificate as approved by OKDHS Licensing is in attendance at all times; and
 - (C) the adult to child ratio for:
 - (i) infants and toddlers is one adult to one child. This adult is not counted in any other adult-child ratios. The adults remain in direct physical contact with infants at all times during swimming or wading; and
 - (ii) children two years and older is in accordance with OAC 340:110-3-84(a) through (d) for family child care homes and OAC 340:110-3-97.1(e) for large family child care homes. When four or more children are two years of age through three years of age, one additional adult is required.

Emergency Adoptions

- (6) **Restrictions.**
- (A) The use of hot tubs by children in care is prohibited. The hot tub must be equipped with a hard cover.
- (B) Swimming and wading is not permitted at a lake, pond, or other body of water.
- (c) **Animals and household pets.**
- (1) Patrons are advised of the presence of animals.
- (2) Animals are in good health, do not show evidence of carrying disease, are friendly, and do not present a threat to the health, safety, and well-being of children.
- (3) All contact between animals and children is supervised by a caregiver who is close enough to remove the child immediately if the animal shows signs of distress or the child shows signs of treating the animal inappropriately.
- (4) Documentation of current rabies vaccinations administered by a licensed veterinarian for dogs and cats is filed on the premises.
- (5) Ferrets, turtles, and any wild or dangerous animals are kept in an area that is inaccessible to children.
- (6) Reptiles, such as crocodiles, alligators, poisonous snakes and lizards, pythons, and boa constrictors, are not kept on the premises.
- (7) Animals are restricted from areas where food is prepared or served and from children's sleeping surfaces.
- (8) Animal litter boxes are not located in food preparation areas and are not easily accessible to children in other areas of the home.
- (9) Outdoor play areas are cleaned of animal waste before children play outside.
- (10) If an animal bites a child and the skin is broken, the child's parent is contacted immediately. The licensing staff and the county or state department of health are notified within 24 hours.
- (d) **Emergency procedures.** ~~The caregiver is familiar with emergency procedures. Emergency procedures are required per OAC 340:110-3-86.1.~~
- (1) ~~There is a planned source of medical care, such as a hospital emergency room, clinic, or other medical facility or physician acceptable to parents.~~
- (2) ~~The caregiver has emergency transportation available.~~
- (3) ~~The home has an operable telephone. Emergency information posted next to the telephone includes:~~
- (A) ~~address of the home;~~
- (B) ~~physician or clinic;~~
- (C) ~~fire department;~~
- (D) ~~police department;~~
- (E) ~~poison control, 1-800-222-1222; and~~
- (F) ~~substitute caregiver.~~
- (4) ~~First aid supplies are available in the home but made inaccessible to children. Supplies include:~~
- (A) ~~thermometer;~~
- (B) ~~disposable nonporous gloves;~~
- (C) ~~blunt tipped scissors;~~
- (D) ~~tweezers;~~
- (E) ~~bandage tape;~~
- (F) ~~sterile gauze;~~
- (G) ~~non-medicated adhesive strips; and~~
- (H) ~~current standard first aid text or equivalent first aid guide.~~
- (5) ~~Fire and tornado drills are conducted monthly. A record of the drills is maintained at the home.~~
- (6) ~~The primary caregiver has a written plan for reporting and protecting from outside threats, and evacuating in case of fire, flood, tornado, blizzard, power failure, or other natural or man-made disaster that could create structural damage to the facility or pose health hazards.~~
- (7) ~~Caregiver contacts poison control with any suspected child poisonings.~~
- (e) **Overnight care.** Overnight care can only be provided by a caregiver who is licensed at his or her primary residence.
- 340:110-3-86.1. Emergency preparedness**
- (a) **General.** All caregivers are familiar with emergency plans and procedures. Written plans and procedures are:
- (1) developed by the primary caregiver;
- (2) maintained on site;
- (3) individualized to the program and hours of operation; and
- (4) followed, unless children's safety is at risk or emergency personnel provide alternative instructions during an emergency.
- (b) **Emergency medical care plans.** Emergency medical care plans include:
- (1) a planned source of medical care, such as a hospital emergency room, clinic, or other medical facility or physician acceptable to parents; and
- (2) available emergency transportation.
- (c) **Situations.** Emergency plans and procedures are maintained in a readily available and portable manner and include procedures for:
- (1) weather conditions, such as, but not limited to tornadoes, floods, blizzards, or ice storms;
- (2) fires, including wildfires;
- (3) man-made disasters, including chemical and industrial accidents;
- (4) human threats, including individuals with threatening behaviors, bomb threats, or terrorist attacks;
- (5) other natural or man-made disasters that could create structural damage to the facility or pose health hazards; and
- (6) utility disruption.
- (d) **Child location and needs.** Emergency plans include procedures to:
- (1) account for each child's location during an emergency; and
- (2) address each child's needs, with additional considerations for:
- (A) 2-year-olds and younger; and
- (B) children with disabilities or chronic medical conditions.
- (e) **Shelter-in-place.** Emergency plans include procedures for short and extended stay situations requiring children to stay

inside the home, such as tornados or other weather emergencies.

(f) Lock-down. Emergency plans and procedures for situations threatening the safety of children and adults include:

- (1) notifying adults present in the home;
- (2) keeping children in designated safe locations inside the home;
- (3) encouraging children to remain calm and quiet;
- (4) securing entrances to the home;
- (5) preventing unauthorized individuals from entering the home; and
- (6) responding when outdoors and on field trips.

(g) Evacuation. Emergency plans include procedures for situations, such as a fire, requiring that children leave the home and meet at pre-determined locations.

(h) Relocation. Emergency plans include procedures for situations requiring children to move to an alternate location, such as bomb threats and wildfires, include:

- (1) pre-determined primary and secondary alternate locations, with prior approval from the contact individual at alternate locations;
- (2) relocating children, including a pre-determined transportation plan; and
- (3) reuniting parents and children.

(i) Reporting. Emergency plans include procedures for notifying:

- (1) emergency authorities;
- (2) parents, including a method and backup method for how and when parents are notified; and
- (3) Licensing.

(j) Phones. The home has an operable phone. Emergency information posted next to the phone includes:

- (1) the home's address;
- (2) a physician or clinic;
- (3) the fire department;
- (4) the police department;
- (5) poison control, 1-800-222-1222; and
- (6) a substitute caregiver.

(k) First aid supplies. First aid supplies are available in the home but made inaccessible to children. Supplies are stored together in a portable container and include:

- (1) thermometer;
- (2) disposable non-porous, latex-free gloves;
- (3) blunt-tipped scissors;
- (4) tweezers;
- (5) bandage tape;
- (6) sterile gauze;
- (7) non-medicated adhesive strips; and
- (8) current standard first aid text or equivalent first aid guide.

(l) Poisoning. The caregiver immediately contacts poison control, 1-800-222-1222, with any suspected child poisonings.

(m) Emergency supply kit. Records and supplies available during an emergency include:

- (1) **emergency records.** Records at minimum, include, the:
 - (A) emergency plans and procedures, alternate location addresses, phone numbers, and contacts;

(B) emergency contacts for all caregivers and enrolled children; and

(C) full names of children and caregivers currently in attendance; and

(2) **emergency supplies.** Supplies gathered at the time of an emergency or maintained in a portable container at all times include, at least:

- (A) first aid supplies; and
- (B) children's prescribed medications, including life-threatening condition medications.

(n) Drills. Drills are conducted and follow the pre-determined emergency plans and procedures. A record of drills is maintained at the home.

(1) **Monthly.** Monthly drills include:

- (A) fire drills conducted by evacuating and meeting at pre-determined locations; and
- (B) tornado drills conducted by sheltering in pre-determined on-site locations.

(2) **Annual.** Annual drills conducted include:

- (A) locking-down by sheltering in pre-determined on-site locations;
- (B) relocating according to procedures of preparation to relocate but do not require physical relocation;
- (C) sheltering-in-place, requiring children stay inside the home, such as tornados and other weather emergencies; and
- (D) evacuating and meeting at pre-determined locations.

(o) Emergency plans and procedures reviews. The primary caregiver updates, as necessary, and reviews emergency plans and procedures:

- (1) at least once every 12 months;
- (2) when children with disabilities or chronic medical conditions enroll;
- (3) after a drill when procedural issues are identified; and
- (4) after an emergency as identified in this Section.

340:110-3-88. Records

(a) General requirements. Children's records are kept on Oklahoma Department of Human Services (DHS) provided forms or on forms containing the same information. Records are kept current and easily accessible. DHS staff are allowed access to all records.

(b) Caregiver records. Records on all caregivers, including the primary caregiver, assistant caregivers, and substitute caregivers, are completed and maintained in the home. Records include:

- (1) staff information forms provided by DHS;
- (2) criminal history investigations with records maintained in a confidential manner;
- (3) training documentation;
- (4) attendance records for each caregiver that reflect days and hours worked and are maintained on file for 120 calendar days; and
- (5) documentation of requests and/or results of criminal history reviews.

(c) Children's records.

Emergency Adoptions

- (1) Identification and health records include:
 - (A) the child's name, birth date, parents' names, home addresses, places of employment, and telephone numbers;
 - (B) the names and telephone numbers of responsible persons to contact in an emergency when a parent cannot be located promptly;
 - (C) permission of a parent authorizing the caregiver to transport the child to emergency medical care;
 - (D) names and relationships of persons authorized to pick up the child;
 - (E) health information, including immunization records;
 - (F) name, address, and telephone number of the child's physician;
 - (G) when applicable, medication and transportation permission; and
 - (H) the date child began care.
 - (2) When a volunteer driver or specialized service professional does not have a criminal history review per OAC 340:110-3-85(c), parent releases indicating this understanding are signed and dated prior to unsupervised access to children for each volunteer driver or professional.
 - (3) Daily attendance records, including arrival and departure times for each child, are maintained and on file a minimum of 120 calendar days.
- (d) **Public access to records - Compliance Posting.**
- (1) ~~Items posted within clear view of the main entrance are:~~
 - (A) ~~DHS provided, "Notice to Parents"; and~~
 - (B) ~~child welfare investigative summary with confirmed or substantiated findings for 120 calendar days from the completion of the investigation.~~ DHS provided, "Notice to Parents"; is posted in a conspicuous location within clear view at the main entrance of the facility.
 - (2) Child welfare investigative summary with confirmed or substantiated findings for 120-calendar days from the completion of the investigation is posted within clear view of the main entrance of the facility.
 - (23) The granted criminal history restriction waiver notification for individuals who have criminal histories as defined in OAC 340:110-3-85 are posted in a prominent place for as long as they are employed by the program or living in the facility.
- (e) **Compliance file.** A compliance file accessible to staff, parents, and others contains:
- (1) the most recent child care licensing monitoring report provided by the licensing specialist;
 - (2) the following documents issued by Licensing within the last 120 calendar days:
 - (A) child care licensing monitoring reports and licensing correspondence;
 - (B) notice to comply;
 - (C) licensing complaints; and
 - (D) child welfare investigative summary with findings of unconfirmed or unsubstantiated to include findings of services not needed, ruled out, or services recommended; and
 - (3) child welfare investigative summary with findings of confirmed or substantiated, for one year from the completion of the investigation.

340:110-3-89.1. Parent communication

(a) **Policy.** A written statement of the caregiver's business policy is provided to parents, including:

- (1) the location and accessibility of the licensing compliance file;
- (2) days and hours of operation, including holidays the program is closed;
- (3) procedure for:
 - (A) receiving and releasing a child from care, including a method of verifying the identity of a caller or ~~person~~ individual who picks up a child;
 - (B) notifying parents if a concern exists when a child does not arrive as scheduled;
 - (C) handling illness and injuries;
 - (D) storing and administering children's medication;
 - (E) notifying parents of field trips; and
 - (F) transporting children;
- (4) care of ill children;
- (5) mandatory reporting of child abuse or neglect; ~~and~~
- (6) behavior and guidance policy; ~~and~~
- (7) expulsion policy.

(b) **Well-being of the child.** The caregiver informs parents of the child's physical and emotional well-being.

(c) ~~OKDHS~~ **DHS child care information.** Oklahoma Department of Human Services (~~OKDHS~~) (DHS) Publication No. 87-91, The Parents' Guide to Selecting Quality Child Care, is made available to parents upon their child's enrollment.

(d) **Access to the home.** Parents are provided access to all areas of the home used for child care during the hours ~~that~~ children are in care.

(e) **Insurance.** A child care facility shall maintain liability insurance in accordance with Section 404.3 of Title 10 of the Oklahoma Statutes.

(1) When liability insurance is maintained, Form 07LC092E, Insurance Verification, ~~that includes~~ including a certificate of insurance obtained from the insurance agent is completed annually, maintained at the facility, and made available to ~~licensing~~ Licensing.

(2) When liability insurance is not maintained or the ~~facility program~~ reports they are self-insured, Form 07LC093E, Insurance Exception Notification, is posted in a conspicuous location within clear view of the main entrance to the facility.

(f) **Parent notifications.** Parents are provided information regarding liability insurance and the compliance file.

(1) Parents complete DHS Forms 07LC045E, Insurance Notification, and 07LC046E, Compliance File Notification, every 12 months. Forms are maintained at the facility.

(2) When the child is enrolled, parents are provided copies of DHS Forms 07LC093E, Insurance Exception Notification, and 07LC084E Notice to Parents.

340:110-3-91.1. Rest time

(a) **Place to rest.**

(1) Each child has an appropriately sized, individual place to rest, such as a crib, playpen, bed, cot, or mat, with clean, individual bedding. The place to rest is maintained in a clean and sanitary condition and in good repair.

(2) Waterbeds, sofas, soft mattresses, bassinets, stacked cribs, pillows, beanbag chairs, and other soft surfaces are prohibited as infant sleeping surfaces.

(b) **Mats.** Mats are not used for overnight care. When used for napping, each mat is:

(1) at least two inches thick and covered with a fitted, durable, washable, waterproof material; and

(2) only used on clean carpeted surfaces.

(c) **Cribs and playpens.** A crib, port-a-crib, or playpen with a firm waterproof mattress or pad and a tight-fitting sheet is used for each child younger than one year of age.

(d) **Crib, port-a-crib, and playpen safety features.** Infants sleep in appropriate rest equipment and environments listed in (1) through (6) of this subsection.

(1) Cribs, including portable cribs that can be folded or collapsed without being disassembled, meet the current Consumer Product Safety Commission (CPSC) full-size and non-full size crib standards per Sections 1219 and 1220 of Title 16 of the Code of Federal Regulations.

(2) Verification of compliance with CPSC standards is maintained for duration of crib use.

(3) Mattresses are tightfitting with no more than one inch between the mattress and crib.

(4) Pillows, covers, blankets, quilts, comforters, sheepskins, ~~stuffed toys~~, bumper pads, and other soft products or bedding, are not permitted in infant cribs, playpens, or port-a-cribs.

(5) Play equipment, and other items, except for pacifiers, are not placed inside, above, or attached to the sides of the infant rest equipment, unless there is a medical reason documented by a licensed physician for a monitor or other device. Documentation is maintained at the facility. Mobiles may be securely attached or hung above the crib provided no part of the mobile is within reach of the child.

(6) When an infant arrives asleep or falls asleep in inappropriate rest equipment, the infant is immediately moved to appropriate rest equipment.

(e) **Sleep positioning.**

(1) To reduce the risk of Sudden Infant Death Syndrome (SIDS), infants younger than 12 months of age are placed on their back for sleeping unless a medical reason is documented by a ~~doctor~~ licensed physician that the infant should not sleep in this position. Documentation is maintained at the facility.

(2) Infants who are able to turn themselves over are placed initially on their back for sleeping but allowed to sleep in a position they prefer.

(3) Children's heads and faces are not covered.

(f) **Swaddling.** Infants, birth through three months of age may be swaddled with an infant-sized, thin fabric, such as a receiving blanket, only when:

(1) the infant is not mobile enough to move the fabric over his or her face; and

(2) requested in writing by the parents. Requests are maintained by the caregiver.

340:110-3-93. Infants, toddlers, and two-year-olds

(a) **Responding to needs.** The caregiver holds, cuddles, talks to, and sings to infants and toddlers and understands and responds to their particular needs.

(b) **Daily routine.** The daily routine is adapted to the individual needs of each infant and toddler and fits as much as possible into the schedule set up by the parent.

(1) The daily schedule is accessible and followed with reasonable regularity.

(2) Children are not left for more than 30 minutes while awake in playpens, swings, high chairs, or stationary activity centers.

(c) **Bottle-feeding.** Bottles are not propped by any means at any time.

(1) Infants up to the age of six months are held while bottle-fed.

(2) Infants of more than six months are held while bottle-fed until they are able to hold their own bottle securely.

(3) Children are not given bottles in cribs or moving swings due to increased risk of choking, ear infections, and tooth decay.

(4) Breast milk is refrigerated or frozen until immediately before feeding.

(5) Bottles of premixed formula are refrigerated until immediately before feeding.

(6) Unused breast milk or formula left in the bottle is disposed of after feeding.

(7) Bottles of formula or breast milk are not warmed in a microwave oven.

(d) **Diaper-changing.** Diapers are changed promptly when wet or soiled.

(1) A clean nonporous surface or pad is used for diaper changes and sanitized after each use. Care is taken to prevent spread of germs.

(2) Caregivers wash their hands thoroughly with soap and warm running water after each diaper change.

(e) **Availability and disposal of diapers.**

(1) Sufficient quantities of clean diapers are available.

(2) A closed container for soiled diapers is provided and used.

(f) **Toilet learning.** Toilet learning is a relaxed, pleasant activity.

(1) The caregiver shares the child's toilet learning progress with the parent.

(2) Training pants or underwear are changed promptly when wet or soiled.

(3) Fecal content may be disposed of in a toilet, but soiled diapers or training pants are not rinsed in the toilet.

(g) **Potty chairs.** Potty chairs are emptied and sanitized after each use.

Emergency Adoptions

(h) **Infant car seats.** Infants are not permitted in infant car seats except during emergency drills, transportation, and arrival and departure with parents.

340:110-3-97.1. Requirements for large family child care homes

(a) **Large family child care home.** A large family child care home is a residential family home that provides care and supervision for eight to 12 children for part of the 24 hour day.

(b) **Requirements.** Large family child care homes are required to meet the rules ~~specified in per Oklahoma Administrative Code (OAC) 340:110-3-81 through 340:110-3-97,~~ except as otherwise provided in this Section.

(c) **Mobile homes.** Large family child care homes operated in a mobile home are required to obtain an approved fire inspection by the state or local fire official prior to caring for children.

(d) **Capacity.** Large family child care homes are required to meet the rules found in OAC 340:110-3-84(a), except the total number of children in care in a large family child care home is limited to 12.

(e) **Supervision of outdoor play.** Large family child care homes are required to meet the rules specified in OAC 340:110-3-85(a)(3) pertaining to supervision of outdoor play, except when two or more staff are needed to meet the required child to staff ratio, at least one staff is present with children outdoors at all times.

(f) **Required number of caregivers.** Large family child care homes are exempt from the requirements regarding the number of caregivers per OAC 340:110-3-84(b) and (c). The number of caregivers required in a large family child care home is described in this subsection.

(1) **One caregiver.** One caregiver may care for:

- (A) up to five children of any age;
- (B) up to six children, with no more than three children younger than 2 years of age;
- (C) up to seven children, with no more than two children younger than 2 years of age;
- (D) up to seven children, when the children are 2 years of age and older;
- (E) up to eight children, when the children are 3 years of age and older;
- (F) up to 10 children, when the children are 4 years of age and older; or
- (G) up to 12 children, when the children are 5 years of age and older.

(2) **Two caregivers.** Two caregivers may care for up to:

- (A) eight children younger than 2 years of age; or
- (B) 12 children, with no more than six children younger than 2 years of age.

(3) **Three caregivers.** Three caregivers may care for up to 12 children, with no more than eight children younger than 2 years of age.

(g) **Qualifications of caregivers.** Primary, assistant, and substitute caregivers at large family child care homes are required to meet qualifications per OAC 340:110-3-85(a) and (b), except as otherwise described in this subsection.

(1) **Primary caregiver.** The primary caregiver or any person substituting for the primary caregiver must be at least 21 years of age. For any person applying after October 1, 2007, the primary caregiver must:

(A) have six months of satisfactory experience as the primary caregiver in a licensed family child care home in Oklahoma; and

(B) meet one of the requirements specified in (i) through (iv):

(i) a high school diploma or General Educational Development (GED) credential and 12 college credit hours in child development or early childhood education;

(ii) a vo-tech occupational child care program diploma;

(iii) a Child Development Associate (CDA) credential; or

(iv) an associate or bachelor's degree in child development or early childhood education.

(2) **Assistant caregiver.** The assistant caregiver or any person substituting for the assistant caregiver must be at least 16 years of age and have current documentation of cardio-pulmonary resuscitation (CPR) and first aid certification per OAC 340:110-3-85(h). Children are not left alone in the care of any person younger than 21 years of age.

(3) **Substitute caregiver.** Any person substituting for the primary caregiver is required to be at least 21 years of age and have current documentation of ~~cardiopulmonary resuscitation (CPR) and first aid training certification per OAC 340:110-3-85(h).~~

(h) **TrainingProfessional development requirements.** The primary caregiver and assistant caregiver at large family child care homes are required to meet the trainingprofessional development requirements specified in OAC 340:110-3-85(h), except as otherwise described in this subsection.

(1) The primary caregiver is required to complete 15 clock hours of trainingprofessional development annually.

(2) The assistant caregiver is required to complete 12 clock hours of trainingprofessional development annually.

(3) No more than six hours of videos or individual position-related readings is counted toward the annual required trainingprofessional development hours for the primary caregiver or assistant caregiver.

(4) Within two years prior to license application, the primary caregiver must have completed and documented all health and safety training specified in OAC 340:110-3-85(h)(3)(A)–(C).

~~(5) The primary caregiver must have documentation of current completed training in CPR and first aid prior to initial permit issuance.~~

~~(6) The assistant caregiver completes and documents all health and safety training specified in OAC 340:110-3-85(h)(3)(A)–(C) within six months of employment. CPR and first aid training are completed before the assistant caregiver is left alone with children.~~

(i) **Outdoor play space.** The requirements regarding outdoor play space per OAC 340:110-3-86(a)(12) must be met.

The outdoor play space must be enclosed by a building or a fence that is in good repair, begins at ground level, and is at least four feet high. The Oklahoma Department of Human Services does not grant exceptions.

PART 15. REQUIREMENTS FOR CHILD CARE CENTERS, DAY CAMPS, DROP-IN PROGRAMS, OUT-OF-SCHOOL TIME PROGRAMS, PART-DAY PROGRAMS AND PROGRAMS FOR SICK CHILDREN

340:110-3-278. Policy

(a) **General.** Policies are individualized to the program, followed, and maintained per Oklahoma Administration Code (OAC) 340:110-3-281.2(c).

(b) **Program liability insurance policy.** Program liability insurance is maintained, unless an exception, per Section 404.3 of Title 10 of the Oklahoma Statutes, Oklahoma Child Care Facilities Licensing Act, is posted per OAC 340:110-3-281.1.

(c) **Vehicle insurance policy.** Vehicle insurance is maintained per OAC 340:110-3-281.2(c) and (d).

(d) **Program policy.** Program policies:

- (1) are provided to:
 - (A) parents upon enrollment and when revisions are made; and
 - (B) personnel upon employment and when revisions are made; and
- (2) include at least items (A) through ~~(K)~~(L), unless a statement is included addressing non-applicable items:
 - (A) a brief program description;
 - (B) the ages of children accepted;
 - (C) the days and hours of operation including days closed, such as holidays;
 - (D) the location of the compliance file;
 - (E) relevant emergency plans and procedures information for parents;
 - (F) the health inclusion, separation, and exclusion criteria, including head lice and other infestations;
 - (G) whether the program administers medication and under what conditions;
 - (H) the behavior management and discipline methods;
 - (I) expulsion policy;
 - ~~(J)~~ the mandatory reporting requirement of suspected child abuse and neglect;
 - ~~(K)~~ an infant safe sleep environment description; and
 - ~~(K)~~ procedures for:
 - (i) gaining access to the building when the entrance is secured;
 - (ii) receiving and releasing children from the program, including the methods for verifying the identity of a caller to authorize the pick-up of a child and of an individual who picks up a child. Verbal authorizations to pick-up a child, not previously indicated in the child's records, are documented per OAC 340:110-3-281.4;

- (iii) notifying parents when a child does not arrive as required per OAC 340:110-3-280(d);
- (iv) monitoring children's health as required per OAC 340:110-3-294(c);
- (v) notifying parents of communicable disease exposure, while maintaining confidentiality of the ill child or personnel;
- (vi) notifying of infestation exposure, while maintaining confidentiality of the infected child or personnel;
- (vii) handling illnesses, injuries, and poison exposures, including when children are off-site;
- (viii) storing, administering, returning, and disposing of medications;
- (ix) storing, using, returning, and disposing of medical waste, such as syringes, needles, and lancets;
- (x) using sun safety methods, such as sunscreen;
- (xi) using insect repellent;
- (xii) managing children's personal belongings;
- (xiii) transporting children;
- (xiv) notifying parents of field trips;
- (xv) receiving children who arrive late for field trips when their group has left the facility; and
- (xvi) providing meals and snacks, including those for field trips.

(e) **Personnel policy.** When the program has two or more personnel, personnel policies:

- (1) are provided to personnel upon employment and when revisions are made; and
- (2) include, at least the:
 - (A) qualifications, responsibilities, and professional development requirements for each position, including initial and continuing professional development. Position descriptions may meet this requirement;
 - (B) chain of command;
 - (C) health and injury exclusion criteria, including head lice and other infestations; and
 - (D) procedures for the:
 - (i) close supervision of new personnel for at least 30-calendar days;
 - (ii) performance evaluations; and
 - (iii) discipline and termination of personnel.

(f) **Volunteer policy.** When the program uses volunteers, who are not filling another position per OAC 340:110-3-284.1 through 340:110-3-284.4, volunteer policies:

- (1) are provided to the volunteers upon starting service and when revisions are made; and
- (2) include, at least:
 - (A) screening and selection criteria; ~~and~~
 - (B) procedures for ensuring volunteers are familiar with emergency preparedness plans and procedures per OAC 340:110-3-279; and
 - ~~(B)~~ procedures for ensuring the volunteers obtain training and comply with requirements.

Emergency Adoptions

340:110-3-279. Emergency preparedness

(a) Emergency plans and procedures.

(1) **General.** The program is required to have emergency plans that are:

- (A) individualized to the program and hours of operation;
- (B) followed, unless children's safety is at risk or emergency personnel provide alternative instructions during an emergency; and
- (C) maintained per Oklahoma Administrative Code (OAC) 340:110-3-281.2(c).

(2) **Situations.** Emergency plans include procedures for:

- (A) serious injuries;
- (B) serious illnesses;
- (C) poison exposure;
- (D) outbreaks of communicable diseases, including pandemic influenza;
- (E) weather conditions, including tornados, floods, blizzards, and ice storms;
- (F) fires, including wildfires;
- (G) man-made disasters, including chemical and industrial accidents;
- (H) human threats, including individuals with threatening behaviors, bomb threats, and terrorist attacks;
- (I) lost or abducted children;
- (J) utility disruption; and
- (K) other natural or man-made disasters that could create structural damage to the facility or pose health hazards.

(3) **Child needs.** Emergency plans include procedures for addressing each child's needs, with additional considerations for:

- (A) 2-year-olds and younger; and
- (B) children with disabilities or chronic medical conditions.

(4) **Account for children.** The emergency plans include procedures to account for each child's location during an emergency.

(5) **Shelter-in-place.** Emergency plans include shelter-in-place procedures for short and extended stay situations that require children to stay in the building, such as tornados and other weather emergencies.

(6) **Lock-down.** Emergency plans include lock-down procedures for situations threatening the safety of children and personnel. Lock-down procedures include:

- (A) notifying personnel;
- (B) keeping children in designated safe locations in the building;
- (C) encouraging children to remain calm and quiet;
- (D) securing building entrances;
- (E) preventing unauthorized individuals from entering the building. When the program is in a shared facility, the program entrances are secured; and
- (F) responding when outdoors and on field trips.

(7) **Evacuation.** Emergency plans include evacuation procedures for situations that require children leave the

building, such as building fires. Evacuation procedures include:

- (A) evacuation routes posted per OAC 340:110-3-281.1(c) and (i); and
- (B) pre-determined meeting locations.

(8) **Relocation.** Emergency plans include relocation procedures for situations that require children move to an alternate location, such as bomb threats and wildfires.

Relocation procedures include:

- (A) pre-determined primary and secondary alternate locations, with prior approval from the contact individual at alternate locations;
- (B) relocating children, including a pre-determined transportation plan; and
- (C) reuniting parents and children.

(9) **Reporting.** Emergency plans include procedures for notifying:

- (A) emergency authorities, including the poison control center, when necessary;
- (B) parents, including a method and backup method for how and when parents are notified; and
- (C) Licensing per OAC 340:110-3-280(a).

(10) **Personnel.** Emergency plans include procedures for ensuring personnel are familiar with the:

- (A) current emergency plans and procedures, including roles and responsibilities in an emergency;
- (B) location of the emergency plans and procedures;
- (C) location of the posted emergency information;
- (D) location of the first aid and emergency supply kits; and
- (E) location and use of the fire extinguishers.

(b) Phones.

(1) **On-site.** The program provides an operable phone in each building and on each floor.

(2) **Off-site.** An operable phone is available at off-site activities.

(3) **Vehicles.** An operable phone is in each vehicle when children are transported.

(c) Posted emergency information.

(1) **Program information and emergency numbers.** Items are posted per OAC 340:110-3-281.1(d) and (i).

(2) **First aid kit, emergency supply kit, and fire extinguisher locations.** Locations are posted per OAC 340:110-3-281.1(i).

(3) **Evacuation routes.** Routes are posted per OAC 340:110-3-281.1(c) and (i).

(d) First aid kits.

(1) **Location.** First aid kits are located in each building and in vehicles when transporting children.

(2) **Accessibility.** First aid kits are accessible to personnel at all times and inaccessible to children.

(3) **Replace.** First aid kit supplies are replaced as needed, including expired items.

(4) **Sanitary.** First aid kit supplies are maintained in a clean and sanitary manner, including sanitizing re-usable supplies.

- (5) **Supplies.** First aid kit supplies are stored together in a portable container.
- (A) Supplies include, at least:
- (i) non-medicated adhesive strips;
 - (ii) sterile gauze pads;
 - (iii) rolled flexible or stretch gauze;
 - (iv) bandage tape;
 - (v) disposable non-porous, latex-free gloves;
 - (vi) blunt-tipped scissors;
 - (vii) tweezers;
 - (viii) a non-glass and non-mercury thermometer.
- The appropriate thermometer and method are used per OAC 340:110-3-294(d);
- (ix) a current first aid guide; and
 - (x) a copy of the posted program information and emergency numbers per (c) of this Section.
- (B) In addition, the first aid kits in vehicles include, at least:
- (i) a cold pack;
 - (ii) liquid soap and water or individually packaged moist, disposable towelettes, for cleaning wounds;
 - (iii) hand sanitizer and moist, disposable towelettes, for hand hygiene;
 - (iv) plastic bags for disposal of items contaminated with blood or other body fluids; and
 - (v) a pen or pencil and note pad.
- (e) **Emergency supply kit.**
- (1) **Records.** Records available during an emergency include, at least the:
- (A) emergency plans and procedures per OAC 340:110-3-281.2(c) and alternate location addresses, phone numbers, and contacts;
 - (B) emergency contacts per OAC 340:110-3-281.2(c); and
 - (C) full names of children and personnel currently in attendance.
- (2) **Supplies.** Emergency supplies gathered at the time of an emergency or maintained in a portable container at all times include, at least:
- (A) a first aid kit; and
 - (B) children's prescribed medications, including life-threatening condition medications.
- (f) **Testing and maintaining emergency equipment.**
- (1) **Individual smoke and carbon monoxide alarms.** When the facility is equipped per OAC 340:110-3-300(t) or (u), individual alarms are:
- (A) operable; and
 - (B) tested at least monthly. Documentation is maintained per OAC 340:110-3-281.2(c).
- (2) **Central detection and alarm system for smoke and carbon monoxide.** When the facility is equipped per OAC 340:110-3-300(v), the system is:
- (A) fully functional;
 - (B) checked at least monthly by viewing the control panel and documented per OAC 340:110-3-281.2(c).
- However, this is not required when a company continuously monitors the system for full-function as documented per OAC 340:110-3-281.2(c); and
- (C) inspected and tagged at least every 12 months by a state licensed authority.
- (3) **Fire extinguishers and automatic sprinkler systems.** Fire extinguishers and automatic sprinkler systems are:
- (A) fully functional; and
 - (B) inspected and tagged at least every 12 months by a state licensed authority.
- (g) **Drills and reviews.**
- (1) **General.** Drills and reviews are documented per OAC 340:110-3-281.2(c) and drills are conducted:
- (A) at various times throughout the hours of operation, such as morning, mid-day, afternoon, and evening, so children and personnel in attendance at various times are involved in each type of drill at least one time every three months; ~~and~~
 - (B) by following the pre-determined emergency plans and procedures; ~~and~~
 - (C) per required scheduling.
- (i) **Monthly.** Monthly drills include:
 - (I) fire drills conducted by evacuating and meeting at pre-determined locations; and
 - (II) tornado drills conducted by sheltering in pre-determined on-site locations.
 - (ii) **Annual.** Annual drills include:
 - (I) locking-down by sheltering in pre-determined on-site locations;
 - (II) relocating according to procedures of preparation to relocate but do not require physical relocation;
 - (III) sheltering-in-place, requiring children stay inside the facility, such as tornados and other weather emergencies; and
 - (IV) evacuating and meeting at pre-determined locations.
- (2) ~~Fire drills.~~ ~~Fire drills are conducted at least monthly by evacuating and meeting at pre-determined locations.~~
- (3) ~~Tornado drills.~~ ~~Tornado drills are conducted at least monthly by sheltering in pre-determined on-site locations.~~
- (4) **Lock-down and relocation procedures reviews.** Personnel review the procedures at least once every 12 months.
- (5) **Emergency plans and procedures reviews.** The director updates, as necessary, and reviews emergency plans and procedures:
- (A) at least once every 12 months;
 - (B) upon enrollment of children with disabilities or chronic medical conditions;
 - (C) after a drill when procedure issues are identified; and
 - (D) after an emergency, as identified in this Section.

Emergency Adoptions

340:110-3-280. Reporting

(a) Licensing.

(1) **Next business day.** The owner, responsible entity, or director notifies Licensing by the next Oklahoma Department of Human Services (DHS) business day of:

- (A) a change of responsible entity;
- (B) a change of director;
- (C) a change in mailing address, when different from the physical address;
- (D) a change in phone number;
- (E) a change in program liability insurance coverage;
- (F) an individual moving into the facility;
- (G) a known legal action, such as a Victim Protection Order, arrest, or criminal investigation or charge, involving the program, owner, responsible entity, personnel, or an individual living in the facility;
- (H) a known child abuse or neglect investigation involving the owner, responsible entity, personnel, or an individual living in the facility that is pending or has a disposition;
- (I) an unscheduled temporary or permanent program closure or relocation;
- (J) facility damage affecting the amount of usable square footage or compliance with requirements;
- (K) an incident that exposes children to an imminent risk of harm, such as a child leaving the facility without program knowledge or being left alone on- or off-site or in a vehicle;
- (L) an animal bite to an individual that occurs on-site at any time or off-site when participating in program activities;
- (M) an accident involving transportation, unless there were no injuries and only minor damage to the vehicles;
- (N) a child injury requiring emergency medical attention; and
- (O) a child death occurring while in care.

(2) **Thirty calendar days prior.** The owner, responsible entity, or director notifies Licensing at least 30 calendar days prior to:

- (A) an anticipated temporary or permanent program closing, other than a scheduled closing identified in program policy, such as a holiday;
- (B) an anticipated temporary or permanent change in location;
- (C) an anticipated facility change or alteration effecting the amount of usable square footage or compliance with the requirements;
- (D) a change of business entity;
- (E) a change in program name; and
- (F) a proposed licensed capacity change.

(b) ~~Child abuse and neglect hotline~~ **and human trafficking.**

(1) **Immediately Abuse and neglect.** ~~Individuals who have a suspicion or reason to believe a child was abused or neglected or is in danger of being abused, immediately make a report to the statewide Child Abuse and Neglect~~

~~Hotline 1-800-522-3511 per Section 1-2-101 of Title 10A of the Oklahoma Statutes. Any person who has reason to believe a child has been abused or neglected per 10 O.S. § 1-1-105 is required to report the matter promptly to the DHS Child Abuse and Neglect Hotline at 1-800-522-3511 per Section 1-2-101 of Title 10A of the Oklahoma Statutes (10A O.S. § 1-2-101). Failure to report is a misdemeanor offense and upon conviction is punishable by law. Failure to report with prolonged knowledge, six months or more, of ongoing abuse or neglect is a felony offense.~~

(2) **Failure to report Human trafficking.** ~~It is a misdemeanor for any individual who fails to report suspected child abuse or neglect. Per 21 O.S. § 870, every person having reason to believe that a person or child-placing agency is engaging in the crime of trafficking in children, as described in 21 O.S. § 866 of the Oklahoma Statutes, reports the matter promptly to the Oklahoma Bureau of Narcotics and Dangerous Drugs Control.~~

(c) Health department.

(1) **Promptly.** The program promptly notifies the local or Oklahoma State Department of Health (OSDH) of a known case, in individuals associated with the program, of:

- (A) Haemophilus influenzae invasive diseases;
- (B) hepatitis A;
- (C) measles; and
- (D) meningococcal invasive disease.

(2) **Next business day.** By the next health department business day, the program notifies the local or OSDH of a known case, in individuals associated with the program, of:

- (A) E. coli O157:H7 or shigatoxin-producing E. coli (STEC);
- (B) rubella;
- (C) salmonellosis;
- (D) shigellosis;
- (E) tuberculosis; and
- (F) whooping cough (pertussis).

(d) Parents.

(1) **Immediately.** The program notifies parents immediately of:

- (A) a child who does not arrive on his or her own at the facility as scheduled, such as when walking to the facility;
- (B) a child not present at the pick-up location as scheduled;
- (C) a child or individual at the pick-up location who believes the child is to be transported by the program, when the program is not providing this transportation;
- (D) administration of a life-threatening condition medication that is only administered as needed;
- (E) an injury that may need evaluation by a physician;
- (F) poison exposure; and
- (G) an animal bite to a child, when the skin is broken or when an evaluation by a physician may be needed.

(2) **Promptly.** The program notifies parents promptly of a child who is separated from the group due to an illness or infestation or when exclusion is required per Oklahoma Administrative Code (OAC) 340 Appendix JJ - Exclusion Criteria for Children Who Are Ill.

(3) **Upon child pick up.** The program notifies parents upon child pick up of:

- (A) daily happenings, including the infant and 1-year-old daily records as maintained per OAC 340:110-3-281.4(b);
- (B) changes in the child's physical or emotional state;
- (C) known minor injuries;
- (D) illness or infestation symptoms that developed or changed;
- (E) a communicable disease or infestation exposure according to program policy per OAC 340:110-3-278(d);
- (F) an administration of a non-life-threatening condition medication that is only administered as needed, such as diaper cream;
- (G) an animal bite to a child, when the skin is not broken; and
- (H) implemented emergency plans and procedures, except for drills.

(4) **Prior.** The program notifies parents prior to each field trip of the date, time, and location. The field trip permission per OAC 340:110-3-281.4(b) meets this requirement when this specific information is included.

(5) **Upon enrollment and prior to changes.** The program notifies parents upon enrollment and prior to a change in the presence of:

- (A) an animal;
- (B) tobacco or simulated tobacco use; and
- (C) weapons, including how safety requirements are met.

340:110-3-281.1. Posted records and documentation

(a) **General.** General records and documentation requirements per Oklahoma Administrative Code (OAC) 340:110-3-281 also apply to the items in this Section. The items are posted at all times in a clear, unobstructed view so they are easily read.

(b) **Post at main entrance —tobacco-free notice.** ~~A tobacco-free environment notice is posted at the program's entrance where the parents and public enter. The notice is not combined with other posted items. When the program is in a family residence, the notice indicates a tobacco-free environment at all times or no tobacco use during the hours of operation. Item is paper only.~~ Items are posted at the program's main entrance where the parents and public enter and (2) through (3) of this subsection are also posted in a conspicuous location within clear view.

(1) **Tobacco-free environment notice.** The notice is not combined with other posted items. When the program is in a family residence, the notice indicates a tobacco-free environment at all times or no tobacco use during the hours of operation. Item is paper only.

(2) **Notice to parents.** Oklahoma Department of Human Services (DHS) Publication No. 14-01, Notice to Parents, is posted. Item is paper only.

(3) **Program liability insurance exception notification.** The DHS form is posted when program liability insurance is not maintained or program reports being self-insured. Item is paper only.

(c) **Post in prominent location for parents and public.** Items are posted in a noticeable and frequently visited location for the parents and public to view and may include multiple buildings depending on where parents and public typically visit.

(1) **Permit or license.** ~~The Oklahoma Department of Human Services (DHS) permit or license is posted.~~ Item is paper only.

(2) **Notice of denial or revocation.** A denial or revocation notice is posted. Item is paper only.

(3) **Star certificate.** DHS Star certificate is posted. Item is paper only.

(4) **Personnel in charge.** The program posts the director's full name and at least one additional personnel responsible for the program in the event the director is not present at the facility. When the individuals listed are not present, the appointed personnel in charge is temporarily posted.

~~(5) **Notice to parents.** DHS Publication No. 14-01, Notice to Parents, is posted. Item is paper only.~~

~~(6) **Child abuse and neglect notification.** A notice of the Child Abuse and Neglect Hotline number and requirement to report suspected abuse or neglect is posted.~~

~~(7) **Child welfare investigative summary - confirmed and substantiated findings.** DHS form is posted for 120 calendar days from the date the investigation is completed, as indicated on the form. Item is paper only.~~

~~(8) **Program liability insurance exception notification.** DHS form is posted when program liability insurance is not maintained. Item is paper only.~~

~~(9) **Evacuation routes.** A floor plan with primary and secondary evacuation routes from each area of the building is posted on each floor. Item is paper only and may only be combined as described per (i) of this Section.~~

~~(10) **Weekly menu.** The menu, including dates and substitutions, is posted. Additional posted menus are duplicates, including substitutions.~~

(d) **Post in prominent location for personnel.** Items are posted in a noticeable and frequently visited location for personnel to view and may include multiple buildings.

(1) **Program information.** The program name and address, with main cross streets or directions to the facility, are posted. Item is paper only.

(2) **Emergency numbers.** The program posts emergency numbers. Item is paper only. Numbers include:

- (A) 9-1-1, where available, or local law enforcement, fire department, and ambulance service; and
- (B) poison control, 1-800-222-1222.

(3) **Restricted registry notice.** DHS Publication No. 14-07, Child Care Restricted Registry Notice is posted. Item is paper only.

Emergency Adoptions

(e) **Post in kitchen.** The requirements listed in (1) and (2) of this subsection are met.

(1) **Weekly menu.** The menu, including dates and substitutions, is posted. Additional posted menus are duplicates, including substitutions.

(2) **Food allergies.** Known food allergies of children in care are posted near the menu, including the child's full name and classroom.

(f) **Post on all microwaves - warning.** DHS Publication No. 97-27, Microwave Warning, is posted. However, the program may modify the publication or develop a document, provided the information remains the same or is exceeded. When the program shares the facility, the posting is only required on microwaves used for children's food. Item is paper only.

(g) **Post near sinks - hand washing procedures.** The program posts DHS Publication No. 14-02 - Hand Washing Procedures Using Paper Towels or DHS Publication No. 14-03 - Hand Washing Procedures Using Mechanical Hand Dryers, where individuals can read the publication while washing their hands. However, the program may modify the publication or develop a document, provided the procedures remain the same or are exceeded.

(h) **Post in diaper changing areas - procedures.** The program posts DHS Publication No. 14-04 - Diaper Changing Procedures, where individuals can read the publication while changing diapers. However, the program may modify the publication or develop a document, provided procedures remain the same or are exceeded. Item is paper only.

(i) **Post in classrooms.** Items are posted where personnel and parents can read the items, unless the requirements specifically state otherwise. Two or more classrooms may share the posted items when the classrooms are next to each other and are divided by low height walls or barriers and the items can be read from each classroom.

(1) **Program information and emergency numbers.** The program posts duplicate items in a prominent location for personnel per (d) of this Section. Items are paper only.

(2) **First aid kits, emergency supply kits, and fire extinguishers.** The location of kits and fire extinguishers are posted. Items are paper only.

(3) **Evacuation routes.** A floor plan with primary and secondary evacuation routes from the classroom(s) is posted. Routes are not combined with other posted items, except for program information, emergency numbers, and locations of first aid kits, emergency supply kits, and fire extinguishers per (1) and (2) of this subsection. Items are paper only.

(4) **Ratios and group sizes.** The applicable program-type ratios and group sizes per OAC 340 Appendix GG - Ratios and Group Sizes are posted.

(5) **Daily classroom schedule.** The program posts a schedule with the required content per OAC 340:110-3-289(b). Classrooms may only share this item when the schedule is applicable to each classroom.

(6) **Weekly lesson plans.** The program posts lesson plans with the dates and required content per OAC

340:110-3-289(d). Classrooms may only share this item when the lesson plan is applicable to each classroom.

(7) **Allergies.** The program posts known food and life-threatening allergies, the child's full name, and location of any life-threatening condition medications for children present in classroom(s), when exposure could potentially occur while in care. To protect confidentiality, the item is posted in a location or manner, such as with a cover sheet, so only personnel can read it. Item is paper only.

340:110-3-281.2. Program records and documentation

(a) **General.** General records and documentation requirements per Oklahoma Administrative Code (OAC) 340:110-3-281 also apply to the items in this Section.

(b) **Accessible in prominent location.** Items are located in a noticeable and frequently visited location for the parents and public to view and may include multiple buildings depending on where parents and the public typically visit, and can be accessed without asking personnel.

(1) **Requirements.** Oklahoma Department of Human Services (DHS) Publication No. 14-05, Licensing Requirements for Child Care Programs, is accessible.

(2) **Selecting quality child care.** DHS Publication 87-91, Selecting Quality Child Care - A Parent's Guide, is accessible.

(3) **Compliance file.** Items are originals or copies and are maintained together, with the most recent on top and all child identifying information removed. The compliance file includes items within the last 120 calendar days, at a minimum, from the date on the document or the investigation completion date on the form, unless requirements specifically state otherwise. The compliance file only contains:

(A) compliance monitoring from Licensing, Stars, and tribal agencies, such as:

(i) monitoring visit forms. Include most recent visit; and

(ii) case status information, such as forms and correspondence regarding:

(I) issuance of permits and licenses;

(II) non-compliances and Stars violations;

(III) notices to comply;

(IV) complaint findings;

(V) office conferences with Licensing, Stars, and tribal agencies;

(VI) Stars alternative settlements and reductions; and

(VII) consent agreements, denials of a request for a license, and revocations of a license;

(B) child welfare investigative summary, regardless of findings. However, confirmed or substantiated findings are maintained in the file for 12 months;

(C) granted criminal history restriction waiver notifications. However, notification is maintained in the file for as long as the individual is employed or is living in the facility; and

- (D) other documents indicating placement in the compliance file.
- (c) **Available in facility.** Items are available upon request.
 - (1) **Necessity, issuance, and maintenance of a permit or license.** The requirements listed in (A) and (B) of this subsection are met.
 - (A) **Fire inspections.** Items are available upon request.
 - (B) **Health inspections.** Items are available upon request.
 - (2) **Other business, shared facility, and collaborations - collaboration agreement.** Item is available upon request.
 - (3) **Policy.** The requirements listed in (A) through (D) of this paragraph are met.
 - (A) **Program liability insurance policy.** DHS form, completed every 12 months, and a certificate of liability insurance from the insurance agent is available, unless an exception is posted per OAC 340:110-3-278(b).
 - (B) **Program policy.** Policy includes content per OAC 340:110-3-278(d).
 - (C) **Personnel policy.** Policy includes content per OAC 340:110-3-278(e).
 - (D) **Volunteer policy.** Policy includes content per OAC 340:110-3-278(f).
 - (4) **Emergency preparedness.** The requirements listed in (A) through (G) of this paragraph are met.
 - (A) **Emergency plans and procedures.** Item includes content per OAC 340:110-3-279(a) and is maintained in a readily available and portable manner for emergencies. Item is paper only.
 - (B) **Emergency contacts.** Emergency contact information for all personnel and enrolled children is maintained together in a readily available and portable manner for emergencies. Item is paper only.
 - (C) **Individual smoke and carbon monoxide alarm tests.** Item includes the dates the tests are conducted.
 - (D) **Central detection and alarm system checks for smoke and carbon monoxide.** Item includes the dates the system is checked or a contract from the company that continuously monitors the system for full-function.
 - (E) ~~Fire and tornado~~**Emergency preparedness drills.** Item includes dates and times the drills are conducted, with a signature of the director or personnel in charge during the drill.
 - (F) **Lock-down and relocation procedure reviews.** Item includes dates the reviews are completed by personnel.
 - (G) **Emergency plans and procedure reviews.** Item includes dates the reviews are completed by the director.
 - (5) **Attendance.** The requirements listed in (A) through (C) of this paragraph are met.
 - (A) **Personnel's attendance.** Daily attendance is:
 - (i) promptly documented on paper, including personnel's full name and arrival and departure time; and
 - (ii) maintained, on paper or electronically, for at least 12 months.
 - (B) **Children's attendance.** Daily attendance is:
 - (i) promptly documented on paper, including the child's full name and arrival and departure time; and
 - (ii) maintained, on paper or electronically, for at least 12 months.
 - (C) **Transportation attendance.** Attendance is maintained per (d) of this Section.
 - (6) **Animals.** The requirements listed in (A) and (B) of this paragraph are met.
 - (A) **Rabies vaccination.** A certificate from a licensed veterinarian for dogs and cats 4 months of age and older is available.
 - (B) **Psittacosis test results.** Negative results from a licensed veterinarian for each bird of the parrot family is available.
 - (7) **Parent communication and family engagement - ~~parent conferences.~~** ~~Documentation of conferences offered by a general or individualized notification is available.~~ Requirements listed in (A) through (B) of this subparagraph are met.
 - (A) **Parent conferences.** Documentation of conferences offered by general or individualized notification is available.
 - (B) **Parent notifications.** Parents are provided information regarding insurance liability and the compliance file.
 - (i) Parents complete DHS forms every 12 months regarding insurance liability and the compliance file. Forms are maintained at the facility.
 - (ii) When the child is enrolled, parents are provided copies of DHS Form 07LC093E, Insurance Exception Notification, and DHS Publication No. 14-01, Notice to Parents.
 - (8) **Health and hygiene.** The requirements listed in (A) and (B) of this paragraph are met.
 - (A) **Injury and poison exposure log.** Incidents requiring an injury or poison exposure report are documented and maintained in one location for at least 12 months, to determine patterns. The log includes, at least the:
 - (i) child's full name and age;
 - (ii) injury date, time, type, and location at facility or off-site; and
 - (iii) personnel present at the time of the injury.
 - (B) **Personnel administering medication.** Item includes full names of personnel designated to administer medication.
 - (9) **Physical environment.** The requirements listed in (A) through (E) of this paragraph are met.
 - (A) **Physical environment checklist.** DHS form, or other checklists regarding the same information as the form, is completed at least every 12 months.

Emergency Adoptions

- (B) **Water supply - well water results.** Test results ~~that~~ meeting requirements per OAC 340:110-3-300(k) are available.
- (C) **Impact-absorbing materials.** Documentation of the American Society for Testing and Materials International (ASTM) tested impact-absorbing materials is maintained for the duration of the material's use.
- (D) **Equipment inventory.** DHS form applicable to the program type and ages of children accepted into care is available.
- (E) **Crib compliance.** Verification cribs meet Consumer Product Safety Commission standards is maintained for the duration of the cribs' use.
- (10) **Transportation.** The requirements listed in (A) through (C) of this paragraph are met.
- (A) **Transportation itinerary.** Item indicates approximate vehicle location at all times. Additional itineraries are duplicates.
- (B) **Vehicle insurance.** Proof of insurance indicates the specific vehicles covered by the policy.
- (C) **Vehicle maintenance.** Item includes the dates and full names of the individuals or commercial entities who conducted each inspection of:
- tire wear and pressure;
 - brakes;
 - lights; and
 - seat belts.
- (d) **Available in vehicle.** The items listed in (1) through (6) of this subsection are maintained in the vehicle.
- Program information.** Item includes program name, address, and phone number. Item is paper only.
 - Vehicle insurance.** Proof of insurance is available. Item is paper only.
 - Transportation itinerary.** Item indicates approximate vehicle location at all times. Additional itineraries are duplicates.
 - Emergency contacts and child information.** The full name and emergency contact information for each transported child is available. Item is paper only.
 - Transportation attendance.** Attendance is:
 - immediately documented each time each child enters and exits the vehicle; and
 - maintained in the vehicle or facility for at least 120 calendar days.
 - Child passenger check.** Before leaving the vehicle and in addition to the transportation attendance, the driver or last personnel in the vehicle documents completion of at least two methods of inspecting all areas of the vehicle for any remaining children to ensure no children are left on the vehicle.

340:110-3-284. General qualifications, responsibilities, and professional development

- (a) **General.** Personnel are required to meet the general requirements in this Section and those specific to their assigned position(s) per Oklahoma Administrative Code (OAC)

340:110-3-284.1 through 340:110-3-284.4, with or without reasonable accommodations.

- (b) **Qualifications.** Personnel meet the general qualification requirements listed in (1) through (3) of this subsection.

(1) **Skills.** Personnel possess the skills to perform their position responsibilities.

(2) **Background investigations.** Personnel meet the background investigation requirements per OAC 340:110-3-282.

(3) **Oklahoma Professional Development Ladder.** Prior to or within 12 months of employment, teaching personnel obtain and maintain a current Oklahoma Professional Development Ladder (OPDL) certificate, per OAC 340 Appendix FF - Oklahoma Professional Development Ladder.

- (c) **Responsibilities.** Personnel meet the general responsibility requirements listed in (1) through (3) of this subsection.

(1) **Complying with requirements.** Personnel comply with the requirements.

(2) **Caring for and educating children.** Personnel:

(A) individualize the care and learning opportunities to meet each child's needs based upon the child's age and abilities, including reviewing the information provided by parents while respecting confidentiality;

(B) recognize and act to correct hazards to physical safety, both indoors and outdoors;

(C) demonstrate good judgment as evidenced by prudent and responsible behavior that reasonably ensures the health and safety of children;

(D) demonstrate realistic expectations for behavior based on the age, abilities, and needs of children; and

(E) work with children without physical, psychological, or emotional punishment, mistreatment, or abuse.

(3) **Reporting child abuse and neglect.** Personnel report suspected child abuse and neglect and human trafficking per OAC 340:110-3-280(b).

- (d) **Professional development.** Personnel meet the general professional development requirements listed in (1) through (8) of this subsection.

(1) **Professional development verification.** Verification of professional development is maintained per OAC 340:110-3-281.3(b).

(2) **Professional development plan.** For the director and teaching personnel the program:

(A) within one month of employment, develops an individualized education plan;

(B) updates the plan annually; and

(C) maintains documentation per OAC 340:110-3-281.3(b).

(3) **Orientation.** Within one week of employment and prior to having sole responsibility for a group of children, personnel obtain orientation, as documented per OAC 340:110-3-281.3(b), ~~that~~ includes including, at least a review of:

(A) requirements;

(B) infection prevention and control of infectious disease;

- (C) immunizations;
- ~~(D)~~ injury prevention;
- ~~(E)~~ handling common childhood emergencies, including choking;
- ~~(F)~~ administration of medication;
- ~~(G)~~ prevention of and response to emergencies due to food and allergic reactions;
- ~~(H)~~ reportable infectious disease and mandatory reporting;
- ~~(I)~~ child abuse and neglect definition, identification, and mandatory reporting;
- ~~(J)~~ appropriate use of discipline;
- ~~(K)~~ transportation and general child passenger safety;
- ~~(L)~~ building and physical premise safety including identification of and protection from hazards that can cause bodily injury, such as electrical hazards, bodies of water, and vehicular traffic;
- ~~(M)~~ handling and storage of hazardous materials and appropriate disposal of bio-contaminants;
- ~~(N)~~ diaper changing;
- ~~(O)~~ prevention of shaken baby syndrome and abusive head trauma;
- ~~(P)~~ prevention of sudden infant death syndrome (SIDS);
- ~~(Q)~~ infant safe sleep environments practices; and
- ~~(R)~~ program specific information, that includes including, at least:
 - (i) policies and procedures;
 - (ii) emergency plans and procedures preparedness and response planning for emergencies resulting from a natural disaster or a man-caused event;
 - (iii) confidentiality of information regarding children and families;
 - (iv) personnel's assigned duties and responsibilities, such as classroom schedules and lesson plans; and
 - (v) methods used to inform personnel of children's special health, nutritional, and developmental needs.

(4) **Safe sleep.** Prior to caring for infants, personnel obtain formal professional development in safe sleep practices.

(45) **Entry Level Child Care Training (ELCCT) or equivalent.** Prior to, or within 90 calendar days of employment, teaching personnel hired after August 1, 2003, complete an approved entry-level training listed on the Oklahoma Professional Development Registry (OPDR) website, such as ELCCT. However, this training is not required when previously received, unless the individual has not been employed at a licensed program within the last five years.

(56) **CPR and first aid.** Cardio-pulmonary resuscitation (CPR) and first aid certifications are age-appropriate for the ages of children accepted into care and are from approved sources listed on the OPDR website. In addition to CPR and first aid certification requirements for

individuals listed in (A) through (B) of this subsection, other position specific CPR and first aid certification requirements are also met per OAC 340:110-3-284.1 through 340:110-3-284.4.

(A) At all times, at least one personnel with current CPR and first aid certification is present with children:

- (i) on-site, including in each building where children are present;
- (ii) off-site; and
- (iii) in each vehicle during transportation. However, a volunteer with certification from any source meets this requirement, provided the volunteer does not fill another position, excluding driver, per OAC 340:110-3-284.1 through 340:110-3-284.4.

(B) At least the director and master teachers obtain CPR and first aid certifications as required per OAC 340:110-3-284.1(b) and 340:110-3-284.2(b).

(67) **Infection control.** Personnel obtain infection control training at least every 12 months.

(78) **Continuing professional development.** Ongoing professional development is required.

(A) The director obtains at least the required number of professional development clock-hours to maintain a current Oklahoma Director's Credential per OAC 340 Appendix EE - Oklahoma Director's Credential. However, informal professional development clock-hours are limited.

(B) Teaching personnel obtain at least the required number of professional development clock-hours to maintain a current OPDL certificate per OAC 340 Appendix FF - Oklahoma Professional Development Ladder. However, informal professional development clock-hours are limited.

(C) Formal professional development is:

- (i) two or more clock-hours from an OPDR approved training organization; and
- (ii) OPDR approved college credit hours.

(D) Informal professional development is:

- (i) less than two clock-hours from an OPDR approved training organization;
- (ii) any number of clock-hours from an OPDR non-approved training organization; and
- (iii) any training from electronic media, such as videos or DVDs.

(E) Reading and television programs do not count toward required clock-hours.

(89) **Child passenger safety.** When the program provides transportation for 5-year-olds or younger, the program has at least one personnel who obtained child passenger safety training from an approved source listed on the OPDR website, unless the vehicles used are exempt per OAC 340:110-3-305(g). When the trained personnel's employment ends, the program has three months to meet this requirement.

Emergency Adoptions

340:110-3-284.1. Director and personnel in charge

(a) **General.** In addition to the position specific requirements in this Section, personnel meet the general requirements per Oklahoma Administrative Code (OAC) 340:110-3-284.

(b) **Director.** The program employs an individual who meets these position specific requirements.

- (1) **Position specific qualifications.** The director:
 - (A) is at least 21 years of age;
 - (B) has satisfactory work experience;
 - (C) has a current bronze or higher level certificate per OAC 340 Appendix EE - Oklahoma Director's Credential;
 - (D) is not a director or master teacher at another program that operates concurrently at any given time; and
 - (E) has a good understanding of the requirements and program policies.
- (2) **Position specific responsibilities.** The director is:
 - (A) accountable for the day-to-day operation of the program;
 - (B) responsible for:
 - (i) maintaining a program that meets or exceeds the requirements;
 - (ii) improving the quality of care;
 - (iii) implementing program development and evaluation;
 - (iv) ensuring personnel and volunteers comply with the requirements;
 - (v) supervising the conduct of personnel, volunteers, and other individuals providing services in the program;
 - (vi) appointing and informing the personnel in charge when the director is not present at the facility;
 - (vii) registering the program as a direct care organization and maintaining information on the Oklahoma Professional Development Registry (OPDR); and
 - (viii) overseeing parent communication and family engagement;
 - (C) present at the facility during the hours of operation at least 50 percent of the operating hours or 30 hours per week, whichever is less; and
 - (D) free from direct care responsibilities, when four or more teaching personnel are required to meet ratios, at least three hours per day during the hours of operation to provide program oversight and personnel supervision.
- (3) **Position specific professional development.** The director, upon assuming the position:
 - (A) completes a DHS requirements compliance review form within one month;
 - (B) obtains and maintains cardio-pulmonary resuscitation (CPR) and first aid certifications prior to, or within three months, that meet requirements per OAC 340:110-3-284(d); and
 - (C) is exempt from the Entry Level Child Care Training (ELCCT) or equivalent requirement.

(c) **Personnel in charge.** The director appoints an individual who meets the position specific requirements listed in (1) ~~and (2)~~ through (3) of this subsection.

- (1) **Position specific qualifications.** The personnel in charge:
 - (A) are at least 21 years of age; and
 - (B) have a good understanding of the requirements and program policies.
- (2) **Position specific responsibilities.** The personnel in charge takes responsibility for program operation when the director is not present at the facility.
- (3) **Position specific professional development.** The personnel in charge meets specific professional development for his or her regularly assigned position.

340:110-3-284.2. Teaching personnel

(a) **General.** In addition to the position specific requirements in this Section, personnel meet the general requirements per Oklahoma Administrative Code (OAC) 340:110-3-284.

(b) **Master teachers.** The program employs or uses at least the minimum number of required individuals or volunteers who meet these position specific requirements.

- (1) **Required master teachers.** At least one master teacher is required for every 60 children of the licensed capacity. Only the required number of master teachers are required to meet all of the master teacher requirements. However, all master teachers meet cardio-pulmonary (CPR) and first aid certification requirements listed in (5) of this subsection.
- (2) **Position specific qualifications.** Master teachers:
 - (A) are at least 18 years of age;
 - (B) have at least a high school diploma, General Education Development (GED), or Licensing approved equivalent; and
 - (C) have a current Oklahoma Professional Development Ladder (OPDL) certificate per OAC 340 Appendix FF - Oklahoma Professional Development Ladder of:
 - (i) Level 3, specifically met by an Oklahoma Competency Certificate with a Master Teacher emphasis; or
 - (ii) Level 4 or higher.
- (3) **Director as master teacher.** The director may count as a master teacher when the:
 - (A) licensed capacity is 30 or less; and
 - (B) director meets the master teacher qualifications.
- (4) **Position specific responsibilities.** Master teachers:
 - (A) support other teaching personnel in meeting teacher and assistant teacher responsibilities;
 - (B) are responsible for:
 - (i) the direct care of children;
 - (ii) planning and implementing the lesson plans;
 - (iii) classroom arrangement;
 - (iv) planning and implementing parent communication and family engagement; and

- (v) providing input on program development and evaluation; and
 - (C) are present at the facility during the hours of operation at least 50 percent of operating hours or 30 hours per week, whichever is less.
 - (5) **Position specific professional development.** ~~Prior to, or within three months of assuming the position, master~~ Master teachers obtain and maintain cardio-pulmonary resuscitation (CPR) and first aid certification that meets the requirements per OAC 340:110-3-284(d). Master teachers assuming the position:
 - (A) on or after November 1, 2016 obtain the certification within three months; or
 - (B) prior to November 1, 2016 obtain the certification before November 1, 2017.
- (c) **Teachers.** The program employs individuals or uses volunteers who meet the position specific requirements listed in (1) ~~and (2)~~ through (3) of this subsection.
- (1) **Position specific qualifications.** Teachers:
 - (A) are at least 18 years of age; and
 - (B) have at least:
 - (i) a high school diploma, General Educational Development (GED), or Licensing approved equivalent; or
 - (ii) completed 10th grade and are in the process of obtaining a GED for a period not to exceed 12 months from employment.
 - (2) **Position specific responsibilities.** Teachers:
 - (A) have the primary responsibility for the direct care of children; and
 - (B) participate in:
 - (i) lesson plan development and implementation;
 - (ii) classroom arrangement;
 - (iii) parent communication and family engagement; and
 - (iv) program development and evaluation.
 - (3) **Position specific professional development.** Teachers obtain and maintain CPR and first aid certification that meets the requirements per OAC 340:110-3-284(d). Teachers assuming the position:
 - (A) on or after November 1, 2016 obtain the certification within three months; or
 - (B) prior to November 1, 2016 obtain the certification before November 1, 2017.
- (d) **Assistant teachers.** The program may employ individuals or use volunteers who meet the position specific requirements listed in (1) through ~~(3)~~ (4) of this subsection.
- (1) **Position specific qualifications.** Assistant teachers:
 - (A) are at least 16 years of age; and
 - (B) meet one of these criteria:
 - (i) are currently enrolled in high school or an equivalent;
 - (ii) have at least a high school diploma, GED, or Licensing approved equivalent; or

- (iii) have completed 10th grade and are in the process of obtaining a GED for a period not to exceed 36 months from employment.
 - (2) **Position specific responsibilities.** Assistant teachers:
 - (A) are responsible for the direct care of children; and
 - (B) carry out assigned tasks that may include participation in:
 - (i) lesson plan development and implementation;
 - (ii) classroom arrangement;
 - (iii) parent communication and family engagement; and
 - (iv) program development and evaluation.
 - (3) **Position specific professional development.** Assistant teachers obtain and maintain CPR and first aid certification that meets the requirements per OAC 340:110-3-284(d). Assistant teachers assuming the position:
 - (A) on or after November 1, 2016 obtain the certification within three months; or
 - (B) prior to November 1, 2016 obtain the certification before November 1, 2017.
 - (34) **Position specific limitations.** Assistant teachers:
 - (A) are overseen by an on-site director, master teacher, or teacher who:
 - (i) oversees two or fewer assistant teachers at one time; and
 - (ii) provides intervention when needed; and
 - (B) do not have sole responsibility for a group of children:
 - (i) for more than three hours per day; and
 - (ii) during higher risk activities per OAC 340:110-3-290.
- (e) **Substitutes for teaching personnel.** The program may employ individuals or use volunteers or other personnel who meet the position specific requirements listed in (1) through (3) of this subsection.
- (1) **Position specific qualifications.** Substitutes meet the teacher qualifications per (c) of this Section. However, the OPDL certificate is not required until indicated in (3) of this subsection.
 - (2) **Position specific responsibilities.** Substitutes meet the responsibility requirements for the position(s) they are filling.
 - (3) **Position specific professional development.** Substitutes meet the general professional development requirements per OAC 340:110-3-284(d). However, the timeframe for meeting professional development requirements begins when the substitute has worked for the program a total of 80 hours. ~~Prior to being left alone with children. However:~~
 - (A) orientation is required, prior to being left alone with children; and
 - (B) CPR and first aid certification is met per specific position requirements.

Emergency Adoptions

340:110-3-289. Learning program principles

- (a) **General.** Each child is:
- (1) provided an inclusive environment that:
 - (A) meets the needs and encourages full participation of all children; and
 - (B) is equipped and prepared for learning based on each child's age, needs, and interests;
 - (2) provided multiple opportunities to play individually or in small, informal groups the majority of the day;
 - (3) allowed to choose an activity, whether teaching personnel-directed or child-selected; and
 - (4) encouraged, but not forced, to participate in program activities, with adaptations made to ensure safety and participation.
- (b) **Daily classroom schedules.** Classroom schedules provide consistent routines.
- (1) Classroom schedules are:
 - (A) a sequence of activities indicating times of day;
 - (B) developed for each classroom;
 - (C) followed with reasonable regularity;
 - (D) age-appropriate; and
 - (E) posted per Oklahoma Administrative Code (OAC) 340:110-3-281.1(i).
 - (2) Classroom schedules include at least:
 - (A) alternating periods of quiet and active play;
 - (B) indoor and outdoor play;
 - (C) meal and snack time;
 - (D) rest time, when applicable; and
 - (E) transportation, when applicable.
- (c) **Transition times.** Teaching personnel have short-term activities, such as songs, stories, and exercises to reduce waiting periods while children finish an activity or routine and start another.
- (d) **Weekly lesson plans.** Lesson plans provide varying daily activities by including a collection of diverse topics, projects, or ideas influenced by children's curiosity and interests.
- (1) Lesson plans are:
 - (A) developed weekly indicating plans for each day;
 - (B) developed for each classroom;
 - (C) followed with flexibility;
 - (D) different each week; and
 - (E) posted per OAC 340:110-3-281.1(i).
 - (2) Lesson plans include at least daily indoor and outdoor learning activities and experiences that:
 - (A) are developmentally appropriate;
 - (B) meet children's needs and stimulate learning in these developmental areas:
 - (i) social;
 - (ii) emotional;
 - (iii) cognitive;
 - (iv) language, including reading to children at least 15 minutes per day and providing opportunities for writing;
 - (v) creative expression, such as art and music; and
 - (vi) physical, including at least one activity that teaching personnel lead and participate in;
 - (C) balance gross and fine motor activities; and
 - (D) use a variety of equipment and materials.
- (e) **Interest areas.** Play equipment is arranged into interest areas in classrooms with 2-year-olds or older. However, children may move the play equipment between interest areas while playing. Required interest areas include:
- (1) art;
 - (2) blocks;
 - (3) books and language;
 - (4) dramatic play; and
 - (5) manipulatives.
- (f) **Play equipment accessibility.** Required play equipment, per OAC 340 Appendix MM - Equipment, for the:
- (1) licensed capacity is maintained at the facility; and
 - (2) classroom is proportionate in amount and variety to the number of children in attendance and within the reach of children for their use.
- (g) **Play equipment rotation.** Play equipment may be rotated to maintain interest.
- (h) **Outdoor play.** Daily outdoor play is ensured:
- (1) for each child regardless of age, unless the child's health or safety is at risk; and
 - (2) provided weather and environmental conditions do not pose a significant health or safety risk, by:
 - (A) adjusting the time of day for outdoor play, adjusting the amount of time outside, and considering the children's ages; and
 - (B) children wearing weather-appropriate clothing.
- (i) **Electronic and print media.** Media may be used with children, provided these restriction requirements are met.
- (1) Electronic and print media are chosen with discretion and selectivity and are:
 - (A) non-violent;
 - (B) non-vulgar;
 - (C) non-sexually explicit;
 - (D) culturally sensitive; and
 - (E) age-appropriate, according to widely accepted rating systems.
 - (2) When the internet is accessible for children's use, the program ensures children do not have access to inappropriate websites, email, instant messaging, and similar technology.
 - (3) Screen time is:
 - (A) viewing electronic media with a screen, such as television (TV), digital video display (DVD), videos, video games, phones, and computers. Screen time includes viewing screens while others use the media;
 - (B) not used during meal and snack times. However, snacks may be provided during occasional special activities;
 - (C) not used when all children in the group are 1-year-olds or younger; and
 - (D) limited for all other groups whether a teaching personnel-directed or child-selected activity.
 - (i) Screen time is limited to:

- (I) thirty minutes or less during the day for each child or group. However, Saturday mornings may include an additional 30 minutes for each child or group; and
- (II) one hour or less during the evening for each child or group in evening or overnight care.
- (ii) Exceptions to limited screen time include:
 - (I) electronic media involving physical activity participation;
 - (II) electronic media when used for children's homework;
 - (III) e-readers when used for reading;
 - (IV) smart boards and tables when used for hands-on learning activities, such as drawing or puzzles;
 - (V) occasional special activities, such as watching a movie; and
 - (VI) assistive or adaptive technology for children with disabilities.
- (4) Personnel do not use electronic media for personal use in the presence of children, with the exception of an e-reader when used during rest time for reading provided supervision is maintained.
- (j) **Program for 1-year-olds and younger.** Awake children:
 - (1) spend much of their time playing freely on the floor, including infant "tummy-time"; ~~and~~
 - (2) are not permitted in infant car seats, except during emergency drills, transportation, and arrival and departure with parents; and
 - (23) do not remain for more than 20 minute increments in equipment ~~that restricts~~ restricting freedom of movement, such as rest equipment, swings, high chairs, or stationary activity centers, except while eating in high chairs or similar stationary equipment. Children only sleep in appropriate rest equipment per OAC 340:110-3-296.

340:110-3-296. Rest time

- (a) **Rest equipment and bedding.**
 - (1) **Appropriate.** Equipment and bedding meets the requirements in this Section and Oklahoma Administrative Code (OAC) 340:110-3-302.
 - (2) **Size.** Equipment and bedding is of sufficient size to comfortably accommodate the child's size and weight.
 - (3) **Resting surface.** A sheet covers the entire resting surface.
 - (4) **Cover.** A cover is within reach of each child 1-year-old and older.
 - (5) **Individually assigned.** Equipment is assigned to individual children.
 - (6) **Individually used.** Equipment and bedding is in use by one child at a time, except during emergency plan procedures.
 - (7) **Spacing.** Equipment is spaced to allow easy access to children by the teaching personnel and for the safe evacuation of children.
 - (8) **Clean.** Equipment and bedding is cleaned and sanitized per OAC 340:110-3-304.

- (b) **Rest time - infants.**
 - (1) **Schedule.** The sleep schedule corresponds to the infant's needs and as closely as possible to the schedule established by the parents. Documentation is maintained per OAC 340:110-3-281.4(b).
 - (2) **Infant safe sleep environment.** Infant safe sleep environments are maintained.
 - (A) **Appropriate sleep environment.** The infant safe sleep environment requirements listed in (i) through (v) of this subparagraph are met.
 - (i) Infants sleep in cribs or play yards that meet the requirements per OAC 340:110-3-302(b), with the sides fully raised and secured.
 - (ii) Infants sleep directly on a tight-fitting sheet covering the mattress.
 - (iii) Only pacifiers without attachments to them are in rest equipment with infants, when used.
 - (iv) Infants are protected from overheating by adjusting room temperature and clothing.
 - (v) Infants birth through three months of age may be swaddled with an infant-sized, thin fabric, such as a receiving blanket, only when:
 - (I) requested by the parents and permission is maintained per OAC 340:110-3-281.4(b); and
 - (II) the infant is not mobile enough to move the fabric over his or her face.
 - (B) **Inappropriate sleep environment.** Infant safe sleep environment requirements listed in (i) through (viii) of this subparagraph are met.
 - (i) When an infant arrives asleep, the infant is ~~promptly~~ immediately moved to appropriate rest equipment.
 - (ii) When an infant falls asleep in equipment other than appropriate rest equipment, the infant is immediately moved to appropriate rest equipment within 20 minutes.
 - (iii) Soft products, such as quilts, comforters, sheepskins, pillows, stuffed toys, and bumper pads are prohibited inside and on the side of infant rest equipment.
 - (I) Covers, including blankets, are prohibited.
 - (II) An exception is swaddling per (A) of this paragraph.
 - (iv) Soft sleeping surfaces, such as soft mattresses, waterbeds, sofas, pillows, beanbag chairs, and inflatable mats are prohibited.
 - (v) Sleep positioners and elevated mattresses are prohibited, unless there is a medical reason as documented per OAC 340:110-3-281.4(b).
 - (vi) Play equipment, and other items, except for pacifiers, are not placed inside, above, or attached to the sides of the infant rest equipment, unless there is a medical reason for a monitor or other device as documented per OAC 340:110-3-281.4(b). However, mobiles may be securely attached or

Emergency Adoptions

hung above the crib provided no part of the mobile is within reach of the child.

(vii) Pacifiers are not attached to the infant or his or her clothing when in rest equipment.

(viii) Bibs are not placed around the infant's neck when in rest equipment.

(C) **Sleep position.**

(i) Infants are placed on their back for sleeping, unless there is a medical reason an infant should not sleep in this position as documented per OAC 340:110-3-281.4(b).

(ii) Infants who are able to turn themselves over, are placed initially on their back for sleeping, but may turn themselves over and sleep in a position they prefer.

(c) **Rest time - 1-year-olds through 4-year-olds.**

(1) **Schedule.** Children are provided a rest time.

(2) **Rest equipment.** Children rest on a mat, cot, or bed. However, 1-year-olds may also rest in cribs or play yards that meet requirements per OAC 340:110-3-302(b) with the sides fully raised and secured.

(3) **Overnight care.** The overnight requirements listed in (A) and (B) of this paragraph are met.

(A) **Rest equipment.** Mats are not used. Cots and beds have a waterproof pad or mattress.

(B) **Bedding.** In addition, cots and beds used overnight have a:

(i) top sheet and extra covers within reach of the child; and

(ii) pillow and pillow case.

(d) **Rest time - 5-year-olds and older.**

(1) **Schedule.** Children are not required to have a rest time.

(2) **Rest equipment.** When a child chooses to rest, a mat, cot, bed, sofa, futon, bean bag, or other similar rest equipment is provided.

(3) **Overnight care.** The same requirements as overnight care for 1-year-olds through 4-year-olds are met.

(e) **Restrictions.**

(1) **Floor.** Personnel do not allow children to sleep on the floor.

(2) **Covered heads and faces.** Children's heads and faces are not covered while resting. When a child continues to cover their head or face, the cover is removed once the child falls asleep.

(3) **Restraints.** Restraining children on rest equipment is prohibited.

(4) **After resting.** Once children have rested, they are not forced to remain on the rest equipment and are provided quiet activities until rest time is over.

(f) **Ratios and supervision.**

(1) **Ratios - 3- through 5-year-olds.** A rest time ratio exception may apply per OAC 340:110-3-286(a).

(2) **Light level.** Light levels are maintained for supervision per OAC 340:110-3-300(g).

340:110-3-301. Indoor and outdoor play areas

(a) **Indoor and outdoor play areas.**

(1) **Facility.** The facility requirements are met per Oklahoma Administrative Code (OAC) 340:110-3-300.

(2) **Equipment.** The equipment requirements are met per OAC 340:110-3-302.

(3) **Hazards.** The hazard requirements are met per OAC 340:110-3-303.

(4) **Cleanliness and sanitation.** The cleanliness and sanitation requirements are met per OAC 340:110-3-304.

(b) **Indoor play areas.**

(1) **Square footage for licensed capacity.** A minimum amount of indoor play area is required.

(A) There is at least 35 square feet of floor space per child for routine use by children.

(B) However, ~~programs licensed:~~

~~(i) on or after January 1, 2016, have at least 40 square feet of floor space per infant in classrooms routinely designated for infants only; or~~

~~(ii) before January 1, 2016, that added or converted an existing classroom after January 1, 2005, into a classroom routinely designated for infants only have at least 40 square feet of floor space per infant in that classroom. However, other existing infant classrooms are not required to meet this requirement.~~

~~new construction, existing space not previously licensed for child care, or programs licensed after November 1, 2016 are required to have 40 square feet of floor space per infant in rooms occupied only by infants.~~

(2) **Areas not counted toward licensed capacity or limited for children's use.** Some areas may not be suitable for children's use or only under the conditions listed in (A) through (C) of this paragraph.

(A) Areas not counted toward the licensed capacity are:

(i) restrooms, kitchens, and hallways;

(ii) storage closets and supply rooms;

(iii) personnel offices, work rooms, and break rooms;

(iv) areas occupied by furniture not for children's use;

(v) supplemental areas or rooms used exclusively for eating, rest time, gross motor play, or care of children who are ill; and

(vi) alternate indoor play areas in shared facilities as described per OAC 340:110-3-277(b).

(B) Basements, areas partially below ground level, and floors above ground level are only counted toward the licensed capacity when approved by the local or state fire governmental authority having jurisdiction. Fire approval is also required before children use the area for any reason, except as part of the emergency plans and procedures, such as tornados or lock-downs. Fire inspection reports indicate age restrictions. When used by children, basements are finished, dry, and ventilated.

- (C) Large areas, such as gymnasiums are only counted toward the licensed capacity when divided into classrooms for 3-year-olds or older. However, they may be used as a supplemental area for any age.
- (3) **Classroom capacity.** Classrooms are not routinely occupied by more children than can be accommodated by the square footage per (1) of this subsection.
- (4) **Use zones and impact-absorbing materials.** The use zone and impact-absorbing material requirements per (c) of this Section are met for indoor climbing equipment with a fall height over four feet.
- (c) **Outdoor play areas.**
- (1) **Square footage for licensed capacity.** A minimum amount of outdoor play area is required.
- (A) When the licensed capacity is for 23 or fewer children there is at least 75 square feet of outdoor play area per child for the licensed capacity.
- (B) When the licensed capacity is for 24 or more children there is at least 75 square feet of outdoor play area per child for at least one-third of the licensed capacity or 1800 square feet, whichever is greater.
- (2) **Areas not counted toward licensed capacity.** Alternate outdoor play areas required in shared facilities per OAC 340:110-3-277(b) are not counted toward the licensed capacity.
- (3) **Outdoor play area capacity.** The outdoor play areas are not routinely occupied by more children than can be accommodated by the square footage per (1) of this subsection. When the program has less than 75 square feet of outdoor play area per child for the licensed capacity, the program follows a rotation schedule as indicated on the classroom schedules.
- (4) **Location.** The outdoor play areas are situated to allow the:
- (A) children to reach them safely; and
- (B) supervision of areas where children cannot be easily seen.
- (5) **Fencing.** The outdoor play areas are enclosed by a building or fence.
- (A) The fence:
- (i) begins at ground level;
- (ii) is at least 48 inches high;
- (iii) poses no risk to children; and
- (iv) is maintained in a good condition, such as stable, secure, and upright.
- (B) However, 5-year-olds and older who are attending or have completed kindergarten may play in an unfenced or partially fenced on-site outdoor play area as part of a scheduled occasional supervised activity when the area is properly protected from traffic and other hazards.
- (6) **Exits and gates.** The outdoor play area(s):
- (A) has at least one exit that remains unlocked during the hours of operation and is away from the building. However, the unlocked exit may have a child-proof latch or a latch out of the reach of children; and
- (B) gates are kept closed, when children are playing outside.
- (7) **Water protection.** Bodies of water and water features meet the water activity requirements per OAC 340:110-3-291.
- (8) **Shade.** The outdoor play areas have shade accessible to children when outdoors.
- (9) **Open area.** The play equipment is arranged to have an open, continuous, uninterrupted, and unobstructed area in at least 25 percent of the required outdoor play area. Programs in shared facilities that share their outdoor play areas are exempt from this requirement.
- (10) **Use zones.** Use zones are clearance spaces and surfaces under and around a piece of equipment onto which a child falling or exiting from the equipment would be expected to land.
- (A) Use zones:
- (i) are free of obstacles, except for multi-axis, swing support structures;
- (ii) around all play equipment are arranged to prevent hazards from conflicting activities;
- (iii) around non-portable play equipment, with a fall height of:
- (I) 30 inches or less, extend at least three feet in all directions from the equipment perimeter, unless an exception in (B) of this subsection applies; or
- (II) more than 30 inches, extend at least six feet in all directions from the equipment perimeter, unless an exception in (B) of this subsection applies; and
- (iv) do not overlap. However, use zones in programs licensed before January 1, 2016, may overlap for existing non-portable play equipment, unless the equipment is moved.
- (B) However, use zones:
- (i) on the sides of play equipment, where the fall potential in that direction is minimal, are not required, such as play equipment with guardrails or barriers or the sides of swings;
- (ii) for single-axis swings that move forward and backward, extend two times the length of the swing chain to the front and rear of the swing midpoint. However, swings secured by a bar or strap and used by 2-year-olds or younger are not required to extend more than six feet; and
- (iii) for multi-axis swings, such as tire swings that move in a circle, extend six feet plus the length of the chain in every direction from the midpoint. At least a 30-inch clearance between a fully extended tire swing seat and the support structure is required.
- (C) The swing fall height is where the chain attaches at the top of the support structure.
- (11) **Impact-absorbing materials.** Impact-absorbing materials:
- (A) are required in use zones for:
- (i) climbers;

- (ii) swings;
- (iii) slides; and
- (iv) revolving equipment; and

(B) meet these requirements when obtained after August 1, 2003, as documented per OAC 340:110-3-281.2(c). However, grass is acceptable when the fall height is four feet or less and for swings secured by a bar or strap used by 2-year-olds or younger.

(i) Loose-fill materials, such as sand, pea gravel, wood playground mulch, shredded rubber mulch, and engineered wood fibers (EWF):

(I) are maintained at a depth of at least six inches by replacing, leveling, or raking. In addition, rubber mulch, EWF, and any other loose-fill material that is tested by the American Society for Testing and Materials International (ASTM) must comply with ASTM impact attenuation and EWF guidelines;

(II) remain loose and are not compacted. Grass and weeds in use zones are minimized to prevent compaction; and

(III) may be prevented from displacement by using impact mats that meet ASTM guidelines for impact attenuation.

(ii) Unitary materials, such as rubber mats and poured in place rubber:

(I) comply with ASTM guidelines for impact attenuation;

(II) have an ASTM rating equal to or greater than the fall height; and

(III) do not have rips, tears, and loose seams.

(12) **Surfaces.** At least two surface types are required. Programs licensed:

(A) on or after January 1, 2016, only count surfaces outside of the use zones, including impact-absorbing materials that extend beyond the use zones; and

(B) before January 1, 2016, may count surfaces inside of the use zones, unless square footage is added to the outdoor play area.

[OAR Docket #16-880; filed 12-1-16]

TITLE 340. DEPARTMENT OF HUMAN SERVICES CHAPTER 110. LICENSING SERVICES

[OAR Docket #16-881]

RULEMAKING ACTION:

EMERGENCY adoption

RULES:

Appendix EE. Oklahoma Director's Credential [REVOKED]

Appendix EE. Oklahoma Director's Credential [NEW]

(Reference WF 16-06)

AUTHORITY:

Director of Human Services; Section 162 of Title 56 of the Oklahoma Statutes (O.S. 56 § 162) and 10 O.S. § 404.

ADOPTION:

October 11, 2016

APPROVED BY GOVERNOR:

November 22, 2016

EFFECTIVE:

Immediately upon Governor's approval or November 1, 2016, whichever is later.

EXPIRATION:

Effective through September 14, 2017, unless superseded by another rule or disapproved by the Legislature.

SUPERSEDED EMERGENCY ACTIONS:

n/a

INCORPORATIONS BY REFERENCE:

n/a

FINDING OF EMERGENCY:

Emergency rulemaking is requested effective November 1, 2016 to comply with SB 1554.

ANALYSIS:

The proposed revisions to Chapter 110, Appendix EE Oklahoma Director's Credential (Appendix EE) amend minimum educational licensing requirements for child care directors. Child care programs impacted include child care centers, drop-in programs, and programs for sick children.

Senate Bill (SB) 1554 approved during the 2016 Legislative Session amends minimum educational licensing requirements for child care directors effective November 1, 2016. Appendix EE amendments provide an additional education option for child care program directors to include having obtained a bachelor's degree or post graduate degree in any field of study.

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(F), AND EFFECTIVE UPON APPROVAL BY THE GOVERNOR OR NOVEMBER 1, 2016, WHICHEVER IS LATER:

APPENDIX EE. OKLAHOMA DIRECTOR'S CREDENTIAL [REVOKED]

APPENDIX EE. OKLAHOMA DIRECTOR'S CREDENTIAL [NEW]

Level	General Education	Early Childhood Education (ECE) Child Development (CD) School-Age (SA) Knowledge and Skills	Administration (admin) Management (mgt) Knowledge and Skills	Experience	Annual Renewal Clock-Hours
Platinum	PhD, EdD ¹ MS, MA ² BS, BA ³	15 ECE/CD/SA credit hours ⁴	9 admin/mgt credit hours ⁴	3 months ⁵	30 hours job related training ⁶
Gold	AA, AS, AAS ⁷	12 ECE/CD/SA credit hours ⁴	6 admin/mgt credit hours ⁴ -or- Directors' Leadership Academy I & II ⁸	6 months ⁵	30 hours job related training ⁶
Silver	3 credit hours ⁴ in English Composition I	Certificate of Mastery ⁹ -or- 9 ECE/CD/SA credit hours ⁴ -or- CDA/CCP ¹⁰	6 admin/mgt credit hours ⁴ -or- Directors' Leadership Academy I & II ⁸ -or- Director's Certificate of Completion ¹¹ -or- Pathway Director Training ¹²	9 months ⁵	30 hours job related training ⁶
Copper Effective 11/1/16	BS, BA ³ , or any advanced degree beyond bachelors level	Not required	Not required	12 months ⁵	30 hours job related training ⁶
Bronze	High School Diploma -or- GED	6 ECE/CD/SA credit hours ⁴ -or- CDA/CCP ¹⁰ -or- Oklahoma Competency Certificate in ECE ¹³	3 admin/mgt credit hours ⁴ -or- approved admin/mgt credential ¹⁴ -or- 40 admin/mgt clock-hours ¹⁵	12 months ⁵	20 hours job related training ⁶

Footnotes

1. Doctoral Degree of Philosophy, Doctoral Degree of Education earned at a regionally-accredited college or university.
2. Master Degree of Science, Master Degree of Art earned at a regionally-accredited college or university.
3. Bachelor Degree of Science, Bachelor Degree of Art earned at a regionally-accredited college or university.
4. Approved college credit hours must be on the Recommended Approved Coursework List (www.cecpd.org) and earned at a regionally-accredited college or university.
5. Qualifying experience must be as a teacher, master teacher, family child care home primary caregiver, assistant director, or director in a licensed child care setting (30 hours per week).
6. **No more than 6 clock-hours of informal professional development is counted toward annual renewal hours.** Training in the core content areas identified in "Oklahoma Core Competencies for Early Childhood Practitioners": 1) child growth and development; 2) health, safety and nutrition; 3) child observation and assessment; 4) family and community partnerships; 5) learning environments and curriculum; 6) interactions with children; 7) program planning, development and evaluation; and/or 8) professionalism and leadership.
NOTE: Entry Level Child Care Training (ELCCT) cannot be used to meet level or renewal criteria.
7. Associate in Arts, Associate in Science, Associate in Applied Science earned at a regionally-accredited college or university.
8. Directors' Leadership Academy is available through the Center for Early Childhood Professional Development (www.cecpd.org).
9. The Certificate of Mastery in child development or early childhood education is a minimum 18-credit hour certificate awarded by an Oklahoma community college.
10. Current Child Development Associate (CDA) or Certified Childcare Professional (CCP) credential.
11. Certificate of Completion for directors and assistant directors is issued by the Scholars for Excellence in Child Care (www.okhighered.org/scholars/).
12. Early Care and Education: Director's Pathway to Program Administration is available through Oklahoma Career Technology Centers (www.okhighered.org/scholars/career-tech.shtml).
13. Master Teacher or Director Competency Certificate only awarded by Oklahoma Department of Career Technology.
14. Approved administration/management credential, such as the National Administrator Credential (NAC).
15. Training approved through the Oklahoma Professional Development Registry, with at least 10 clock-hours in any three management core knowledge areas: Educational Programming & Family Support;

Personnel & Professional Self-Awareness; Staff Management & Human Relations; Leadership & Advocacy; Program Operation & Facilities Management; Legal Management; or Fiscal Management.

NOTE: Completion of Director's Entry Level Training (DELT) course meets 20-clock hours of this requirement. Informal professional development is not counted toward meeting this requirement.

[OAR Docket #16-881; filed 12-01-16]

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

1:2016-38.

EXECUTIVE ORDER 2016-38

I, Mary Fallin, Governor of the State of Oklahoma, pursuant to the authority vested in me by Section 90.10 of Title 25 of the Oklahoma Statutes, in recognition of Oklahoma Pearl Harbor Remembrance Day and those who died or were injured in World War II, hereby direct the appropriate steps be taken to fly all American and Oklahoma flags on State property at half-staff from 8:00 a.m. until 5:00 p.m. Wednesday, December 7, 2016, to honor the many Oklahoma and United States citizens who died on December 7, 1941, as a result of the attack by the Japanese on Pearl Harbor, Hawaii.

This Executive Order shall be forwarded to the Division of Capital Assets Management 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 2nd day of December, 2016.

BY THE GOVERNOR OF THE
STATE OF OKLAHOMA

Mary Fallin

ATTEST:
Mike Hunter
Secretary of State

[OAR Docket #16-883; filed 12-2-16]

1:2016-39.

EXECUTIVE ORDER 2016-39

I, Mary Fallin, Governor of the State of Oklahoma, pursuant to the power and authority vested in me by Sections 1 and 2 of Article VI of the Oklahoma Constitution hereby order the formation of the Oklahoma Occupational Licensing Task Force (Task Force).

The Task Force shall conduct a comprehensive review of occupational licensing in Oklahoma and provide recommendations to the Governor for the potential removal of license requirements that do not promote the health and/or safety of Oklahomans and are unreasonable barriers to Oklahoma workers' workforce entry.

Specifically, the Task Force shall, at a minimum:

1. Identify all occupational licenses (licenses) required in Oklahoma;
2. Identify all state agencies, boards, and commissions involved with the administration of licenses;
3. Determine how each license is administered, including a review of information technology platforms that are or could be utilized and the fee structure for obtaining licenses;
4. Review the necessity and appropriateness of training levels and other requirements required to obtain licenses; and
5. Evaluate whether the public health and safety goals and concerns addressed by license requirements outweigh the barriers to workforce entry they place on Oklahoma workers.

The Labor Commissioner shall serve as the Chairperson of the Task Force. The members of the Task Force shall be appointed by and serve at the pleasure of the Chairperson, and shall include: two members of the Oklahoma State Senate; two members of the Oklahoma House of Representatives; the Attorney General, or designee; the President of the Oklahoma State Chamber, or designee; one member of the Oklahoma Justice Reform Task Force; two members of organizations focused on workforce and economic development; and a member of an organization focused on poverty reduction.

The Task Force shall meet at such times and places as the Chairperson deems appropriate. Members shall serve without compensation. Administrative support for the Task Force, including personnel necessary to ensure the proper performance of its duties and responsibilities, shall be provided by the Oklahoma Department of Labor.

All Executive departments, officers, agencies and employees of this State shall cooperate with the Task Force in carrying out its duties and responsibilities, including providing any information, records and reports as may be requested by the Chairperson.

Executive Orders

The Task Force shall prepare and submit a final report containing a detailed statement of the findings and policy recommendations of the Task Force to the Governor, the President Pro Tempore of the Senate, and the Speaker of the House of Representatives no later than December 31, 2017. This Task Force shall sunset upon issuance of the final report, unless otherwise extended by further executive order.

This Executive Order shall be distributed to the Secretary of State and Labor Commissioner.

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 3rd day of December, 2016.

BY THE GOVERNOR OF THE
STATE OF OKLAHOMA

Mary Fallin

ATTEST:
Mike Hunter
Secretary of State

[OAR Docket #16-894; filed 12-3-16]

1:2016-40.

EXECUTIVE ORDER 2016-40

I, Todd Lamb, Governor of the State of Oklahoma, hereby direct that appropriate steps be taken to fly all American and Oklahoma flags on State property at half-staff upon receipt to 5:00 p.m. on the day of internment, to honor John Glenn, who passed away on Thursday, December 8, 2016.

This Executive Order shall be forwarded to the Department of Capital Assets Management, 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 9th day of December, 2016.

BY THE GOVERNOR OF THE
STATE OF OKLAHOMA

Todd Lamb

ATTEST:
Mike Hunter
Secretary of State

[OAR Docket #16-896; filed 12-9-16]
